

# Northern California Preparatory School

In-Person Learning 2021-2022 School Year COVID-19 Protocols

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The Northern California Preparatory School welcomes students back to campus for the 2021-2022 School Year on Tuesday, August 17<sup>th</sup>. It is our goal to ensure inperson learning continues for our students this year without disruption. Ensuring the health and safety of each of our students and our staff members will be essential to that goal.

NCPS has updated our School Safety Plan to reflect the latest guidance provided by the Department of Public Health (CDPH) that was updated on August 2, 2021. The guidance from CDPH can be found here:

https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19?K-12Guidance-2021-22-School-Year.aspx. You can find our full COVID-19 Return to School Safety Plan on our website under "Resources".

We are confident our plans and procedures outlined herein, will allow our students to return safely and feel confident about their return to in-person learning. As with all best laid plans, this plan is subject to change and grow in this ever-changing pandemic environment.

#### COVID-19 Public Health Guidance for 2021-22 School Year

On July 9, 2021, the Centers for Disease Control and Prevention (CDC) published its updated recommendations for K-12 schools. The following guidance applies CDC's recommendations to the California context, in order to help K-12 schools formulate and implement plans for safe, successful, and full in-person instruction in the 2021-22 school year. This guidance is effective immediately and will be reviewed regularly by the California Department of Public Health (CDPH).

The foundational principle of this guidance is that all students must have access to safe and full in-person instruction and to as much instructional time as possible. In California, the surest path to safe and full in-person instruction at the outset of the school year, as well as minimizing missed school days in an ongoing basis, is a strong emphasis on the following: vaccination for all eligible individuals to get COVID-19 rates down throughout the community; universal masking in schools, which enables no minimum physical distancing, allowing all students access to full in-person learning, and more targeted quarantine practices, keeping students in school; and access to a robust COVID-19 testing program as an available additional safety layer. Recent evidence indicates that in-person instruction can occur safely without minimum physical distancing requirements when other mitigation strategies (e.g., masking) are fully implemented.

Masks are one of the most effective and simplest safety mitigation layers to prevent in-school transmission of COVID-19 infections and to support full time in-person instruction in K-12 schools. SARS-CoV-2, the virus that causes COVID-19, is transmitted primarily by aerosols (airborne transmission), and less frequently by droplets. Physical distancing is generally used to reduce only droplet transmission, whereas masks are one of the most effective measures for source control of **both** aerosols and droplets. Therefore, masks best promote both safety and inperson learning by reducing the need for physical distancing. Additionally, under the new guidance from the CDC, universal masking also permits modified quarantine practices under certain conditions in K-12 settings, further promoting more instructional time for students. Universal masking indoors in K-12 schools is recommended by the American Academy of Pediatrics and by the CDC in their Guidance for COVID-19 Prevention in K-12 schools (updated July 27, 2021).

Finally, this approach takes into account a number of key considerations: current unknowns associated with variants and in particular the Delta Variant, which is more transmissible; operational barriers of tracking vaccination status in order to monitor and enforce mask wearing; and potential detrimental effects on students of differential mask policies.

This guidance is designed to enable all schools to offer and provide full in-person instruction to all students safely, consistent with the current scientific evidence about COVID-19, even if pandemic dynamics shift throughout the school year, affected by vaccination rates and the potential emergence of viral variants.

This guidance includes mandatory requirements, in addition to recommendations and resources to inform decision-making. Implementation requires training and support for staff and adequate consideration of student and family needs. Stricter guidance may be issued by local public health officials or other authorities.

## **Safety Measures for K-12 Schools**

#### 1. Masks

- a. Masks are optional outdoors for all in K-12 school settings.
- b. K-12 students are required to mask indoors. K-12 school settings are required to mask when sharing indoor spaces with students.
- c. Persons exempted from wearing a face covering due to a medical condition, must wear a non-restrictive alternative, such as a face shield with a drape on the bottom edge, as long as their condition permits it.
- d. Schools must develop and implement local protocols to provide a face covering to students who inadvertently fail to bring a face covering to school to prevent unnecessary exclusions.
- e. Consistent with guidance from the 2020-21 school year, schools must develop and implement local protocols to enforce the mask requirements.

#### 2. Physical distancing

a. Recent evidence indicates that in-person instruction can occur safely without minimum physical distancing requirements when other mitigation strategies (e.g., masking) are implemented.

#### 3. Ventilation recommendations:

- a. For indoor spaces, ventilation should be optimized, which can be done by following CDPH Guidance on Ventilation of Indoor Environments and Ventilation to Reduce Long-Range Airborne Transmission of COVID-19 and Other Respiratory Infections.
- 4. Recommendations for staying home when sick and getting tested:
  - a. Follow the strategy for Staying Home when Sick and Getting Tested from the CDC.
  - b. Getting tested for COVID-19 when symptoms are consistent with COVID-19 will help with rapid contact tracing and prevent possible spread at schools.
  - c. Advise staff members and students with symptoms of COVID-19 infection not to return for in-person instruction until they have met CDPH criteria to return to school for those with symptoms:
    - i. At least 24 hours have passed since resolution of fever without the use of fever-reducing medications; and
    - ii. Other symptoms have improved; and
    - iii. They have a negative test for SARS-CoV-2, OR a healthcare provider has provided documentation that the symptoms are typical of their underlying chronic condition (e.g., allergies or asthma) OR a healthcare provider has confirmed an alternative named diagnosis (e.g., Streptococcal pharyngitis, Coxsackie virus), OR at least 10 days have passed since symptom onset.
- 5. Case reporting, contact tracing and investigation
  - a. Per AB 86 (2021) and California Code Title 17, section 2500, schools are required to report COVID-19 cases to the local public health department.
  - b. Schools or LEAs should have a COVID-19 liaison to assist the local health department with contact tracing and investigation.

- 6. Quarantine recommendations for vaccinated close contacts
  - a. For those who are vaccinated, follow the CDPH Fully Vaccinated People Guidance regarding quarantine.
- 7. Quarantine recommendations for unvaccinated students for exposures when both parties were wearing a mask, as required in K-12 indoor settings. These are adapted from the CDC K-12 guidance and CDC definition of a close contact.
  - a. When both parties were wearing a mask in any school setting in which students are supervised by school staff (including indoor or outdoor school settings and school buses, including on buses operated by public and private school systems), unvaccinated students who are close contacts (more than 15 minutes over a 24-hour period within 0-6 feet indoors) may undergo a modified quarantine as follows. They may continue to attend school for inperson instruction if they:
    - i. Are asymptomatic;
    - ii. Continue to appropriately mask, as required;
    - iii. Undergo at least twice weekly testing during the 10-day quarantine; and
    - iv. Continue to quarantine for all extracurricular activities at school, including sports, and activities within the community setting.
- 8. Quarantine recommendations for: unvaccinated close contacts who were not wearing masks or for whom the infected individual was not wearing a mask during the indoor exposure; or unvaccinated students as described in #8 above.
  - a. For these contacts, those who remain asymptomatic, meaning they have NOT had any symptoms, may discontinue self-quarantine under the following conditions:
    - i. Quarantine can end after Day 10 from the date of last exposure without testing; OR
    - ii. Quarantine can end after Day 7 if a diagnostic specimen is collected after Day 5 from the date of last exposure and tests negative.

- b. To discontinue quarantine before 14 days following last known exposure, asymptomatic close contacts must:
  - i. Continue daily self-monitoring for symptoms through Day 14 from last known exposure; AND
  - ii. Follow all recommended non-pharmaceutical interventions (e.g., wearing a mask when around others, hand washing, avoiding crowds) through Day 14 from last known exposure.
- c. If any symptoms develop during this 14-day period, the exposed person must immediately isolate, get tested and contact their healthcare provider with any questions regarding their care.

#### 9. Isolation recommendations

a. For both vaccinated and unvaccinated persons, follow the CDPH Isolation Guidance for those diagnosed with COVID-19.

#### 10. Hand hygiene recommendations

- a. Teach and reinforce washing hands, avoiding contact with one's eyes, nose, and mouth, and covering coughs and sneezes among students and staff.
- b. Promote hand washing throughout the day, especially before and after eating, after using the toilet, and after handling garbage, or removing gloves.
- c. Ensure adequate supplies to support healthy hygiene behaviors, including soap, tissues, no-touch trashcans, face coverings, and hand sanitizers with at least 60 percent ethyl alcohol for staff and children who can safely use hand sanitizer.

### 11. Cleaning recommendations

- a. In general, cleaning once a day is usually enough to sufficiently remove potential virus that may be on surfaces. Disinfecting removes any remaining germs on surfaces, which further reduces any risk of spreading infection.
- b. If a facility has had a sick person with COVID-19 within the last 24 hours, clean AND disinfect the spaces occupied by that person during that time.

#### 12. Food service recommendations

- a. Maximize physical distance as much as possible while eating (especially indoors). Using additional spaces outside of the cafeteria for mealtime seating such as classrooms or the gymnasium can help facilitate distancing. Arrange for eating outdoors as much as feasible.
- b. Clean frequently touched surfaces. Surfaces that come in contact with food should be washed, rinsed, and sanitized before and after meals.
- c. Given very low risk of transmission from surfaces and shared objects, there is no need to limit food service approaches to single use items and packaged meals.

# **APPENDIX**



## Daily Health Screening

Please complete this short checklist for your student each morning before allowing to attend school. If the answer is YES to any of the items, your student MUST stay home from school. You must contact the school and report you student's illness and/or symptoms to the Director as soon as possible.

Please check for the following symptoms:

#### Section 1: Symptoms

- Temperature of 100 degrees Fahrenheit or higher
- > Sore throat
- ➤ New uncontrolled cough that causes difficulty breathing (for students with chronic allergic/asthmatic cough, a change in their cough baseline)
- > Diarrhea, vomiting, or abdominal pain
- > New onset of severe headache, especially with a fever
- > Recent loss of taste or smell
- > Fatigue / muscle or body aches that are not normally experienced

#### Section 2: Close Contact / Potential Exposure

- ➤ Had close contact (within 6 feet of an infected person for at least 15 minutes) with confirmed COVID-19
- ➤ Anyone in the household has been confirmed with COVID-19
- Currently waiting on the results of a COVID-19 test for your student

The health and safety of our students and staff is our top priority. NCPS will comply with the recommended guidelines for a healthy school environment.

### **Student Symptom Decision Tree**

#### Screen all students for potential COVID-19 symptoms or exposure

#### Low-risk: general symptoms

High-risk: red flag symptoms



Fever (≥100.4°F)



Sore throat



Cough



Congestion/runny nose



Headache



Difficulty breathing



Nausea/vomiting/diarrhea



Fatigue/muscle or body aches



Loss of taste/smell

Exposure to COVID-19 positive person?

Close contact: less than 6 feet. 15 minutes or longer

NO

▶ 1 low risk symptom





Send home



Return to school 72 hrs after symptom resolution (without fever reducing medication)

▶ ≥2 low risk symptoms
OR 1 high risk symptom





Send home



Evaluation by health care provider

Confirm alternate diagnosis.
A doctor's note not required.



Return to school after 72 hrs without fever and symptoms improving

Negative SARS-CoV-2
PCR test.



Return to school after 72 hrs without fever and symptoms improving

Positive SARS-CoV-2
PCR test
OR
No provider visit or test.



Return to school only after 10 days since symptom onset and 24 hrs without fever. Quarantine close contacts of confirmed cases. Contact HCA if questions.







Stav home\*



Return to school after 14 days from last contact, unless symptoms develop. If symptoms develop, perform SARS-CoV-2 PCR test.

\*In consultation with Sacramento County Public Health



This care pathway was designed to assist school personnel and is not intended to replace the clinician's judgment or establish a protocol for all patients with a particular condition.

Diagnosis and treatment should be under the close supervision of a qualified health care provider. Guidance might change

# THIS IS THE WAY



# WEAR A MASK

