

NBC Operational Plan

Students/bus drivers are required to wear a face covering while on the bus. Students not having a face covering will be provided one. The parents will be informed of the incident. If the student is at the bus stop again without a face covering, the student will not enter the bus. The appropriate building principal will contact the parent to inform them they will need to find alternative transportation.

Students on the bus will be seated by family unit filling in from the back and moving forward. The first two rows shall be designated for primary students with no older siblings. Students will unload from front to back.

Students that have a medical condition that inhibits the wearing of a mask will need to find alternate transportation to and from school.

Students/staff will be required to wear face coverings during all movements in the hallway, while waiting in the lunch line, and during all times that a recommended six feet cannot be maintained.

Face coverings will not be required in areas that a minimum of six feet can be maintained such as the classroom.

Students that are unable to wear a face covering due to medical reasons will be provided accommodations to their schedule to ensure an environment more conducive to the health and welfare of all students and staff.

Teachers will be required to review at the beginning of each school day proper hygiene, proper spacing, and the wearing of a face covering. Teachers will be provided a container of sanitation wipes to wipe desk tops, door knobs, etc. twice daily with one being at the end of the school day.

Teachers will ensure that all students have sanitized their hands by use of sanitizer or soap and water upon arrival at school and prior to all recess activities. Students that have their own hand sanitizer will be allowed to carry on their person as long as the student conducts themselves appropriately.

Teachers will limit the amount of displays and decorations. Items that are used year to year should be laminated to ensure the longevity of essential displays. Each classroom will be set up to maximize the spacing of students to the recommended six feet to the greatest extent possible. The same classroom arrangement will be used in all classrooms that have the same footprint. All rugs will be required to be removed from the classroom. No more than one trashcan per classroom.

Due to COVID, group work (partner activities, group projects, etc.) is suspended until further notice. Group projects that are completed through the use of technology is authorized.

Cafeteria workers will be required to wear a face covering while preparing and serving food and when unable to maintain six feet spacing.

The first line of defense for temperature checks is the parent/guardian. The district will not be checking the temperature of all students. In order to keep the school open and functional, parents must check their child's temperature and monitor for symptoms prior to sending them to school. If the child has the

following **COVID like symptoms** as specified in the chart, keep them home and participate in online instruction:

COVID symptoms Group A 1 or more symptoms	COVID symptoms Group B 2 or more symptoms
Fever (100.4 or higher)	Sore throat
Cough	Runny nose/congestion
Shortness of breath	Chills
Difficulty breathing	New lack of smell or taste
	Muscle pain
	Nausea or Vomiting
	Headache
	Diarrhea

Stay home if, you or the student:

- Have one or more symptoms in Group A **OR**
- Have two or more symptoms in Group B **OR**
- Are taking fever reducing medication.

Students are expected to stay home if they have diarrhea or vomiting as would be expected Pre-COVID. Students that remain at home and are able to complete their required work that day will be marked present.

Parents should only enter the building when absolutely necessary. All visitors are required to wear a face covering inside the school building. During COVID, parents will be asked how they can be helped prior to entering the building. Parents that are picking up their child(ren) may be asked to wait and school personnel may have their child sent to them or a school employee will walk their child to the door.

"Face covering" means a covering of the nose and mouth that is secured to the head with ties, straps, or loops over the ears or is wrapped around the lower face. A "face covering" can be made of a variety of synthetic or natural fabrics, including cotton, silk, or linen, and, for the purposes of the Order, can include a plastic face shield that covers the nose and mouth. "Face coverings" may be factory-made, sewn by hand, or improvised from household items, including but not limited to, scarves, bandanas, t-shirts, sweatshirts, or towels. While procedural and surgical masks intended for health care providers and first responders, such as N95 respirators, would meet these requirements, these specialized masks should be reserved for appropriate occupational and health care.

[DOH or county and municipal health departments](#) (CMHDs) staff will notify the school entity immediately upon learning that a person with a confirmed or probable case of COVID-19 was present at

the school or a school event while infectious. DOH or CMHD staff will assist the school with risk assessment, isolation and quarantine recommendations, and other infection control recommendations. Schools should take every measure to maintain the confidentiality of the affected individual.

It is the responsibility of DOH or CMHD staff to contact a student or staff person with COVID-19, inform close contacts of their possible exposure, and give instructions to those involved, including siblings and other household members, regarding self-quarantine and exclusions. The individual who tested positive will not be identified in communications from DOH or the CMHD to the school community at large but may need to be selectively identified for contact tracing by the DOH or CMHD staff.

NBC will contact local DOH or CMHD staff before acting in response to a known or suspected communicable disease. Call DOH at 1-877-PA Health (1-877-724-3258); a representative is on-call 24 hours a day. Pre-K to 12 schools located in a jurisdiction with a CMHD should call the CMHD. DOH and CMHDs will provide guidance to schools regarding disease information, appropriate letters and communications, identification of high-risk individuals, appropriate action and treatment, and on-going support and assistance.

- If the person is present on school property when DOH or CMHD staff notify the school of the positive case information, the person should immediately, but discreetly, be taken to the COVID-19 related isolation space for pick up (if student) or asked to return home (if staff).
- Establish procedures for safely transporting home sick individuals.
- Contact DOH or the CMHD for further guidance if a parent/guardian/caregiver notifies the school of potential exposure by a student, staff member, or school visitor.
- The entire building does not need to be evacuated.
- Wait at least 24 hours before cleaning and disinfecting. If not feasible, wait as long as possible. If seven days have passed since the sick individual was in the affected area, cleaning is not needed.
- Close off areas used by the sick person and do not use again before cleaning and disinfecting.
- Create a communication system to self-report symptoms and for notifying staff and families of exposures and closures. Schools should, however, take every measure to maintain the confidentiality of the affected individual.

Current quarantine guidance for close contacts of persons with COVID-19 may present attendance challenges for students who are quarantined because of a household contact with a case. A "close contact" is defined as either being within approximately 6 feet of a COVID-19 case for 15 or more minutes (close contact can occur while caring for, living with, visiting, or sharing a health care waiting area or room with a COVID-19 case), or having direct contact with infectious secretions of a COVID-19 case (e.g., being coughed on). See the [Department of Health Case versus Contact](#) for more information on these distinctions.

- Staff and students with fevers or symptoms associated with COVID-19 should seek medical attention for further evaluation and instructions before returning to school.
- Staff and students with fever or symptoms that may be associated with COVID-19 and no known direct exposure to a person with COVID-19 may return to school when they are asymptomatic and have been fever free for at least 24 hours without the use of fever-reducing medicine or have confirmation of an alternative diagnosis from a health care provider that explains the COVID-19-like symptom(s).

- Staff or students with symptoms who have had a direct exposure to a person with COVID-19 will be considered probable cases and should remain excluded from school/work until release from isolation criteria has been met.
- A student or staff member who is quarantined following close contact with a case may not return to school until cleared to do so by DOH or the appropriate CMHD. A negative test obtained prior to the end of quarantine does not clear an individual for return. The entire quarantine period must be completed.

Are you/is the student experiencing any of the following?

Group A 1 or more symptoms	Group B 2 or more symptoms
Fever (100.4 or higher) Cough Shortness of breath Difficulty breathing	Sore throat Runny nose/congestion Chills New lack of smell or taste Muscle pain Nausea or Vomiting Headache Diarrhea

Stay home if you or the student:

- Have one or more symptoms in Group A **OR**
- Have two or more symptoms in Group B **OR**
- Are taking fever reducing medication.

For persons with COVID-19 under isolation:

The decision to discontinue home isolation for persons with confirmed or suspected COVID-19 should be made in the context of local circumstances. Options include a symptom-based (i.e., time-since-illness-onset and time-since-recovery strategy) or a test-based strategy. Of note, there have been reports of prolonged detection of RNA without direct correlation to viral culture.

1). Symptom-based strategy

Persons with COVID-19 who have symptoms and were directed to care for themselves at home may discontinue isolation under the following conditions:

- At least 3 days (72 hours) have passed *since recovery* defined as resolution of fever without the use of fever-reducing medications **and** improvement in respiratory symptoms (e.g., cough, shortness of breath); **and,**
- At least 10 days have passed *since symptoms first appeared*.

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2). Test-based strategy A test-based strategy is contingent on the availability of ample testing supplies and laboratory capacity as well as convenient access to testing.

Persons who have COVID-19 who have symptoms and were directed to care for themselves at home may discontinue isolation under the following conditions:

- Resolution of fever **without** the use of fever-reducing medications **and**
- Improvement in respiratory symptoms (e.g., cough, shortness of breath), **and**
- Negative results of an FDA Emergency Use Authorized COVID-19 molecular assay for detection of SARS-CoV-2 RNA from at least two consecutive respiratory specimens collected ≥ 24 hours apart (total of two negative specimens)

References:

CDC
PaDOH (Secretary of Health)
WHO
Governor Wolf

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