

# Back to School Safety Protocols

August 19, 2021 - Asheville City Board of Education

*Information Current as of August 19, 2021*



#StayStrongNC

# StrongSchoolsNC Public Health Toolkit (K-12)

INTERIM GUIDANCE

Originally Published June 2020 • Updated August 18, 2021

Effective Date: July 30, 2021



NC DEPARTMENT OF  
HEALTH AND  
HUMAN SERVICES

## NC Public Health Toolkit (K-12)

### Current Public Health Guidance

## What we know about COVID-19 in the School Settings

### Prevention Strategies

- Should vs. Required
- Could vs. Recommended
- NCDHHS advises that school leaders adopt the strategies in the SHOULD sections.

*We encourage families and staff to use this tool to better understand how to keep our schools safe and healthy as possible.*

*Information Current as of August 19, 2021*



Possible Scenarios

## ACS Possible Scenarios of Supports Provided

Student tests positive and is able to complete their school work

*Student can return to school 10 calendar days (8 school days at most) after their positive test.*

Classroom teacher works with the family and sends work home via mail, email and/or online platform. Student completes work at home using school issued device or will be given copies of classroom work to complete at home.

Student is given at least 5 days upon return to make up missed work.

*\*\*Note: Students will complete work asynchronously and will not join classes through Google Meet*

## ACS Possible Scenarios of Supports Provided

Student tests positive and is sick or unable to work the entire time due to illness

*Student can return to school when:*

- *It has been 10 days since the first day of symptoms; AND*
- *It has been at least 24 hours since the person had a fever (without using fever reducing medicine); AND*
- *Other symptoms of COVID-19 are improving. The person is not required to have documentation of a negative test in order to return to school.*

School and classroom teachers work with family to excuse and modify assignments. Classroom teacher works with the family and sends work home via mail, email and/or online platform. Wherever able, student will complete work at home using school issued device or will be given paper copies of classroom work to complete at home.

Student is given at least 5 days upon return to make up missed work.

*\*\*Note: Students will complete work asynchronously and will not join classes through Google Meet*

## ACS Possible Scenarios of Supports Provided

Student shows symptoms of COVID-19 but has received a negative test for COVID-19.

*Student can return to school when:*

- *It has been at least 24 hours since the person had a fever (without using fever reducing medicine); AND*
- *They have felt well for at least 24 hours.*

*Note: The health care provider is not required to detail the specifics of the alternate diagnosis.*

School and classroom teachers work with family to excuse and modify assignments. Classroom teacher works with the family and sends work home via mail, email and/or online platform. Student is given at least 5 days upon return to make up missed work.

*\*\*Note: Students will complete work asynchronously and will not join classes through Google Meet*

# ACS Possible Scenarios of Supports Provided

Student who is not fully vaccinated but has been in close contact with someone with a confirmed case of COVID-19, **in which both individuals were wearing a mask the entire time**

*NCDHHS does not recommend quarantine of students following exposures in school settings if masks were being worn appropriately and consistently by both the person with COVID-19 and the potential exposed person. This applies to exposures in classrooms, other in school settings, and school transportation but does not apply to exposures during extracurricular or athletic activities. This option should only be utilized in settings where masks are consistently worn. This exception does not apply to teachers, staff, or other adults in the indoor classroom setting.*

Student will not be required to quarantine and will continue to attend school.

NOTE: As of 7/9/21, CDC added an exception to the need to quarantine in the close contact definition, excluding students who were within 3 to 6 feet of an infected student (laboratory-confirmed or clinically compatible illness) where:

- both students were engaged in consistent and correct use of well-fitting face masks; and
- other K–12 school prevention strategies (such as universal and correct mask use, physical distancing, increased ventilation) were in place in the K–12 school setting.
- This exception does not apply to teachers, staff, or other adults in the indoor classroom setting.

While students are actively eating and unmasked, they must remain at least 6 feet apart and will therefore not be deemed a close contact.

# ACS Possible Scenarios of Supports Provided

Student is not fully vaccinated, has been in close contact with someone with a confirmed case of COVID-19 **AND was not wearing a face-covering**

*Person can return to school after completing up to 14 days of quarantine. The 14 days of quarantine begin after the last known close contact with the COVID-19 positive individual. Alternatively the person may complete a 10-day quarantine if the person is not presenting symptoms of COVID-19 after daily at-home monitoring, or they may complete 7 days of quarantine if they report no symptoms during daily at-home monitoring, and the individual has received results of a negative antigen or PCR/molecular test on a test taken no earlier than day 5 of quarantine. Follow the recommendations of your local public health department if someone at your schools should quarantine. Local public health authorities make the final decisions about how long quarantine should last in the communities they serve, based on local conditions and needs. If quarantine is discontinued before day 14, the individual should continue to monitor symptoms and strictly adhere to all non-pharmaceutical interventions (e.g. wear a mask, practice social distancing) through 14 days after the date of last exposure. Note: NCDHHS recommends that schools not require an individual who is fully vaccinated (at least 2 weeks after getting their second dose in a 2-dose series or one-dose of a single-dose series) or tested positive for COVID-19 in the StrongSchoolsNC: Public Health Toolkit (K-12) Interim Guidance • Published June 8, 2020; Updated August 10, 2021 18 past three months to quarantine if they have had no symptoms after being a close contact to someone with COVID-19, and they do not live in a congregate setting (such as a shelter).*

Classroom teacher works with the family and sends work home via mail, email and/or online platform. Student completes work at home using school issued device.

***\*\*Note: Students will complete work asynchronously and will not join classes through Google Meet***



# Panel Discussion

# What happens when an unvaccinated student has a COVID exposure outside of school?

Since the student was determined to be a close contact (by health care professional) of a person with COVID-19 there are three ways to return to school:

- 1 - The 14 days of quarantine begin after the last known close contact with the COVID-19 positive individual.
- 2 - A 10-day quarantine if the person is not presenting symptoms of COVID-19 after daily at-home monitoring, or they may complete
- 3 - 7 days of quarantine if they report no symptoms during daily at-home monitoring, and the individual has received results of a negative antigen or PCR/molecular test on a test taken no earlier than day 5 of quarantine.

Is ACS following the explicit CDC guidelines for ventilation in every classroom in the district?  
(HEPA Filters & Air Purifiers)

What happens if we have to close a classroom, a school or the district?

How is the district supporting students who cannot attend in-person learning?

Why can't ACS have a Hybrid Option like we did during the 2020-2021 school year?

What happens if a student or staff member feels sick while at school?

Why is there no Screening Program in place this school year?

When ACS says we are short staffed -  
what exactly does that mean?

Which schools in ACS have outdoor classrooms, and how are they being utilized?

Based off the current reality of our surrounding districts, why is ACS not offering a virtual school based option?



# Toolkit Guidance

# COVID-19 Vaccines / Minimizing Exposures

*Information Current as of August 19, 2021*

# Vaccination

Vaccination is currently the leading public health prevention strategy to end the COVID-19 pandemic. **(Toolkit Page 2)**

People who are fully vaccinated against COVID-19 are at low risk of symptomatic or severe illness, including hospitalization or death. **(Toolkit Page 7)**

A [growing body of evidence](#) suggests that people who are fully vaccinated against COVID-19 are also less likely to have an asymptomatic infection or transmit COVID-19 to others than people who are not fully vaccinated. **(Toolkit Page 7)**

→ → → **Upcoming [Vaccine Events in Buncombe County](#)**

# Physical Distancing & Minimizing Exposure

As found of **Page 11** of the Toolkit:

- The CDC recommends schools maintain at least 3 feet of physical distance between students within classrooms, combined with indoor mask wearing by people who are not fully vaccinated, to reduce transmission risk.
- For people who are not fully vaccinated, it is particularly important that face coverings be worn when physical distance cannot be maintained.
- A distance of at least 6 feet is recommended when possible between students and teachers/staff, and between teachers/staff who are not fully vaccinated.

# COVID-19 Testing

If a student, teacher or staff member has been deemed a close contact to a positive COVID-19 person or if they self report COVID-19 symptoms:

- ACS will refer individuals to diagnostic testing who have symptoms of COVID-19 or individuals that have had a close contact with someone with a confirmed case of COVID-19.
- ACS does offer free rapid (antigen) testing on-site at school to facilitate quick COVID-19 diagnosis, inform school staff of what students may be able to stay in school, and inform the need for quarantine of close contacts.

# Health Screenings

*Information Current as of August 19, 2021*

# Screening

Asheville City Schools will NO LONGER be conducting daily symptom screenings each and every day. Instead, we are asking families and staff to self monitor for COVID-19 symptoms

Students, teachers and staff who have symptoms of COVID-19, should stay home and be referred to their healthcare provider for testing and further care. **(Toolkit Page 14)**

# Handling Possible, Suspected, Presumptive, or Confirmed Positive Cases of COVID-19

# Handling Possible, Suspected, Presumptive, or Confirmed Positive Cases of COVID-19 **Updated August 18, 2021**

Symptoms: **Students, teachers, and staff who have symptoms of COVID-19, should stay home and be referred to their healthcare provider for testing and care. (Toolkit Page 14)**

Occurrence of any of the symptoms below while a student, teacher, or staff member is at school suggests the person may be referred for diagnostic COVID-19 testing or evaluation.

Fever or Chills	New loss of taste or smell
Cough	Sore throat
Shortness of breath or difficulty breathing	Congestion or runny nose
Fatigue	Nausea or vomiting
Muscle or body aches	Diarrhea
Headache	

# Handling Possible, Suspected, Presumptive, or Confirmed Positive Cases of COVID-19

**Diagnosed:** People presumed to have or are diagnosed with COVID-19 must stay home until they meet the criteria for returning to school. Staying home when sick with COVID-19 is essential to keeping COVID-19 infections out of schools and preventing spread to others. **(Toolkit Page 14)**

**Exposed:** It is also essential for people who are not fully vaccinated to quarantine after a recent close contact to someone with COVID-19. Close contact with a case is defined as being physically exposed within 6 feet of another person for 15 minutes or longer cumulatively, within a 24 hour period. **(Toolkit Page 14)**

# Handling Possible, Suspected, Presumptive, or Confirmed Positive Cases of COVID-19

As of 7/29, the CDC added an exception to the need to quarantine in the close contact definition, excluding students who were within 3 to 6 feet of an infected student (laboratory-confirmed or clinically compatible illness) where:

- Both students were engaged in consistent and correct use of well-fitting face masks; and
- Other K–12 school prevention strategies (such as universal and correct mask use, physical distancing, increased ventilation) were in place in the K–12 school setting.
- This exception does not apply to teachers, staff, or other adults in the indoor classroom setting.

**(Toolkit Page 14)**

*Information Current as of August 19, 2021*

**Students, teachers, and staff  
who have symptoms of  
COVID-19, should stay home and  
be referred to their healthcare  
provider for testing and care.  
(Toolkit Page 14)**

# Cleaning, Hygiene & Air Quality

*Information Current as of August 19, 2021*

# Cleaning and Hygiene

- Washing hands with soap and water for 20 seconds or using hand sanitizer reduces the spread of disease. **(Toolkit Page 19)**
- Cleaning surfaces 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. **(Toolkit Page 19)**

# Water and Ventilation Systems

- Ensure ventilation systems operate properly and increase circulation of outdoor air as much as possible by opening windows and doors, using fans, or other methods. **(Toolkit Page 21)**
- Consider ventilation system upgrades or improvements and other steps to increase the delivery of clean air and dilute potential contaminants in the school. **(Toolkit Page 21)**
- Take steps to ensure that all water systems and features (e.g., sink faucets, drinking fountains) are safe to use after a prolonged facility shutdown. **(Toolkit Page 22)**
  - Locally, Asheville City Schools has determined that drinking fountains spouts will continue to be disabled - we encourage students and staff bring reusable water bottles.

# Transportation

*Information Current as of August 19, 2021*

# Transportation

In alignment with the Toolkit and [CDC](#) requirements, Asheville City Schools will:

- Ensure that all students, teachers, staff, and adult visitors wear face coverings when they are on a bus or other transportation vehicle, unless the person (or family member, for a student) states that an exception applies. **(Toolkit Page 20)**
  - The Toolkit specifies ages 5 & up; however, our Preschool Program has made the local decision to include Pre-K students in the Toolkit recommendations, as it's challenging for staff to enforce separate protocols while in the same school bus.
- Keep windows open while the vehicle is in motion to help reduce spread of the virus by increasing air circulation, if appropriate, safe, and weather permitting. Clean transportation vehicles regularly. **(Toolkit Page 20)**
- Ensure safe and correct use and storage of cleaning and disinfection products, including storing products securely away from children and adequate ventilation when staff use such products. **(Toolkit Page 19)**

# Protecting Vulnerable Populations

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# Protecting Vulnerable Populations

- ACS will use the Medical Homebound process for any student requesting not to attend school due to medical reason, including those students who have a condition considered high-risk for COVID-19.
- For students who will be out of school for at least a semester, ACS has contracted with a remote learning provider to provide instructional services to students (K-8: Edgenuity, 9-12: NCVPS). This will provide additional support for students above and beyond our typical homebound services.
- Parents should contact their schools for the required paperwork for Homebound services. Schools will also be contacting families that they are aware may have a need for homebound services next school year.
- [Homebound Services Policies & Procedures](#)
- [Remote Learning Provider Information](#)

# American Academy of Pediatrics (AAP)

The AAP recommends universal masking in school at this time for the following reasons:

- a significant portion of the student population is not eligible for vaccination
- protection of unvaccinated students from COVID-19 and to reduce transmission
- potential difficulty in monitoring or enforcing mask policies for those who are not vaccinated; in the absence of schools being able to conduct this monitoring, universal masking is the best and most effective strategy to create consistent messages, expectations, enforcement, and compliance without the added burden of needing to monitor vaccination status
- possibility of low vaccination uptake within the surrounding school community
- continued concerns for variants that are more easily spread among children, adolescents, and adults

# CDC COVID-19 Prevention in K-12 Schools

- Students benefit from in-person learning, and safely returning to in-person instruction in the fall 2021 is a priority.
- Vaccination is the leading public health prevention strategy to end the COVID-19 pandemic. Promoting vaccination can help schools safely return to in-person learning as well as extracurricular activities and sports.
- Due to the circulating and highly contagious Delta variant, CDC recommends universal indoor masking by all students (age 2 and older), staff, teachers, and visitors to K-12 schools, regardless of vaccination status.
- In addition to universal indoor masking, CDC recommends schools maintain at least 3 feet of physical distance between students within classrooms to reduce transmission risk. When it is not possible to maintain a physical distance of at least 3 feet, such as when schools cannot fully re-open while maintaining these distances, it is especially important to layer multiple other prevention strategies, such as screening testing.
- Screening testing, ventilation, handwashing and respiratory etiquette, staying home when sick and getting tested, contact tracing in combination with quarantine and isolation, and cleaning and disinfection are also important layers of prevention to keep schools safe.
- Students, teachers, and staff should stay home when they have signs of any infectious illness and be referred to their healthcare provider for testing and care.
- Many schools serve children under the age of 12 who are not eligible for vaccination at this time. Therefore, this guidance emphasizes implementing layered prevention strategies (e.g., using multiple prevention strategies together consistently) to protect students, teachers, staff, visitors, and other members of their households and support in-person learning.
- Localities should monitor community transmission, vaccination coverage, screening testing, and occurrence of outbreaks to guide decisions on the level of layered prevention strategies (e.g., physical distancing, screening testing).
- Updated to recommend universal indoor masking for all students, staff, teachers, and visitors to K-12 schools, regardless of vaccination status.
- Added recommendation for fully vaccinated people who have a known exposure to someone with suspected or confirmed COVID-19 to be tested 3-5 days after exposure, regardless of whether they have symptoms.

# ACS COVID-19 Protocols

- ACS will require universal face coverings for all staff and students Pre-K thru 12th Grade
- Staff and students will maintain physical distancing as much as possible, including during recess
- Families and staff will self monitor for COVID-19 symptoms and stay home when sick, especially with a fever
- Per the health department, quarantine may not be necessary if face coverings and physical distancing are maintained
- Students will no longer exclusively remain in small cohorts
- Schools will not direct the flow of traffic in our hallways as one way or designating certain doors for entrance or exit
- Daily symptom screening will no longer be conducted
- Universal synchronous remote learning options will no longer be provided for students unable to be at school due to illness or exposure