

COVID-19 Family Guidance for a Healthy Return



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Preface

The Cumberland County Schools' (CCS) COVID-19 Family Guidance for a Healthy Return is in response to the coronavirus, COVID-19, which was first identified in Wuhan, China, in December 2019. The virus quickly spread throughout the globe and was named a pandemic by the World Health Organization in March 2020.

COVID-19 is a mild to severe respiratory illness that is caused by a coronavirus. It is transmitted chiefly by contact with infectious material (such as respiratory droplets) or with objects or surfaces that are contaminated by the virus. It is characterized by fever, cough, and shortness of breath and may progress to pneumonia and respiratory failure. Specifically, COVID-19 is thought to spread mainly through close contact from person-toperson. Some people without symptoms (asymptomatic) may be able to spread the virus. Scientists and health professionals are still learning about how the virus spreads and the severity of the illness it causes. Research is underway for the development of a vaccination; however until immunization and treatment are approved and available, COVID-19 guidance to ensure a safe and healthy learning and work environment.

The information contained in the COVID-19 Family Guidance for a Healthy Return is based on currently available data about COVID-19. This manual will be updated as guidance from the state, and local officials become available.



COVID-19 DISCLAIMER: All Cumberland County Schools district-level and schoolbased communications or guidance (e.g., handbooks, websites, social media communications, etc.) are subject to change at any time due to changing COVID-19 conditions and related health or safety guidance.

Immunizations and Health Assessment

The North Carolina General Statutes 130A-152(a) requires immunizations for every child attending a North Carolina school. The N.C.G.S. § 130A-440(a) requires a health assessment for every child who enters a North Carolina public school for the first time. Immunizations and NC Health Assessment Transmittal Form may be obtained at your child's primary health care provider or by clicking the following link: <u>NC Health</u> <u>Assessment Transmittal Form</u>

PUBLIC SCHOOLS OF NORTH CAROLINA	THE PUBLIC SCHOOLS OF NORTH CAROLINA
January 2016rev 2017 State Board of Education Department of Public Instruction	January 2016rev State Board of Education Department of Public Instruction
NORTH CAROLINA HEALTH ASSESSMENT TRANSMITTAL FORM	Hearing screening information: Passed hearing screening: Yes No
This form and the information on this form will be maintained on file in the school attended by the student named herein	Concerns related to student's hearing:
and is confidential and not a public record. (Approved by North Carolina Department of Public Instruction and Department of Health and Human Services)	
PARENT to COMPLETE THIS SECTION	Recommendations, concerns, or needs related to student's health and required school follow-up:
Student Name:	
(Last) (First) (Middle)	
Birthdate (M/D/YYYY): School Name:	School follow-up needed: Yes No Medical Provider Comments:
Home Address: City: State: County:	
Parent Information: Name of Parent, Guardian, or person standing in Telephone(s) loco parentis:	Please attach other applicable school health forms:
Home:	Immunization record attached:
Work:	School medication autoritation form attached:
Cell Phone:	School medication authorization form attached:
Health Concerns to be shared with authorized persons (school administrators, teachers, and other school personnel who require such	Astima action pian atrached:
information to perform their assigned duties):	Health Care: Professional's Certification I certify that I performed, on the student named above, a health assessment in accordance with G.S. 1304-440(b) that included a medical history and physical examination with screening for vision and hearing, and I appropriate, testing for anemia and tuberculosis. I certify that the information on this form is accurate and complete the best of m involvedue.
HEALTH CARE PROVIDER TO COMPLETE THIS SECTION	form is accurate and comprete to the best or my knowledge.
Medications prescribed for student:	Name: Tible:
Student's allergies, type, and response required:	Signature: Date (m/d/yyyy):
	Date of Exam (if Different):
	Practice/Clinic Name: Practice/Clinic Adverse: Practice/Clinic Adverse:
Special det instructions:	
Health-related recommendations to enhance the student's school performance:	
	Practice/Clinic Oby: State: Zip: Phone: Fax:
Vision screening Information: Passed vision screening: □ Tes □ iio Concerns related to student's vision:	Provider Stamp Hare:
Page 1 of 2	Page 2 of 2 Public Possibles Newvees

Parents and guardians will have thirty (30) calendar days from the first day of student attendance to provide the required documentation. CCS wants to ensure that all parents and guardians are aware that the **COVID-19 pandemic** does not grant an extension to the 30-day requirement to provide proof of the required immunization and health assessment.

NC IMMUNIZATION REQUIREMENTS 2020-2021

Pre-kindergarten	Grades K-5	Grade 6	Grades 7-11	Grade 12
(4) DTP/DTaP	*(5) DTP/DTaP	*(5) DTP/DTaP	*(5) DTP/DTaP	*(5) DTP/DTaP
	with booster on/after 4 th birthday	with booster on/after 4 th birthday	with booster on/after 4 th birthday	with booster on/after 4 th birthday
			Tdap	Tdap
			Required if individual had not previously	(Booster required if entering 6 th grade
			received it and are entering the 7th grade	on/after 8-1-2008, if 5 years or more
			or by 12 years of age whichever comes	have passed since the last dose of
	(4) Dalia	*(4) Polio	first. Effective 7-1-2015 *** (4) Polio	tetanus/diphtheria toxoid)
(3) Polio	**(4) Polio	(4) Pollo	(4) Pollo	***(4) Polio
	4 th dose is required on/after the 4 th birthday and before entering school for			
	the first time. Effective 7-1-2015			
**** (1) MMR	**** (2) MMR	**** (2) MMR	**** (2) MMR	**** (2) MMR
	(1 st dose on/after 1 st birthday) At least 28			
onvarier 1 birthady	day interval needed between doses	day interval needed between doses	day interval needed between doses	day interval needed between doses
(3) Hepatitis-B	(3) Hepatitis-B	(3) Hepatitis-B	(3) Hepatitis-B	(3) Hepatitis-B
	Third dose shall NOT be given prior to 24			
	weeks of age if born on/after 11-17-2001			
(1) Varicella	(2) Varicella	(1) Varicella	(1) Varicella	(1) Varicella
On/after 1 st birthday			(1st dose on/after 1st birthday) Required	
	day interval needed between doses.		if born on/after 4-1-2001 and no varicella	
	(As of 7-1-2015, historical		disease documentation. Parent or health	
	documentation of disease must include approximate date or age of infection and	care provider may provide written history of disease but must include	care provider may provide written history of disease but must include	care provider may provide written history of disease but must include approximate
	a health care provider signature.)	approximate date or age of infection.	approximate date or age of infection.	date or age of infection.
				date of age of infection.
(1-4) Hib	Hib			
Hib vaccine is not given after 5 years of age. If the first dose is given on/after 15	Hib vaccine is not given after 5 years of age. If not yet 5 years of age, same			
months of age, series is complete. If 4 th	requirements as for Pre-K.			
dose is given on/after 12 months of age,	requirements as for the K.			
series is complete. (Dosage requirement				
may vary depending on the vaccine type				
and the age when received first dose.)				
(1-4) Pneumococcal Conjugate	Pneumococcal Conjugate		(1) Meningococcal conjugate	(2) Meningococcal conjugate
Is required for individuals born on/after	Pneumococcal Conjugate vaccine is not		(1 st dose on/after 10 th birthday)	(1 st dose on/after 10 th birthday)
7-1-2015 and if younger than 5 years of	given after 5 years of age.		Required for individuals born on/after	Required for individuals born on/after
age. If the first dose is given on/after 24	If not yet 5 years of age, same		1-1-2003 and entering the 7 th grade or by	1-1-2003. (2 nd dose not required if entered 12 th grade before 8-1-2020 or if
months of age, series is complete. (Dosage and interval requirements may	requirements as for Pre-K.		12 years of age, whichever comes first (Effective 7-1-2015)	1 st dose received on or after 16 th
vary depending on the age when received			(Encenve / -1-2015)	birthday.)
first dose.)				
	•			

NOTE: Four day rule applies to all required minimum ages.

* Children receiving #4 DTP/DTaP on or after 4th birthday are not required to have #5.

** Children receiving #3 Polio on or after 4th birthday and at least 6 months after the 2nd dose are not required to have #4.

*** Children receiving #3 Polio on or after their 4th birthday are not required to have #4. Children 18 years or older are not required to receive a polio vaccine.

**** If given separately: Two measles doses, two mumps doses, and one rubella dose required. First dose must be on or after first birthday and at least a 28 day interval is needed between the first and second doses. Second mumps dose only required if entered school on or after 7-1-2008. Cumberland County Schools Family Guidance for a Healthy Return as of October 30, 2020 Page 6

When to Keep Your Child Home

As you may know, COVID-19 can be easily spread from person-to-person. Therefore, we are taking steps to reduce the spread of COVID-19 in school.

Parents, we need your help to do this. Some children may not be able to verbalize their symptoms, which can delay responding to their illness, so it is important to observe for the signs and symptoms of COVID-19 or unusual behavior that may be a sign of illness.

People with COVID-19 have had a wide range of symptoms reported ranging from mild symptoms to severe illness. Symptoms may appear 2-14 days after exposure. Symptoms may include fever or chills, cough, shortness of breath or difficulty breathing, muscle or body aches, headache, a new loss of taste or smell, sore throat, congestion or runny nose, nausea, vomiting, diarrhea, and fatigue.

Before sending your child to school, review the symptoms below, and mark all that apply to your child:

- 1. Nausea, vomiting, diarrhea, and other stomach/GI symptoms
- 2. Headache
- 3. Fever 100.4°F (38°C) or greater
- 4. Sore throat
- 5. Cough, congestion, or runny nose
- 6. Shortness of breath
- 7. Muscle or body aches
- 8. New loss of taste or smell

If you answered yes to number 1 and 3, your child is to remain at home. It is also recommended that children who present multiple symptoms stay at home.

No student with an illness shall return to school until they have been **fever free** for 24 hours without fever-reducing medicine, and have felt well for 24 hours.

If a student has a negative COVID-19 test, they can return to school once there is no fever without the use of fever-reducing medicine, and they have felt well for 24 hours.

If diagnosed with COVID-19 based on a test or symptoms, student may return to school when:

- at least 1 day (24 hours) have passed since recovery defined as resolution of fever without the use of fever-reducing medications; and
- improvement in respiratory symptoms (e.g., cough, shortness of breath); and
- at least 10 days have passed since symptoms first appeared.

This list does not include all possible symptoms. Centers for Disease Control (CDC) will continue to update this list as they learn more about COVID-19.

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

No

No No

□ No

🗌 No

□ No

□ No

No No

🗌 No



COVID-19 School Attendance Protocol

Students who test positive for COVID-19, have had close contact or are having COVID-19 symptoms will be excluded from school and provided virtual learning opportunities.

EXPOSURE, NO SYMPTOMS: Student shares they were exposed to someone with COVID-19 within the last 2 weeks but is NOT symptomatic.

EXCLUSION

- ★ If the parent or guardian is present, the student will not be allowed to enter the school building.
- ★ If the parent or guardian is not present the student will be moved to a designated area with supervision until transportation is available.
- ★ The parent or guardian will be notified, and the student must go home immediately.
- ★ The student may return to school 14 days after last close contact if no symptoms develop and they do not test positive for the COVID-19.
- ★ The student will be afforded virtual learning opportunities.

TRANSPORTATION

★ Students will not be permitted to utilize the bus in order to leave the school building.

NOTIFICATION

★ The school staff will immediately contact the Office of Health Services who will report the potential exposure to the Cumberland County Department of Public Health.

CLEANING

★ The school will follow directions shared by the Cumberland County Department of Public Health for this particular instance.

COMMUNICATIONS WITH STUDENTS, FAMILIES, AND STAFF

★ The school will follow directions shared by the Cumberland County Department of Public Health for this particular instance.

DIAGNOSIS, NO SYMPTOMS: Student shares they were diagnosed with COVID-19 less than 10 days ago, but is NOT symptomatic.

EXCLUSION

- ★ If the parent or guardian is present, the student will not be allowed to enter the school building.
- ★ If the parent or guardian is not present the student will be moved to a designated area with supervision until transportation is available.
- ★ The parent or guardian will be notified, and the student must go home immediately.
- ★ The student may return to school ten days after the date of their first positive COVID-19 diagnostic test, assuming they have not subsequently developed symptoms since their positive test.
- ★ The student will be afforded virtual learning opportunities.

TRANSPORTATION

★ Students will not be permitted to utilize the bus in order to leave the school building.

NOTIFICATION

★ The school staff will notify the Office of Health Services who will work with Cumberland County Department of Public Health officials to follow their procedures for contact tracing.

CLEANING

- ★ School officials will close off areas used by the sick person, including school transportation vehicles, and will not use these areas until after cleaning and disinfecting is complete.
- ★ School officials will consult with the Cumberland County Department of Public Health as to whether closure of a classroom or entire building is required. There may be no need to close the school if the Cumberland County Department of Public Health determines that close contacts are excluded, and there is sufficient space to continue normal operations.

CLOSURE

★ The Cumberland County Department of Public Health may, in some situations, determine that closure of a facility is needed; this will be determined on a case-bycase basis.

COMMUNICATIONS WITH STUDENTS, FAMILIES, AND STAFF

- ★ School officials will coordinate with the Cumberland County Department of Public Health to determine how to inform families as appropriate; the situation may not warrant that parents and guardians are notified, but all proper notifications will be made.
- ★ If positive COVID-19 test:
- ★ The Cumberland County Department of Public Health will assist in notifying staff and families that there was an individual who was at the school who has tested positive with COVID-19.
- ★ A public health professional may contact staff and families if they are identified as a close contact to the individual who tested positive.
- ★ The notice to staff and families will maintain confidentiality in accordance with NCGS § 130A143 and all other state and federal law.

SYMPTOMS: Student presents with at least one of the following COVID-19 symptoms (fever, chills, shortness of breath or difficulty breathing, new cough, new loss of taste or smell).

EXCLUSION

- ★ If the parent or guardian is present, the student will not be allowed to enter the school building.
- ★ If the parent or guardian is not present the student will be moved to a designated area with supervision until transportation is available.
- ★ The parent or guardian will be notified, and the student must go home immediately and seek medical care.
- ★ If diagnosed with COVID-19 based on a test or symptoms, person may return to school when:
 - at least 1 day (24 hours) have passed since recovery defined as resolution of fever without the use of fever-reducing medications; and
 - Improvement in respiratory symptoms (e.g., cough, shortness of breath); and
 - at least 10 days have passed since symptoms first appeared.
- ★ If they have had a negative COVID-19 test, the student may return to school once there is no fever without the use of fever-reducing medicines and has felt well for 24 hours.
- ★ The student will be afforded virtual learning opportunities.
- ★ A student can return to school, following normal school policies, if they receive confirmation of an alternative diagnosis from a health care provider that would explain the COVID-19-like symptom(s), once there is no fever without the use of fever-reducing medicines and they have felt well for 24 hours.

TRANSPORTATION

★ Students will not be permitted to utilize the bus in order to leave the school building.

NOTIFICATION

- ★ If a student has a positive diagnosis, the school staff will immediately notify the Office of Health Services, who will work with the Cumberland County Department of Public Health of laboratory-confirmed.
- ★ COVID-19 case(s) among students or staff (as required by NCGS § 130A-136) and work with them to follow their procedures such as contact tracing.
- ★ School officials will follow the directions shared by the Cumberland County Department of Public Health for this particular instance, such as contacting students, staff, and families, and/or specific cleaning protocols.

CLEANING

★ School officials will close off areas used by the sick person, including school transportation vehicles, and will not use these areas until after cleaning and disinfecting.

CLOSURE

★ School officials will close off areas used by the sick person, and will not use these areas until after cleaning and disinfecting.



SYMPTOMS: Student presents with at least one of the following COVID-19 symptoms (fever, chills, shortness of breath or difficulty breathing, new cough, new loss of taste or smell).

(Continued)

COMMUNICATIONS WITH STUDENTS, FAMILIES, AND STAFF

- ★ School officials will coordinate with the Cumberland County Department to determine how to inform families as appropriate.
- ★ If positive COVID-19 test:
 - The Cumberland County Department of Public Health will assist in notifying staff and families that there was an individual who was at the school who has tested positive with COVID-19.
 - A public health professional may contact families if they are identified as a close contact to the individual who tested positive.
 - The notice to staff and families will maintain confidentiality in accordance with NCGS § 130A-143 and all other state and federal laws.



Keeping Your Child Hydrated at School

Due to COVID-19, water fountains will not be available for student drinking. They may be used to fill a water bottle that the student has brought to school. Staying hydrated will raise students' alertness and focus, which leads to better academic results. Being hydrated is an easy solution that we cannot pass up. It is a simple way to lessen sick days, improve grades, save time, and help with dehydration.



How can you help?

Send your child to school daily with a filled water bottle for their consumption. We are requesting that parents and guardians label their child's water bottle with their full name.



Social Distancing

Parents and guardians can help prevent the spread of COVID-19 by adopting preventative health practices at home. Avoid close contact with people who are sick or showing signs of COVID-19 exposure. Introduce children to the importance of keeping at least six feet between themselves and others outside of your home. Limiting face-to-face contact with others is the best way to reduce the spread of COVID-19.

How will social distancing look at your child's school?

Implementing social distancing strategies for Cumberland County Schools will be based on each school's unique space and needs.

Your school principal will think creatively about increasing the physical space between students and limiting interactions in large group settings. Some of the following strategies may be considered:

- 1. CCS school administrators will decide which activities and events such as field trips, student assemblies, special performances, school-wide parent meetings, or spirit nights will be virtual or canceled.
- 2. School principals will modify classes where students are likely to be in very close contact. For example, in physical education or band classes, alternate classroom locations and capacities may be implemented to prevent class mixing with others in the gymnasium or band room. The number of students per class may also be limited in compliance with social distancing requirements.
- 3. Classroom teachers will rearrange student desks to maximize the space between students. The desk will face in the same direction rather than facing each other. This strategy will reduce the transmission of respiratory droplets when students speak, cough, or sneeze.

How will common areas be socially distanced?

- 1. Students may be allowed to eat lunch and breakfast in their classrooms rather than mixing in the cafeteria.
- 2. If it is not possible to suspend use of common areas, CCS principals will modify the schedule to limit the extent to which students mix with each other, and particularly with students from other classes (e.g., stagger lunch and recess by class, send a few students into the library to pick out books rather than going as a class, alternate use of lockers).
- 3. Hallway use may be restricted by implementing a staggered release of classes.
- 4. The principal will design a schedule to avoid multiple classes being in the bathrooms at once.
- 5. In elementary school settings, principals will stagger playground use rather than allowing multiple classes to play together.

Non-Essential Visitors on Cumberland County Schools Campuses

The principal may limit non-essential visitors and the presence of volunteers for classroom activities, cafeteria support, and other events.

Respiratory Etiquette

Parents and guardians can practice proper respiratory etiquette while at home and encourage their children to do the same. Practice covering coughs by always coughing in the bend of the arm and using a tissue. Children can practice this at home, so that once they attend school, it will be a healthy habit.

Facial Tissues

- 1. Parents and guardians should encourage their child to cover coughs and sneezes with a tissue.
- 2. Used tissues should be thrown in the trash and hands washed immediately with soap and water for at least 20 seconds.
- 3. If soap and water are not readily available, hand sanitizer containing at least 60 percent alcohol can be used for children who have been taught to use hand sanitizer safely.

Cover Your Cough

Parents and guardians are encouraged to teach their child to cough in the bend of their arm to cover their cough. Parents and guardians can reinforce this daily with at home practice sessions.



Video elementary cover your cough: <u>Cover Your Mouth When</u> <u>You Cough! PlayKids' I Love to Learn: Kids songs, when you</u> <u>sneeze, be healthy</u>



Video secondary students: <u>Cover Your Cough and Sneeze with Kate</u> <u>Tabori, MD</u>

Wearing Face Coverings

Parents and guardians should encourage their child to wear face coverings when away from home to ease the school setting's transition.

Face coverings are required for students, staff, visitors, and volunteers. Face coverings are designed to protect



other people in case the wearer is infected and is not showing signs or symptoms of COVID-19 yet. Staff and students must wear these coverings as an additional step to help slow the spread of COVID-19 by containing person-to-person droplet transmission.

What are the requirements for face coverings during the school day?

Face coverings are required for students, and staff on buses, inside school buildings, school grounds to include outside. Wearing face coverings is most important when students and staff cannot maintain six feet apart. CCS will provide each student with five cloth face coverings. All school visitors will be required to wear a face covering when visiting a Cumberland County School.

Can face shields be substituted for face coverings?

One is not a substitute for the other since face coverings protect both the nose and mouth, and face shields are eye protection only. Anyone who cannot tolerate a cloth face covering due to developmental, medical, or behavioral health needs will be evaluated individually.

What can I do to assist my child with face coverings?

- 1. Parents and guardians should ensure that any personal cloth face covering and/or face shields are labeled with the child's name.
- 2. Parents and guardians can teach proper use and removal of cloth coverings by modeling the following steps:
 - a. Wash your hands before putting on the face covering.
 - b. Put face covering over your nose and mouth and secure it under the chin.
 - c. Try to fit face covering snugly against the sides of the face.
 - d. Allow your child to practice these steps to ensure they can adequately wear face coverings.
- 3. Removal of face coverings:
 - a. Untie the strings behind the head or remove ear loops.
 - b. Handle only by strings or ear loops.
 - c. Fold outside corners together.
 - d. Be careful not to touch eyes, nose, and mouth when removing.
 - e. Wash your hands immediately after removing.

Wearing Face Coverings (continued)

What can I do to assist my child with face coverings? (continued)

- 4. Face coverings may be challenging for younger children to wear in all day settings; however, children are required to wear them.
- 5. Cloth face coverings must be worn by children and are essential in times when social distancing is difficult. Face coverings are not recommended for anyone who has trouble breathing or is unable to remove their face covering without assistance.

Who should not wear a face covering?

- Anyone who has trouble breathing or is unconscious.
- Anyone who is incapacitated or otherwise unable to remove the face covering without assistance.
- Anyone who cannot tolerate a cloth face covering due to developmental, medical, or behavioral health needs.

Steps to Cleaning Face Covering

- Face coverings can be included with your regular laundry.
- Use regular laundry detergent and the warmest appropriate water setting for the cloth used to make the face covering.

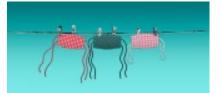
Washing Cloth Face Covering by Hand

- Prepare a bleach solution by mixing 5 tablespoons (1/3rd cup) household bleach per gallon of room temperature water or 4 teaspoons household bleach per quart of room temperature water.
- Check the label to see if your bleach is intended for disinfection. Some bleach products, such as those designed for safe use on colored clothing, may not be suitable for disinfection. Ensure the bleach product is not past its expiration date. Never mix household bleach with ammonia or any other cleanser.
- Soak the face covering in the bleach solution for 5 minutes.
- Rinse thoroughly with cool or room temperature water.

Drying Your Face Covering

- When using a dryer, select the highest heat setting and leave in the dryer until completely dry.
- When air drying, lay flat and allow to dry completely or use an outside clothes hanger.
- If possible, place the cloth face covering in direct sunlight.







Glove Usage by Cumberland County Schools Staff

CCS office staff or staff who provide care to a student who is sick or showing signs and symptoms of COVID-19 or flu should follow these guidelines:

- All CCS staff will use disposable non-latex gloves anytime when touching or having contact with body fluids, such as blood, saliva, mucous, vomit, urine, or stool.
- Medication clerks and office staff will wear disposable gloves if they come in contact with a student who has tested positive for COVID-19 or shows signs and symptoms of this virus.
- CCS staff and medication clerks will wear gloves when cleaning and disinfecting the health room, especially frequently touched surfaces, such as door handles, sink handles, and light switches during the school day.



Handwashing

Parents and guardians should practice and demonstrate the correct procedure for thoroughly washing their hands at home and teach the children in their home to do the same. The CDC recommends washing hands often, especially after coughing, sneezing, blowing your nose, going to the bathroom, and before eating.



During school hours, CCS staff will take the following steps to ensure proper hand hygiene.

- 1. Teachers and teacher assistants will reinforce proper handwashing for students through lesson planning and modeling to support healthy hygiene behaviors.
- 2. Listed below are the appropriate steps for handwashing:
 - a. Wet hands with water.
 - b. Apply soap from the dispenser.
 - c. Rub hands together (front, back, in-between fingers, tips of fingers and around thumbs) for at least 20 seconds (sing the happy birthday song twice).
 - d. Rinse hands thoroughly with free-flowing water.
 - e. Dry hands with a paper towel.
 - f. Turn the faucet off with your paper towel.
 - g. Throw paper into a no-touch trash can.



Video: <u>How to Wash Your Hands for Kids – WHO Technique -</u> <u>Coronavirus (COVID-19) Hand Washing video</u>

Will there be visual displays for handwashing?

- 1. Posters will be displayed with the directions for proper handwashing over sinks in the classrooms and bathrooms to include pictures for younger students.
- 2. Custodial staff will ensure that all soap dispensers are filled and checked daily.







Hand Sanitizer

What if soap and water are not available?

When soap and water are not available, hand sanitizer with at least 60 percent alcohol will be available for staff and students who can safely use hand sanitizer.

How much hand sanitizer should my child use?

Follow these steps:

- 1. Use a dime-sized amount of hand sanitizer
- 2. Instruct your child to rub their hands together (as if washing)
- 3. Spreading the product on all sides and between fingers
- 4. Allow drying

Did you know?

Alcohol-based hand sanitizer can disturb the natural pH and barrier of the skin, leaving skin vulnerable to allergens that can penetrate beneath the surface and trigger an autoimmune reaction. This reaction causes reddening, itching, blisters, swelling, peeling, and cracking.

What can I use if my child is allergic to hand sanitizer?

If your child's hands are swelling up, cracking, peeling, weeping, or exhibiting other signs of an allergic reaction, CCS staff will contact the parent and guardian immediately and stop using that particular hand sanitizer. The child will be instructed to wash hands to remove the allergen. The parent and guardian may be able to find one that does not contain perfume and dye, which the child's skin will tolerate better.

In the meantime, CCS staff will instruct your child to wash their hands thoroughly with soap and warm water. Washing your child's hands with soap and water is highly recommended because it binds itself to the germs. The germs are washed away as your child rinses their hands.

What actions will be taken if my child ingests hand sanitizer?

If a child ingests hand sanitizer, CCS staff will call Poison Control at (800) 222-1222 and follow their guidance for care. Parents and guardians of children who ingest hand sanitizer will be contact immediately by school staff.







Symptom Screenings

CCS staff and volunteers will conduct daily temperature and symptom screenings for all staff, students, and visitors entering school facilities.

Parents and guardians are asked to complete the CCS Symptom Screening Parent/Guardian Attestation form and send it with their child before boarding the school bus. The bus driver will review the attestation form and offer a mask to any student who arrives without it. All students will be screened for COVID-19 symptoms upon arrival at school.



A fever is defined by measuring a temperature of 100.4°F (38°C) or higher, or feeling warm to the touch, or giving a history of feeling feverish. Students who present with fever must remain home until 24 hours after the last temperature without using fever-reducing medications such as Motrin or Tylenol.

Temperature Screening Steps

- 1. Upon arrival, staff will make a visual inspection of the child for signs of illness, including flushed cheeks, rapid breathing, difficulty breathing (without recent physical activity), fatigue, coughing, or shortness of breath.
- 2. Schools will continue to conduct daily symptom screening of any person entering the building, including students, teachers, staff, and other visitors. There is a more narrow set of COVID-19 symptoms:
 - Fever
 - Chills
 - Shortness of breath or difficulty breathing
 - New cough
 - New loss of taste or smell

The symptoms on the broader list include more common issues that may impact children with a routine illness, and may not be affiliated with COVID-19. Excluding students for symptoms on the broader list, therefore, could lead to a



large number of children being excluded from school unnecessarily.

- 3. If staff finds it necessary to perform a temperature check using a tympanic thermometer (ear), they will use a clean pair of gloves for each child, and the thermometer will be cleaned in between each check.
- 4. Temperatures will not be taken orally (under the tongue); this procedure increases the risk of spreading COVID-19 from respiratory droplets from the mouth.

Routine Illnesses

CCS staff will designate a space for students with health concerns, injuries, first aid, other routine illnesses, and medication distribution.



Suspected COVID-19 Related Illnesses

Principals will dedicate a space for isolation of symptomatic students until they can be sent home.

- 1. Principals will dedicate a separate area for students who have health concerns related to COVID-19. These students will be isolated from well students until they can leave school.
- 2. Signs will be placed in the isolation room to encourage social distancing.
- 3. Symptomatic students will remain under the visual supervision of a staff member who is at least six feet away. The supervising staff member will wear a cloth face covering or a surgical mask.
- 4. Medication clerks will require the symptomatic person to wear a cloth face covering or a surgical mask while waiting to leave the school site.
- 5. CCS staff will not place face coverings on any student having trouble breathing or who is unconscious.
- 6. Face coverings will not be placed on any student unable to remove the face covering without assistance.
- 7. CCS staff will not put a face covering on any student who cannot tolerate a cloth face covering due to developmental, medical, or behavioral health needs.
- 8. Language has been added about excluding siblings/household members if one individual is symptomatic or has been exposed to COVID-19. "Household members (e.g., siblings) must quarantine for 14 days from last exposure, unless cleared as a result of a health care provider making a diagnosis other than COVID-19 for the symptomatic individual or a negative COVID-19 test"

What if my child's symptoms are severe?

If symptoms are severe and the student requires immediate medical attention, CCS staff will call 911 and let them know that the child has COVID-19 symptoms.

Medication Clerks and PPE

Medication clerks will wear appropriate Personal Protective Equipment (PPE) (gloves, face shields, surgical masks, gowns, and cloth face coverings) and follow proper hand hygiene after removing PPE.

Routine Illnesses (continued)

Supplies to Combat COVID-19

CCS staff will support healthy hygiene behaviors by having the following supplies available at all times:

- a. Soap and water or hand sanitizer that contains at least 60% alcohol
- b. Tissues
- c. Paper towels
- d. Disinfectant wipes
- e. Disposable face masks
- f. No-touch or foot-pedal trash cans

Medication clerks will ensure the safe and correct use of disinfectants in the routine illness and isolation rooms and keep these products away from children.



Vulnerable Student Populations

Several children who have been diagnosed with chronic health conditions and disabilities attend Cumberland County Schools. Some of these children have respiratory, cardiac, metabolic, or auto-immune disorders and are at a higher risk of becoming sick from exposure to COVID-19. COVID-19 is mostly spread by respiratory droplets released when people talk, cough, or sneeze. Students with chronic illnesses have an increased chance of developing complications related to this illness.

How can you help?

- 1. Obtain the most current health care orders from the student's health care team and be sure there are copies at school.
- 2. Provide the school with all updated health care orders, medications, and medical supplies needed to meet your child's health care needs.
- 3. Communicate with your child's health care provider for instructions on keeping your child healthy and safe. Some situations may be different; for example, students with asthma are encouraged to receive their rescue medication via inhalers versus nebulizers to decrease the spread of droplets.



- 4. Make arrangements to virtually meet the school nurse and the 504 representatives to create or review your child's Individualized Health Care Plan and 504 plan if needed.
- 5. Check your child daily for any change in condition; coughing, a fever, shortness of breath, or any signs and symptoms of possible illness, then follow guidelines for keeping them at home. Be sure to use your health care provider as a resource.
- 6. Make arrangements with school staff to receive classwork if your child needs to be absent for a prolonged period.

What is the procedure for applying for homebound services?

Cumberland County Schools will offer homebound services for students who may require home-based instruction due to the medical complications of COVID-19.

Regular Education Homebound Application Procedures

Contact your school social worker to obtain the homebound instructional referral packet. Your school social worker will send the completed referral packet to the Director of Health Services. Please note: only a complete packet will be accepted for consideration and review. Once the placement or non-placement decision has been made, a copy of the homebound instructional referral packet will be returned to the appropriate school personnel who will notify you of the decision.

Vulnerable Student Populations (continued)

Exceptional Children's Homebound Application Procedures

Contact your EC case teacher to obtain the homebound instructional referral packet. Your EC case teacher will send the completed referral packet to the Director of Health Services. The IEP team, in conjunction with the Director of Health Services, will review all pertinent data and make recommendations relative to homebound services' appropriateness. The team will also make a recommendation relative to the amount of instructional time needed to ensure that the student progresses toward meeting IEP goals. The decision relative to homebound eligibility and instructional time is the decision of an IEP team and Director of Health Services.







PARENT/GUARDIAN ATTESTATION COVID-19 SYMPTOM SCREENING

Child's First Name: ______ Child's Last Name: ______ Parent/Guardian First Name: ______ Parent/Guardian Last Name: ______

- 1. Has your child had close contact (within 6 feet for a total of 15 minutes or more over a 24 hour period) in the last 14 days with someone diagnosed with COVID-19, or has any health department or health care provider been in contact with you and advised you or your child to quarantine?
 - Yes: Your child should not be at school. Your child can return 14 days after the last time he or she had close contact with someone with COVID-19, or as listed below.
 - No: Your child can be at school if your child is not experiencing symptoms.
- 2. Does your child have any of the following symptoms? Fever (temperature of 100.4°F or greater), chills, shortness of breath or difficulty breathing, new cough, new loss of taste or smell.

If your child has any of these symptoms, he or she should stay home, away from other people, and you should call your child's health care provider

3. Since they were last at school, has your child been diagnosed with COVID-19? Yes No

If your child is diagnosed with COVID-19 based on a test, their symptoms, or does not get a COVID-19 test but has had symptoms, they should not be at school and should stay at home until they meet the criteria below.

Criteria for Return after Diagnosis or Close Contact

A child can return to school when a parent/guardian can ensure that they can answer YES to ALL three questions:

- Has it been 10 days since the child has first had symptoms?
- Has it been at least 24 hours since the child had a fever (without using fever-reducing medicine)?
- Has there been symptom improvement, including cough and shortness of breath?

If a child has had a negative COVID-19 test, they can return to school once there is no fever without the use of fever-reducing medicines and they have felt well for 24 hours.

If a child has been diagnosed with COVID-19 but does not have symptoms, they should remain out of school until 10 days have passed since the date of their first positive COVID-19 diagnostic test, assuming they have not subsequently developed symptoms since their positive test.

If a child has been determined to have been in close contact with someone diagnosed with COVID-19, they should remain out of school for 14 days since the last known contact, unless they test positive. In which case, criteria above would apply. They must complete the full 14 days of quarantine even if they test negative.

By signing below, I attest to the following:

- 1. I will screen my child every morning, every day, for the 2020-21 school year and will NOT send my child to school if the answer to any of the questions above is YES.
- 2. By sending my child to school on any given day, I certify that I have screened my child on that day and the answer to ALL of the questions above is NO.
- 3. If my child is diagnosed with COVID-19, I will not send my child back to school until they meet the criteria for return.

Parent / Guardian Signature:

Date:____

The District reserves the right to discontinue the use of this form, to require the use of a different form, or to require in-person screening at any time.



ATESTACIÓN DEL PADRE / TUTOR EXAMEN DIARIO DE SÍNTOMAS DE COVID

Nombre del Niño:	_ Apellido del Niño:
Nombre del Padre / Tutor:	_Apellido del Padre / Tutor:

- 1. ¿Ha tenido su hijo contacto cercano (dentro de 6 pies (2 metros) por un total de 15 minutos o más durante un período de 24 horas) en los últimos 14 días con alguien diagnosticado con COVID-19, o algún departamento de salud o proveedor de atención médica ha estado en contacto con usted y le ha informado a usted o a su niño que tiene que estar en cuarentena?
 - **Sí:** su hijo no debería estar en la escuela. Su hijo puede regresar 14 días después de la última vez que tuvo contacto cercano con alguien con COVID-19, o como se indica a continuación.
 - No: su hijo puede estar en la escuela si no presenta síntomas.
- 2. Si su hijo tiene alguno de los siguientes síntomas? Fiebre (temperatura de 100.4°F o más), escalofríos, falta de aire o dificultad para respirar, tos nueva, nueva pérdida del gusto u olfato.

Si su hijo tiene alguno de estos síntomas, debe quedarse en casa, lejos de otras personas, y debe llamar al proveedor de atención médica de su hijo.

3. Desde la última vez que estuvo en la escuela, ¿le han diagnosticado COVID-19 a su hijo? Sí No

Si su hijo se le diagnostica COVID-19 en base a una prueba, sus síntomas, o no se le hace una prueba de COVID-19 pero ha tenido síntomas, no debe estar en la escuela y debe quedarse en casa hasta que cumpla con los criterios a continuación.

Criterios de Regreso Después del Diagnóstico o Contacto Cercano

Un niño puede regresar a la escuela cuando un padre / tutor puede asegurarse de que puede responder SÍ a TODAS las tres preguntas:

- ¿Han pasado 10 días desde que el niño tuvo los primeros síntomas?
- ¿Han pasado al menos 24 horas desde que el niño tuvo fiebre (sin usar medicamentos para bajar la fiebre)?
- ¿Ha habido una mejoría de los síntomas, incluida la tos y la dificultad para respirar?

Si un niño ha tenido una prueba de COVID-19 negativa, puede regresar a la escuela una vez que no haya fiebre sin el uso de medicamentos para reducir la fiebre y se haya sentido bien durante 24 horas.

Si un niño ha sido diagnosticado con COVID-19 pero no tiene síntomas, debe permanecer fuera de la escuela hasta que hayan pasado 10 días desde la fecha de su primera prueba diagnóstica positiva de COVID-19, asumiendo que no ha desarrollado síntomas posteriormente desde su prueba positiva.

Si se determina que un niño ha estado en contacto cercano con alguien diagnosticado con COVID-19, debe permanecer fuera de la escuela durante 14 días desde el último contacto conocido, a menos que dé positivo en la prueba. En cuyo caso, se aplicarían los criterios anteriores. Deben completar los 14 días completos de cuarentena incluso si dan negativo.

Al firmar a continuación, Yo doy fe de lo siguiente:

- 1. Examinaré a mi hijo todas las mañanas, todos los días, durante el año escolar 2020-21 y NO enviaré a mi hijo a la escuela si la respuesta a cualquiera de las preguntas anteriores es SÍ.
- 2. Al enviar a mi hijo a la escuela en cualquier día, certifico que he examinado a mi hijo ese día y la respuesta a TODAS las preguntas anteriores es NO.
- 3. Si a mi hijo se le diagnostica COVID-19, no enviaré a mi hijo de regreso a la escuela hasta que cumpla con los criterios para regresar.

Firma del Padre / Guardián:_

Fecha:

El Distrito se reserva el derecho de descontinuar el uso de este formulario, de requerir el uso de un formulario diferente o de requerir una evaluación en persona en cualquier momento.

References

Centers for Disease Control

Lighting Our Way Forward: North Carolina's Guide on Reopening K-12 Public Schools

Reference Guide for Suspected, Presumptive, or Confirmed Cases of COVID-19 (K-12) INTERIM GUIDANCE PUBLISHED JUNE 30, 2020, UPDATED JULY 22, 2020

StrongSchoolsNC Infection Control and PPE Guidance (K-12) INTERIM GUIDANCE PUBLISHED JUNE 18, 2020, UPDATED JULY 14, 2020

StrongSchoolsNC Public Health Toolkit (K-12) INTERIM GUIDANCE PUBLISED JUNE 8, 2020, UPDATED October 8, 2020

World Health Organization