



# Northstar Academy School Safety Plan 2021-2022

## **Epidemic/Pandemic**

An epidemic is an outbreak of disease that spreads quickly and affects many individuals in a region at the same time. A disease can be declared an *epidemic* when it spreads over a wide area and many individuals are taken ill at the same time. If the spread escalates further, an epidemic can become a *pandemic*, which affects an even wider geographical area and a significant portion of the population becomes affected.

According to the Centers for Disease Control a pandemic is a global outbreak of disease. Pandemics happen when a new virus emerges to infect people and can spread between people sustainably. Because there is little to no pre-existing immunity against the new virus, it spreads worldwide.

This plan addresses steps that should be taken at the onset of a pandemic, including campus closures and reopening, as well as ongoing planning for maintaining operations in case of local outbreaks.

This plan may be updated as guidance changes.

## **COVID-19 Team**

Members of the Northstar team can be reached at 804-747-1003.

- Head of School
- Assistant Head of School
- Director of Career Academy
- Administration
- Building and Facilities Director
- School Nurse

## **Health Department Contact Information**

Henrico County Health Department: (804) 501-4651

COVID-19 Hotline: (804) 205-3501

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## Levels of Surveillance and Interventions

Levels of surveillance are based on severity of pandemic in the local region. The school will move up and down these levels per guidance from the Health department and government authorities. Safely returning to and maintaining in-person instruction remains the priority throughout this guidance. After a closure, the school should reopen at a heightened level of surveillance and intervention and move backward to a standard level per guidance from local authorities as to the severity of pandemic outbreak in the region.

<b>Standard Level</b>
Pandemic present in Virginia (Low to Moderate Community Transmission and / or Low level of School Impact)
<p><u>Monitoring/Reporting:</u></p> <ul style="list-style-type: none"> <li>● Monitor the level of community disease transmission.</li> <li>● Monitor daily attendance for increased absences due to illness (level of school impact).</li> <li>● Monitor community level vaccination coverage</li> <li>● School Nurse or designee: Contact health department if a student or staff member is absent due to confirmed COVID-19 illness.</li> </ul> <p><u>Interventions:</u></p> <ul style="list-style-type: none"> <li>● Encourage and provide role models for hand washing/practicing hygiene including signage.</li> <li>● Regular hand washing/sanitizing for students throughout the day with sanitizing stations throughout the building.</li> <li>● Require staff self-screening health form completion for staff/faculty daily prior to arrival (when no students on campus).</li> <li>● Screen students/faculty and staff for symptoms of illness upon arrival and throughout the day (when students present on campus). For COVID-19 pandemic these include: fever of 100 or above, coughing, shortness of breath/difficulty breathing, fatigue, sore throat, congestion or runny nose, nausea, headache, muscle or body aches, vomiting, diarrhea, or new loss of taste or smell.</li> <li>● Perform temperature checks/health screenings for anyone entering the building (see sick policy page 8).</li> <li>● Require sick students to stay home (see sick policy page 8).</li> <li>● Limit large group activities per guidance from health authorities.</li> <li>● Field trips/community based instruction will be evaluated on a case by case basis. Factors for consideration will include community based transmission, the type of activity, and the level of potential risk.</li> <li>● Limit visitors and tours of campus during school hours. Limit time in classrooms. Service providers will be allowed to enter classrooms with mitigation measures in place.</li> <li>● Physical distancing of at least 3 feet should be maintained to the greatest extent possible in all buildings.</li> </ul>

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- For indoor and outdoor recreational sports enhanced physical distancing should be maintained to the greatest extent possible.
- Modify layouts of classrooms, communal areas and buses to ensure social distancing is maintained.
- Consider the use of cloth face coverings for faculty/staff as recommended by CDC, face coverings are most essential in times when physical distancing is difficult. Face shields available for faculty/staff, if preferred as an additional layer of coverage
- Plexiglass shields will be available for teacher desks.
- Alcohol hand sanitizer should be used each time when entering and exiting classrooms; provide hand sanitizing stations at each classroom and in common areas.
- School Nurse/Clinic Attendant should wear a surgical mask when caring for students with symptoms of illness.
- Consider lengthening instructional periods to reduce student mixing and transitions throughout the day.
- Lunch cohorts with assigned seating to allow for increased distancing and reduce the number of students in the gym. Students not in the gym should eat lunch in their classrooms. Classes could be dismissed individually to the cafeteria to pick up lunches and return to the classroom or lunches could be delivered to classrooms to avoid gatherings in communal areas.
- Athletics and extracurricular activities may continue with some mitigation measures as directed by health authorities.
- Distance learning and teleworking should be provided for students and staff who may require isolation or quarantine .
- Provide typical health services (non-COVID-19 related) in the school clinic and separate students who have symptoms of COVID-19 in a “sick room” that is isolated from others (see “sick policy” on page 8.)
- Extracurricular activities (such as clubs) may be offered if physical distancing strategies can be implemented.
- Allow students to speak with case manager, administration, and/or school psychologist with permission of parent/guardian when mental health support is needed.

### Cleaning:

- Daily highly contacted surfaces using EPA approved disinfectant .
- Thorough cleaning after school hours.
- Sick room cleaning policy: Close off the space used for isolation after the ill person leaves and do not use this space until proper cleaning and disinfecting has been completed. Wait at least 24 hours before cleaning and disinfecting, if possible. If 24 hours is not feasible, wait as long as possible.

### Tasks:

- Head of School: Send parent/guardian letter notifying of surveillance and new policies.

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- Administration: Develop Alternative Staffing Plan and train backup staff in case of need for faculty quarantine due to close contact with a person who is COVID-19 positive, or in case of increased risk due to age or underlying health conditions.
- Administration: Develop Alternative Delivery of Instruction Plan for students in quarantine due to close contact with a person who is COVID-19 positive, or in case of increased risk due underlying health conditions.
- School Nurse or designee: provide education to faculty/staff, students, and parents on symptoms of illness, physical distancing, and need for continued hand hygiene.
- School Nurse or designee: Post signs and messaging around school to promote healthy hygiene
- Facilities/Maintenance: Maintain adequate cleaning supplies and hand soap/sanitizer to promote healthy hygiene.

### Tasks If confirmed COVID-19 case in school population:

- Head of School or designee: Send parent/guardian letter notifying of confirmed case in school body and school's communication with the health department regarding further actions required.
- Head of School or designee: Each positive case will be reviewed individually with the VDH for the purposes of contact tracing and to determine the need for closures -- class, cohort, or campus closure. Students / faculty impacted pivot to distance learning.
- School Nurse or designee: Communicate with health department and assist with conducting contact tracing as needed.

### Tasks Prior to School Reopening:

- School Nurse or designee: Provide orientation to faculty/staff, students, and parents/guardians on school's updated sick policy (see page 8), symptoms of COVID-19, proper hand hygiene and respiratory etiquette, social distancing, and use of cloth face coverings.
- Facilities/Maintenance staff: Ensure ventilation systems operate properly and increase circulation of outdoor air as much as possible.

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## Heightened Level

Pandemic Illness present in VA and local regions.

(Moderate to Substantial Community Transmission and / or Medium Level of School Impact)

### Monitoring/Reporting:

- Monitor daily attendance for absences due to illness and report absences to the Health Department if confirmed positive for COVID-19.
- Monitor the level of community disease transmission.
- Monitor community level vaccination coverage
- Require staff self-screening health form completion for staff/faculty daily prior to arrival (when no students on campus).
- Screen students/faculty and staff for symptoms of illness upon arrival and throughout the day (when students present on campus). For COVID-19 pandemic these include: fever of 100 or above, coughing, shortness of breath/difficulty breathing, fatigue, sore throat, congestion or runny nose, nausea, headache, muscle or body aches, vomiting, diarrhea, or new loss of taste or smell.

### Interventions:

- Practice physical distancing: Individuals should maintain 3 feet distance from others to the greatest extent possible.
- For indoor and outdoor recreational sports enhanced physical distancing should be maintained to the greatest extent possible.
- Regular hand washing/sanitizing for students throughout the day with sanitizing stations throughout the building.
- Modify layouts of classrooms, communal areas and buses to ensure social distancing is maintained.
- Students, staff/faculty should wash hands with soap and water upon arrival to school, before eating, after restroom use, and prior to dismissal.
- Alcohol hand sanitizer should be used each time when entering and exiting classrooms; provide hand sanitizing stations at each classroom and in common areas.
- Consider the use of cloth face coverings for faculty/staff as recommended by CDC, face coverings are most essential in times when physical distancing is difficult. Face shields are available for faculty/staff, if preferred as an additional layer of coverage.
- Plexiglass shields will be available for teacher desks.
- School Nurse/Clinic Attendant should wear a surgical (medical grade PPE) mask at all times.
- Lengthen instructional periods to reduce student mixing and transitions throughout the day.
- Students should be seated facing the same direction or temporary barriers between students should be used if this seating is not possible.
- Lunch cohorts with assigned seating to allow for increased distancing and reduce the number of students in the gym. Students not in the gym Students should eat lunch in their classrooms.

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Classes could be dismissed individually to the cafeteria to pick up lunches and return to the classroom or lunches could be delivered to classrooms to avoid gatherings in communal areas.

- Limit the use of common areas to 1 class group at a time (playground, blacktop, etc.)
- Minimize use of high touch playground equipment and toys, including the swing. If used, individuals should wash hands immediately upon completion.
- In classes where learning tools (e.g. equipment, manipulatives, computers, etc.) are needed, provide each student with a designated item in each class and ensure enough supplies to minimize sharing of equipment. Do not allow sharing of school supplies.
- Maintain one way hallways and encourage 3 ft distance between individuals in hallways
- Limit visitors and tours of campus during school hours.
- Field trips/community based instruction will be evaluated on a case by case basis. Factors for consideration will include community based transmission, the type of activity, and the level of potential risk.
- Extracurricular activities (such as clubs) may be offered if physical distancing strategies can be implemented.
- Athletics should be limited to individual or team-based, skill-building drills or conditioning activities that allow maintenance of physical distancing at all times. Competition that involves contact with other athletes should be avoided.
  - Outdoor recreational sports are allowable if 10 feet of physical enhanced physical distancing can be maintained by all participants and spectators at all times and all shared items can be disinfected between uses. Spectators should be limited based on local guidance.
- Limit large gatherings or assemblies. Indoor gatherings should be held only as necessary and limited in duration.
- Limit non-essential interactions or other situations that could lead to transmissions. Prioritize educational setting over extracurricular or social events.
- Provide typical health services (non-COVID-19 related) in the school clinic and separate students who have symptoms of COVID-19 in a “sick room” that is isolated from others (see “sick policy” on page 8).
- Facilitate safe transportation of those who are sick to home or healthcare facility.
- Allow students to speak with case manager, administration, and/or school psychologist when mental health support is needed.

### Cleaning, if campus open:

- Daily cleaning highly contacted surfaces using EPA approved disinfectant.
- Thorough cleaning after school hours.
- All bus seats, handrails, knobs, etc. should be wiped down with a disinfectant.
- Sick room cleaning policy: Close off the space used for isolation after the ill person leaves and do not use this space until proper cleaning and disinfecting has been completed. Wait at least 24 hours before cleaning and disinfecting, if possible. If 24 hours is not feasible, wait as long as possible.

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- **Teacher cleaning duties:**
  - Every class period:
    - All learning tools used should be assigned to a specific student (devices, props, tools, supplies, etc.).
    - Any shared learning tools should be wiped down with a disinfectant.
    - All desks, chairs and other commonly touched surfaces within the classroom should be wiped down with a disinfectant.
    - Classroom door handles should be wiped down with a disinfectant.
  - At least daily:
    - Teacher computer and phone should be wiped down using 60-70% alcohol.

## Tasks:

- Head of School or designee: Send parent/guardian letter notifying of increased surveillance and new policies/procedures to mitigate risk of spreading infection.
- Administration: Develop Alternative Staffing Plan and train backup staff in case of need for faculty quarantine due to close contact with a person who is COVID-19 positive.
- Administration: Develop Alternative Delivery of Instruction Plan for students in quarantine due to close contact with a person who is COVID-19 positive, or in case of increased risk due to underlying health conditions.
- School Nurse or designee: Post signs and messaging around school to promote healthy hygiene.
- Facilities/Maintenance: Maintain adequate cleaning supplies and hand soap/sanitizer to promote healthy hygiene.

## Tasks If confirmed COVID-19 case in school population:

- Head of School or designee: Send parent/guardian letter notifying of confirmed case in school body and school's communication with the health department regarding further actions required.
- Head of School or designee: Each positive case will be reviewed individually with the VDH to determine the need for contact tracing and to determine the need for closures-- class, cohort, or campus closure. Students / faculty impacted pivot to distance learning.
- School Nurse or designee: Communicate with health department and assist with conducting contact tracing as needed.

## Tasks Prior to School Reopening:

- School Nurse or designee: Provide orientation to faculty/staff, students, and parents/guardians on school's updated sick policy (see page 8), symptoms of COVID-19, proper hand hygiene and respiratory etiquette, social distancing, and use of cloth face coverings.
- Facilities/Maintenance staff: Ensure ventilation systems operate properly and increase circulation of outdoor air as much as possible.



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- Facilities/Maintenance staff: Ensure that water systems and fountains are safe to use after a prolonged facility shutdown.



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## Intensive Level

(Substantial to High Community Transmission and / or High level of School Impact)

### Monitoring:

- Monitor the level of community disease transmission.
- Monitor daily attendance for increased absences due to illness (level of school impact).
- Monitor community level vaccination coverage
- School Nurse or designee: Contact health department if a student or staff member is absent due to confirmed COVID-19 illness.
- Require staff self-screening health form (see page 9) completion for essential staff prior to arrival.
- If campus open, perform temperature checks/health screenings for anyone entering building.

### Interventions:

- Consider closing school campuses and allowing only essential personnel.
- Maintain physical distancing of 3 feet between individuals.
- All individuals should wear cloth face coverings at all times except when eating and drinking. Face shields are available for faculty if preferred as an additional layer of coverage.
- Consider implementing a distance learning plan.
- Consider cancelling all field trips/community based instruction.
- Consider increased limitations for visitors or tours of campus during school hours. Do not allow in-person classroom visits.
- No athletics or extracurricular activities.
- Limit non-essential interactions including meetings, lunches, use of communal spaces or other situations that could lead to adult-to-adult transmissions. Prioritize educational setting over extracurricular or social events.
- Allow students, using virtual technology, to speak with case manager, administration, and/or school psychologist when mental health support is needed.

### Cleaning, if campus is open:

- Daily deep cleaning using EPA approved disinfectants on surfaces.
- Sick room cleaning policy: Close off the space used for isolation after the ill person leaves and do not use this space until proper cleaning and disinfecting has been completed. Wait at least 24 hours before cleaning and disinfecting, if possible. If 24 hours is not feasible, wait as long as possible.

### Tasks:

- Head of School or designee: Each positive case will be reviewed individually with the VDH to determine the need for contact tracing and to determine the need for closures. Send Parent/Guardian letter notifying of campus closure and distance learning plan implementation.
- School Nurse or designee: Have parents pick up student medications in case of extended campus closure.



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- Facilities/Maintenance: Maintain adequate cleaning supplies and hand soap/sanitizer to promote healthy hygiene.

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## **Sick Policy**

Students, faculty and staff should stay home/sent home if they have a temperature of 100 without fever reducing medication, coughing, shortness of breath/difficulty breathing, new loss of taste or smell or have any two of the following: fever of 100 (without fever reducing medication), coughing, shortness of breath/difficulty breathing, fatigue, sore throat, congestion or runny nose, nausea, headache, muscle or body aches, vomiting, diarrhea, or new loss of taste or smell.

Daily temperature checks/health screenings will be performed for anyone entering the building. Should the initial temperature check register a high temperature, the student/faculty or staff will be asked to wait 5 minutes and the check readministered. If the student/faculty or staff's temperature registers again at 100 or higher, the student will be isolated in the "sick room" and will be required to be picked up by parents immediately/within 1 hour of contacting the parent/guardian. The faculty or staff will be sent home.

Students experiencing these symptoms will be isolated in a "sick room," separate from the "well room" or general clinic area, and will be required to be picked up by parents within 1 hour of contacting the parent/guardian. If a sibling of a student with these symptoms also attends Northstar, the sibling will also be sent home.

If a student, faculty, or staff have been exposed to COVID, are considered a close contact, and/or tested positive for COVID, Northstar will consult with the VDH to determine if they need to quarantine/isolate and when they may return to campus. This will be determined by guidance available at the time of exposure and/or positive test results.

If you develop symptoms after testing positive, follow the guidance above.

In consultation with the local department of health, each positive case will be reviewed individually and could result in up to a campus closure of up to 2 weeks. All students/ faculty pivot to distance learning during a campus closure.

Distance learning will be provided for students who are in quarantine/isolation at home due to student illness/positive COVID-19 test, or close contact with a person who tested positive.

Students whose symptoms may be caused by allergies must provide a doctor's note stating that their symptoms are due to non-contagious cause/allergy.

Families should contact Susan Amos, School Nurse, at [samos@northstaracademy.net](mailto:samos@northstaracademy.net) when their child is sick and/or exposed to COVID.

## Definitions of Terms

### Acronyms

**CDC** – Center for Disease Control ([www.cdc.gov](http://www.cdc.gov)) The CDC is a governmental organization that is under the guidance of the Department of Health and Human Services. Their vision for the 21st century is ‘Healthy People in a Healthy World- Through Prevention.’ CDC, as the sentinel for the health of people in the United States and throughout the world, strives to protect people’s health and safety, provide reliable health information, and improve health through strong partnerships. Their mission is to promote health and quality of life by preventing and controlling disease, injury, and disability.

**HHS** – United States Department of Health and Human Services ([www.hhs.gov](http://www.hhs.gov)) The HHS is the United States government’s principal agency for protecting the health of all Americans and providing essential human services. It has more than 300 programs to ensure protection of health. The HHS works closely with insurance and grants to fund programs nationwide. One of their goals is to have pandemic preparedness: [www.pandemicflu.gov](http://www.pandemicflu.gov). They keep track of global movement, action, and information regarding the pandemic influenza virus.

**NCID** - The National Center for Infectious Diseases (NCID) ([www.cdc.gov/Ncidod/](http://www.cdc.gov/Ncidod/)) The NCID is an organization set up by the CDC that prevents illness, disability, and death caused by infectious diseases in the United States and around the world. This is who tracks emerging infectious diseases through infectious disease surveillance. This is inclusive of subtypes of influenza viruses resulting in large-scale global outbreaks. Including the recent pathogenic avian influenza (H5N1) virus that emerged in 2003.

**OSHA** – The US Department of Labor Occupational Safety & Health Administration OSHA requires the use of personal protective equipment (PPE) to reduce employee exposure to hazards when controls are not effective in reducing the exposure to acceptable levels.

**PPE** – Personal Protective Equipment Personal protective equipment refers to items designed to protect the wearer’s body from injury from infection or other occupational safety and health concerns. PPE may have to be worn in the case of an emergent situation. Main types of PPE include respiratory and hand protection. Regulations within the workplace are set forth by OSHA.

**WHO** is the United Nations specialized agency for health. It was established in 1948 and it’s objective is the attainment by all peoples of the highest possible level of health. Health is defined by WHO as a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity. They have put together an Epidemic and Pandemic Alert and Response (EPR) program ([www.who.int/csr/en/](http://www.who.int/csr/en/)). All news on recent outbreaks, responses, and plans can be found within this section of WHO.

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## Definitions

**Anticipatory Guidance:** Advice to inform and prepare the public on steps that can be taken to decrease the risk of infection during a pandemic outbreak

**Community Containment:** An attempt to contain emerging pandemic virus at its source.

**Isolation:** Efforts taken to reduce the onward transmission of an illness and/or disease process after infected individuals have been identified. Refers to the separation of persons who have the specific infectious illness from those who are healthy and the restriction of their movement to stop the spread of the illness. Isolation protects healthy people from getting sick. It is mainly carried out through reducing the number of contacts between those who are ill and those who are not. Individuals in isolation may be cared for in their homes, in hospitals, or designated healthcare facilities. In most cases, isolation is voluntary.

**Mitigation:** any step taken to reduce the likelihood of the pandemic occurring or, in the event it can not be prevented, lessening its impact on society. It is an attempt of all individuals to offset potential effects of the virus. This includes a wide range of non-medical interventions from personal hygiene to social distancing to quarantine to the screening of incoming and outgoing travelers. Mitigation can potentially reduce the number of opportunities of transmission from human-to-human nationally and to slow the international spread of the virus. It is recommended that the measures be initiated early before a pandemic is reached. Mitigation interventions include: isolation and treatment, voluntary home quarantine, dismissal of students from school and school-based activities, and social distancing. These strategies should be used in combination with hand washing and covering one's nose and mouth while coughing and sneezing

**Novel Virus:** a virus that has rarely or not previously been known to infect the human population.

**Outbreak:** a sudden rise in the incidence of a disease.

**Pandemic:** a worldwide outbreak of a specific disease or illness that suddenly occurs in human beings within a community, region, or country in a number of cases that clearly exceeds that of 'normal.' Pandemic outbreaks are expected to occur simultaneously throughout the nation in inevitably and unpredictable intervals.

**Pre-Pandemic Period:** a period of time in which no new cases of a virus are detected within the human population. However, human infecting viruses may be present in the animal population.

**Pandemic Alert Period:** Humans become infected with the virus. Human-to-human transmission is possible, suggesting that the virus is better adapting to the human body. Efforts to contain and delay the spread of the new virus are taken to avoid an actual pandemic outbreak.

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**Pandemic Period:** A widespread and sustained transmission of the virus within the general population. The virus is spreading persistently and globally from human to human. All aspects of life and society are seriously affected.

**Public Health:** The science of preventing disease, prolonging life and promoting health through the organized efforts and informed choices of society, organizations, public and private, communities and individuals.

**Quarantine:** Refers to the separation and restriction of movement of persons who have been exposed to the infectious agent and therefore may become infectious. It is intended to stop the spread of the infectious disease and has proven to be very effective in protecting the public from illness and disease.

**Social Distancing:** The goal of this specific intervention is to protect all humans and decrease the spread of viruses in all settings. It is recommended that all people are no less than 6 feet from an infected person, since droplets can travel in the air this distance. Social distancing is started mostly within school aged children who are in dense classroom settings most of their day. If children are encouraged to stay 6 or more feet away from each other, this will lead to a decrease of virus introduction into households and the community at large.

**Surveillance:** The goal is to detect the earliest case of the virus and describe the epidemiologic features of the virus's circulation within the school community. Surveillance is conducted to become aware of an increase in the virus activity and the number of cases in the school community. Surveillance refers to the systematic collection, analysis, and interpretation of a disease or illness that has a significant impact on public health. Surveillance is largely done to track and monitor emerging outbreaks of illness.

**Standard Surveillance:** No virus activity is reported in the community. This level includes monitoring daily attendance for increased reports of absence due to symptoms of viral-like illness. Do not report absences to the Health Department unless greater than 10%.

**Heightened Surveillance:** Viral activity is reported in the community. Monitor daily attendance for viral-like illness/absences. Begin morning 'symptoms check' first hour of school- screen those who report positive for symptoms. Log absences due to viral-like illness. Send weekly absence report to the Health Department.

**Intensive Surveillance:** High number of viral-like illness reported in the community (10% or greater school absenteeism due to illness). Monitor daily attendance and log absences on log sheet. Continue morning 'symptoms check'. Send daily absence report to Health Department. Begin preparation for potential campus closure.