

GLEN ULLIN PUBLIC SCHOOL HEALTH & SAFETY SMART RESTART PLAN

Glen Ullin Public School Board Approved and Updated September, 2022

Glen Ullin Public School Families,

It has been a challenge for our entire community since March, but we hope you have found ways to cope and embrace this new normal. Thank you to the students, staff, parents, and community members who have helped us succeed in these difficult times. The 2019-2020 school year was challenging, but we are proud of students and thankful the district was able to celebrate our seniors' accomplishments with a graduation exercise.

For academic, social-emotional, and economic reasons, we are compelled to strive to return to an in-person model. Yet, we cannot disregard that the health and safety concerns associated with the virus remain. The district must consider all practical steps to keep our schools from contributing to virus spread in our community.

This plan is representative of hours of critical thinking, research, modeling, and work by our educators, staff, and school board. This group reviewed input gathered from our employees and parents.

We realize that reviewing this plan may not address every question you have. We recognize some concepts and actions may be polarizing and there are strong opinions about what the school should do or should not. But we must remain open to what is possible and consider all options so we can move forward.

Thank you for your time reviewing this plan. We encourage everyone to ask questions and communicate their concerns as we move forward. Together, our school can provide quality education to our children in a safe manner if we work together to solve problems.

Respectfully,

Peter Remboldt Matt Kuhn

Superintendent School Board President

Assumptions & Assurances

Our School believes:

- Every student should have the opportunity to engage in learning, regardless of the spread of COVID19 in our community.
- Schools have a vital role in providing safe environments for students, focusing on both social-emotional and physical health.
- By working together with educators, staff, health care professionals, parents, students, and community members we can solve most challenges.
- Our district will make decisions based on the most current guidance from local, state, and national health care officials.
- Our School Board will ensure our plan meets the needs of our students, educators, staff and community.

Our Planning Team

GUPS's Return to Learning Plan was crafted and reviewed by a team consisting of the following:

- Educators
- Secretaries
- · Custodial Staff
- School Board members
- Parents
- Administration
- Medical personnel
- Your local health office (Custer Health)

Input was gathered by various means to allow for a wide range of input, while maintaining social distancing.

COVID-19 Response Team & Coordinators

Mrs. Voegele, 7-12 Teacher

Mrs. Kuntz, k-12 Teacher

Ms. Fitterer k-8 Teacher

Ms. Schirado Teacher/Librarian

Mr. Lawson, Facility Director

Mrs. Heidi Peltz, Custer Health Nurse

Mrs. Carrie Gerving, PA Glen Ullin Clinic

Mrs. Marie Bittner, School Board Member

Mr. Travis Thomas, School Board Member

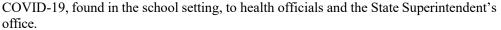
Mrs. McKenzi Krein, School Secretary

Mrs. Anni Carlson, K-12 Principal.

Mr. Peter Remboldt, Superintendent (TEAM COORDINATOR)

COVID-19 Building Level Coordinators

Each school building will have an identified COVID-19 Coordinator who will be responsible for the health and safety preparedness and response planning. Coordinators will make themselves available to the NDDoH 24 hours a day / 7 days a week to respond to phone calls from public health. This position will assist public health in identifying and notifying close contacts in the school setting. The coordinator will be report cases of





Peter Remboldt, Superintendent, will assume the role of building level coordinator in all Glen Ullin Public School buildings. If the coordinator is unable to be reached the secondary contact will be Anni Carlson, principal.

Phases

The following phases will be used to define the community risk level associated with COVID-19 These phases align with the color-coded guidance in the ND Smart Restart Plan. Each level is reported to schools by the NDDoH after rigorous testing and assessment of cases in the community. ND Smart Restart Plan



Instructional Models

The instructional models used by the district will be guided, in part, by the risk level of COVID-19 in the community as defined within the phases above. This is a guide as instructional models could be altered based on other factors, such as occupancy levels, age of children, and abilities to move certain classes online.



Traditional Learning

All instruction is delivered in-person with some building and group modifications. Teachers and students maintain a normal daily schedule. Safety precautions are implemented to enhance staff and student safety.



Blended Learning

Students report to school on a modified schedule. Multiple hybrid models of instructional delivery may be appropriate to meet the educational needs through a variety of delivery models.



Distance Learning (Google Classroom/SeeSaw)

All instruction is provided off-campus through the use of distance learning resources or suited to the unique needs of the student.

Health and Safety Guidance

The district strives to provide a healthy and safe environment for all who occupy our schools. The following guidelines are intended to provide a framework for the district's response to COVID-19.

Resources

ND Department of Public Instruction - https://www.nd.gov/dpi/parentscommunity/nddpi-updates-andguidance-covid-19

ND Department of Health - https://www.health.nd.gov/diseases-conditions/coronavirus
Center for Disease Control and Prevention - https://www.cdc.gov/coronavirus/2019-nCoV/index.html

Best Intentions

Despite taking every reasonable precaution, there is not guarantee that our school's will be without risk as it relates to COVID-19. The virus will be present on our buses, in our classrooms, and at our activities. In certain situations, social distancing is not possible in a school setting. Our actions, as outlined in this plan, will not prevent any student or staff member from being in contact with the virus.

Protect Yourself and Others

Wash your hands often



- Wash with soap and water for at least 20 seconds especially after blowing your nose, coughing, or sneezing.
- If soap and water are not available, use hand sanitizer that contains at least 60% alcohol.
- Avoid touching your eyes, nose, and mouth with unwashed hands.
- Students are encouraged to wash their hands often throughout the day.

Avoid close contact



- Keep social distance from others especially important for people who are at a higher risk of getting sick.
- Alternate or modified schedules, adjustments to use of common areas, use of outdoor spaces and other actions that increase physical separation may be considered.
- All visitors and parents are asked to call ahead before coming to the school.

Cover coughs and sneezes



- Always cover your mouth and nose with a tissue when you couth or sneeze or use the inside of your elbow.
- Throw tissues away and wash hands or use hand sanitizer to prevent spread.

Clean and disinfect



- School staff should clean and disinfect frequently touched surfaces daily.
- Shared materials (not recommended) should be cleaned.
- Classrooms will be cleaned nightly by custodial staff.

Face Coverings



The wearing of face masks is not required in the Green or Yellow stage. (Students and staff who wish to wear a mask are encouraged to do so.)

Monitor your health daily

• Be alert for symptoms. Watch for a fever, cough, or shortness of breath.



- Parents are asked to screen their children each day before sending them to school. Use the screening guidance provided
- Staff and students who are sick should stay home.
- Temperatures of symptomatic students or staff may be taken at the school office.
 - o Symptomatic students will be isolated, and their guardians contacted.

Health & Safety Protocols

Student & Staff Health

Monitoring the health of students and staff will be an important component of a safe and healthy educational environment. Glen Ullin Public School will take the following measures to ensure all students and staff are healthy while they are at school.

Identifying Students & Staff at Higher Risk

- Back to School and enrollment processes will include questions asking families to identify if their child is at-risk, based on a health professionals' diagnosis. This information will be provided to the building principal (COVID-19 Coordinator) who will contact the family and discuss instructional model options.
- If an employee is at-risk, based on a health professionals' diagnosis, the administration will work with the employee to coordinate adjustments to the work schedule or workplace.
- When the NDDoH informs the district of a student or staff member that is COVID-19 positive
 that information will be passed on to the COVID coordinator as allowable within district policy
 and law.

If a student or staff member becomes sick at school (or school event)

- Student
 - O Direct / escort the child to the office.
 - o The child shall be provided a facial covering and isolated in the custodian's office.
 - o Parent / guardian will be contacted to pick up their child.
- Staff
 - Inform your supervisor immediately and wear a face mask / shield until they can be replaced if supervising students at that time.
 - o Leave the school building/grounds and consult with a health care professional.

Return to School

 When a student or staff member has been isolated or quarantined as directed by NDDoH or their health care provider, they will be allowed to return to school after being cleared by the NDDoH.

*NDDoH may close a school or district at their discretion.



COVID-19 EXCLUSION GUIDANCE Decision Tree for Symptomatic Individuals in Schools

Send home or deny entry if **ANY** of the following symptoms are present:

Fever (100.4°F or higher) OR two or more of the following symptoms: fatigue, headache, muscle/body aches, chills, cough, shortness of breath, sore throat, congestion/runny nose, nausea, vomiting, diarrhea, abdominal pain OR loss of taste and/or smell. This is in addition to general infectious disease exclusion guidance. People who are ill should contact their health care provider for additional guidance.

Has the person been clinically evaluated?

Tested Positive for COVID-19*

Stay home at least 10 calendar days from onset of symptoms and for 24 hours with no fever and improvement of symptoms – whichever is longer.

Has the person been clinically evaluated?

Clinically diagnosed (not tested) for COVID-19*

Stay home at least 10 calendar days from onset of symptoms and for 24 hours with no fever and improvement of symptoms - whichever is longer.

Has the person been clinically evaluated?

Alternate clinical diagnosis or laboratory confirmed condition (e.g., norovirus, hand/foot/mouth) d

Follow provider directions/ recommended treatment & return guidance

Follow the Child Care and **School Infectious Disease** Guidance.

For a person NOT clinically evaluated who is monitoring symptoms at home

Fever (100.4°F or higher) OR two or more of the following symptoms: fatigue, headache, muscle/body aches, chills, cough, shortness of breath, sore throat, congestion/runny nose, nausea, vomiting, diarrhea, abdominal pain OR loss of taste/smell

Stay home at least 10 calendar days from onset and for 24 hours with no fever and improvement of symptoms - whichever is longer.

For a person NOT clinically evaluated who is monitoring symptoms at home

Other symptoms not consistent with COVID-

Follow the Child Care and School Infectious Disease Guidance.

d (Yellow box) = Other symptoms

Adapted from the Minnesota Department of Health

www.health.nd.gov/diseases-conditions/coronavirus

^{*} Siblings & household members also stay home for 14 days from last exposure to a COVID-19 case while contagious c (Red Box) = COVID-19





NOVEL CORONAVIRUS (COVID-19) RECOMMENDATIONS FOR SCHOOLS

SITUATION: There are COVID-19 cases in North Dakota, but not in your community

The North Dakota Department of Health (NDDoH) does not recommend school closures if cases are not occurring in your community. Schools should follow CDC guidance regarding preparing for COVID-19. The guidance includes monitoring absenteeism, keeping sick children out, ensuring handwashing, environmental cleaning, communicating with parents, etc. Districts should consult with their local public health unit to determine if cases are occurring in their community.

SITUATION: There are COVID-19 cases in your community, but there are no cases in your school

The NDDoH does not recommend school closures if the ongoing spread is not identified in your school. Schools should follow CDC guidance regarding preparing for COVID-19. The guidance includes monitoring absenteeism, keeping sick children out, ensuring handwashing, environmental cleaning, communicating with parents, etc.

SITUATION: There is one case of COVID-19 in your school

If there is a COVID-19 case in your school, the NDDoH will notify the facility. If a school is made aware of a COVID-19 case before being contacted by the NDDoH, please report the case to the NDDoH at 1-800-472-2180 or 701-328-2378.

The confirmed case of COVID-19 must be excluded (<u>isolation period</u>) from school for ten days after onset of symptoms (if no symptoms, then exclusion is ten days after collection date of test) **and** be fever free for 24 hours (without the use of fever reducing medications) **and** have improvement of symptoms, whichever is longer. The NDDoH will provide guidance to the school and the case or case's parents/guardians. Close contacts to a confirmed case of COVID-19 will be <u>quarantined</u> (must stay home) for 14 days from their last exposure to a case. A close contact is defined as someone who is within six feet of a confirmed case for

15 minutes or greater. It may also be someone who is directly coughed on or exposed to a case's secretions. Close contacts will be identified by the NDDoH during the investigation. In a school setting, close contacts to a case are often friends, teammates, classmates sitting next to, in front of, or behind the case, and potentially children in the same room as a case. This may mean that certain classrooms in a school have to be closed for 14 calendar days. If a case occurs in staff or children who are in multiple classrooms, then this may mean a higher number of close contacts have to be excluded from school for 14 calendar days.

SITUATION: There are two or more cases of COVID-19 in your school within 14 calendar days

Specific classrooms or grades may have to close if additional cases occur in a school. Public health (NDDoH or local public health) will provide guidance as to when a school should close. Schools may also make this determination based on the availability of staffing or level of absenteeism.

SITUATION: There is/are a close contact(s) in your school

Children or staff who are identified as close contacts to a confirmed case of COVID-19 must be excluded from the school (quarantine) until 14 calendar days after their last known exposure to the case. Close contacts will be identified by the NDDoH and informed to stay home. Even if a close contact tests negative during their 14-day quarantine period, the contact must complete the 14-day quarantine period. It can take up to 14 days to develop COVID-19.

If a parent or other household member tests positive, the child must stay out of school for the case's <u>isolation period</u> (10 calendar days from onset) plus the child's <u>quarantine period</u> (14 calendar days). Public health authorities will advise the parent as to how long the child will need to be removed from school. If a parent is a contact to someone confirmed to be positive for COVID-19 (case), then the child may still attend school if the child did not have direct contact to a case.

SITUATION: Ill employees or children in your school

In addition to general infectious disease exclusion criteria, schools should exclude ill employees or children who meet the following criteria:

Fever of 100.4° F **OR** two or more symptoms of fatigue, headache, muscle/body aches, chills, cough, shortness of breath, sore throat, congestion/runny nose, nausea, vomiting, diarrhea, abdominal pain **OR** loss of taste and/or smell. Employees and children need to be excluded until either (1) tested negative for COVID19 **OR** (2) diagnosed by a health care provider with another illness that does not require <u>exclusion</u> **OR** (3) for 10 days from onset **AND** fever-free for 24 hours (without the use of fever-reducing medications) **AND** symptoms are improving, whichever is longer.

Glen Ullin Public School's COVID-19 PPE Guidance

STAFF	PPE
ALL STAFF (other than what is outlined)	May choose to wear cloth face coverings. May choose to wear face coverings on school transportation (bus)
ALL STUDENTS	May choose to wear cloth face coverings. May choose to wear face coverings if using school transportation (bus)
Public facing staff (i.e. receptionists/clerical) unless plexiglass partition is in place.	May choose face shield or cloth face mask
Staff caring for / instructing a student in a small space – small group – for more than 15 minutes. (i.e. Nurse, SPED, EL, educator)	Building administrators in consultation with district nurse and educator will determine if face coverings or face shield are required. This may be influenced by instructional and learning needs of the student and health considerations of all occupants in the room
ALL STAFF	Strongly encouraged to wear a cloth face covering
ALL STUDENTS	Strongly encouraged to wear a face mask. Students will be provided breaks and allowed to remove their mask when outside or in spaces that can accommodate social distancing.
ALL STAFF AND STUDENTS IN SCHOOL BUS	STRONGLY ENCOURAGED TO WEAR A FACE MASK

Blue / Green				
Priorities:	 Ensure students and staff who are symptomatic stay at home. Implement reasonable accommodations to reduce school-wide and community spread. 			
Districtwide Practices:	 Social distancing where possible and reasonable. Distancing on a school bus will be unachievable, we encourage concerned parents to consider alternate transportation for their child. Buildings routinely cleaned and disinfected according to CDC guidelines. Special focus on high touch/traffic areas. Handwashing integrated throughout the day. Hand sanitizer available throughout each building. Support and train parents on use of technology tools and online curricular resources. 			
Schools:	 Protective measures will be implemented in office spaces. Some school events, assemblies and gatherings may be changed or cancelled. Access to campus may be limited, with new protocols. 			
Classrooms:	 Students issued "technology" and trained on how to access online learning resources including LMS system adopted by school. Limited use of shared materials and supplies if possible Allow class time to disinfect shared technology 			
Common Areas:	 Schedules may be altered to reduce cohorts passing in common areas. Lunch times may be altered 			
Extracurricular& Activities:	Guidance and directives from the NDHSAA and other governing boards will be used to guide these activities.			
Communications:	Share information about how to stop the spread of COVID-19.			

Yellow / Orange				
Priorities:	 Ensure students and staff who are symptomatic stay at home. Maximize social distancing cohort where possible. Support blended learning model. 			
Districtwide Practices:	 Based on identified COVID cases of students and staff targeted closures may be implemented (class, grade, department, etc). While other schools remain open and meeting students in person. Social distancing where possible and reasonable. Distancing on a school bus will be unachievable, we encourage parents to consider alternate transportation for their child. Buildings routinely cleaned and disinfected according to CDC guidelines. Special focus on high touch/traffic areas. Handwashing integrated throughout the day. Hand sanitizer available throughout each building. Support and train parents on use of technology tools and online curricular resources. Implement technology support line. 			
Schools:	 Protective measures will be maintained in office spaces. Some school events, assemblies and gatherings may be changed or cancelled. Access to campus may be additionally limited, with new protocols. 			
Classrooms:	 Students may be attending school on a hybrid schedule. Students will be expected to engage in learning opportunities online using district LMS system on days they are not in school. Teachers are expected to make direct student/family contact at least 1 time per week. (Based on the needs of the student) Limited use of shared materials and supplies when students are in school. Desks arranged to allow for cohort groups and social distancing where possible and reasonable. Staff and students working in close proximity may be advised to wear a face covering. 			
Common Areas:	Lunch times may be staggered			
Communications:	 Share information about how to stop the spread of COVID-19. Share technology support resources for parents. 			
Extracurricular& Activities:	Guidance and directives from the NDHSAA and other governing boards will be used to guide these activities.			

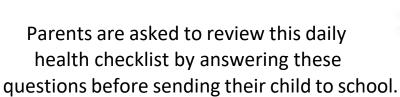
Red				
Priorities:	Reduce the risk of community spread by closing schools.			
Districtwide Practices:	 Online instruction will be used district wide in all courses at all grade levels. Instruction will focus on essential learning targets. Attendance and academic progress will be expected. Grading policies will not be suspended. Local food distribution may be implemented by food service program. 			
Schools:	 Closed to the general public except by special arrangement with the district office. Small group meetings or instruction may be allowed, particularly for special needs students or academic interventions. 			
Classrooms:	 Students will engage in learning at the home. Students will be expected to engage in learning opportunities online Teachers are expected to make direct student/family contact at least one time per week. (Based on the needs of the student) 			
Extracurricular& Activities:	 Guidance and directives from the NDHSAA and other governing boards will be used to guide these activities. Athletic and other extra/co-curricular activities likely suspended. 			
Communications:	 Clear communication about academic expectations and grading shared with students and families. Share technology support resources for parents. 			











(Parents do not need to send the questionnaire to school)

YesNo					
Does your child have a new or worsening shortness of breath?					
YesNo					
Does your child have new or worsening cough?					
YesNo					
Does your child have a fever of 100.4 or greater?					
YesNo					
Does your child have chills?					
YesNo					
Does your child have a sore throat?					
YesNo					
Does your child have a new loss of taste or smell?					
YesNo					



If **YES** to any of the questions **STOP!**

Do not send your child to school. Contact your healthcare provider. Contact your child's school to inform them of your child's absence. If you can answer **NO** to all questions, go to school.





COVID-19: What's the Difference Between Physical Distancing, Quarantine and Isolation?

	PHYSICAL DISTANCING	QUARANTINE	ISOIATION
Who is it for?	People who haven't been exposed to the virus or are not aware of exposure to the virus.	People who don't currently have symptoms of the virus but were exoosed to the virus.	People who are already sick from the virus.
What is it?	A precautionary measure used to help prevent the spread of the virus.	A prevention strategy used to monitor people who were exposed to the virus for a period of time to see if they become ill.	Aprevention strategy used to separate people who are sick with the virus from healthy people.
Where does it take place?	Takes place outside the home in public places like grocery stores and work environments.	Takes place in a home setting.	Can take place in a home when medical attention is not required. Takes place in a hospital when medical care is r=uired.
When do I use it?	At all timesuntil further directed by the ND Department of Health.	If you have recently traveled internationally <i>or</i> have known exoosure to the virus.	If youhave tested positive or have symptoms and have not <i>yet</i> obtained a test.
How long is it for?	At all timesuntil further directed by the ND Department of Health.	14 days after your last exposure. Once your quarantine period has ended, if you do not have symptoms, you may return to your normal routine.	Aminimum of 10 days from the beginning of symptoms and 72 hours after your fever is gone without the use of fever-reducing medicine and other symptoms have significantly improved.
What does this mean for my daily life?	Avoid large gatherings. Stay 6-feet away from people. If you are unable to stay 6-feet away from other people, wear a cloth face covering. Call or video-chat with friends or loved ones, particularly those that are elderly or have underlying health conditions that places them at high-risk. If possible, work from home. Practice good hygiene and avoid shak ing hands or touching your face. If you become ill andneed medical attention, call your health care provider.	Stay at home and avoid close contact with others. Do not attend school, work or any other setting where you cannot maintain a 6-foot distance from other people. Call or video-chat loved ones. For food, medication and other necessities. obtain through friends or family, or use a contactless delivery service. Practice standard hygiene and precautionary measures like not sharing household items, washing your hands, and cleaning frequently touched surfaces often. Monitor your symptoms. If you become ill and need medical attention, call your health care provider.	Do not leave your home unless it is in an emergency. If you are in a home with others, stay in a "sick" room by yourself and, if possible, do not share a bathroom. If you have a pet and live with others, do not touch your pel For food, medication and other necessities, obtain through friends or family, or use a contactless delivery service. Try to stock up for the duration of the isolation. Practice standard hygiene and precautionary measures like not sharing household items, washing your hands, and cleaning frequently touched surfaces often. If a caregiver cleans your room or bathroom, they should wear a mask and wait as long as possible after you've used the bathroom. Contact your health care provider immediately if you exoerience severe symptoms.