

Kirksville R-III School District
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The Kirksville R-III School District remains steadfast in our commitment to providing education with distinction while maintaining the safest possible environment. The Board of Education and district leaders have been working tirelessly on plans for the 2020-2021 school year. We want to thank the parents, staff, and community volunteers who served on various reopening task forces for their invaluable insight and guidance.

Our schools are designed to educate students through social, face-to-face interactions, in relatively close spaces and in large groups. The benefits of this approach to education are well accepted. We have heard from our community and access to school is important. We also know our community prioritizes student and staff safety, and expects a thoughtful re-entry plan. The global Coronavirus pandemic has introduced a new level of risk for in-person instruction and in-person gatherings. As we plan for a school year likely to be continuously impacted by the COVID-19 pandemic, the priorities we hold are:

- Providing environments that are as safe as possible for students and staff
- Ensuring engaging and high-quality education

All aspects of the plan will continue to be reviewed, using a lens of equity and demonstrate care for the needs and well-being of our children, staff and families. Flexibility is key as we recognize that circumstances can change quickly and we must be prepared to adjust as needed on a moment's notice.

The following information was developed with consultation from health care professionals, guidance from the Centers for Disease Control (CDC), the Missouri and Adair County Health Departments, Missouri Department of Elementary and Secondary Education (DESE), the American Association of Pediatrics (AAP), Kirksville R-III Staff and community survey data.

Schools will make reasonable best efforts to minimize risk, however, attending school in-person will introduce a greater risk for exposure.

Before arriving at school:

All possible precautions for absolute safety will be taken by all school personnel and we ask that parents do the same. Just as parents should keep their child at home if they are ill, adults who are ill must stay home.

Daily self or parent scan: Any student or staff member with a fever of 100.4 degrees or greater or symptoms of possible COVID-19 virus infection should not be present in school. Return to school will not be allowed until the individual is fever-free without fever reducing medication for 72 hours. Parents/students and staff should perform a home self-scan each morning for the following possible **COVID-19 symptoms:**

Cough

Shortness of breath or difficulty breathing

Sudden fatigue

Chills

Repeated shaking with chills

Muscle pain

Headache

Sore throat

Loss of taste or smell

Diarrhea

Close contact with a person with COVID-19 in the last 14 days

This list is subject to change as new symptoms of COVID-19 are identified.

A guide to help you make decisions and seek appropriate medical care:

<https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/steps-when-sick.html>

School personnel will always remain vigilant by observing students and themselves for signs of the virus. Students will be visually inspected for signs and symptoms of illness as they enter the school and/or classroom. **Temperature checks may be administered at individual buildings/offices.**

Physical/Social Distancing: School leaders will consider leveraging space in innovative ways. Physical/Social distancing is an effective preventive measure. While children are the least likely to exhibit serious symptoms from COVID-19, physical/social distancing helps prevent the spread to others. By observing physical distancing in schools and reducing contacts, we can limit the number of children (and staff members) who will need to quarantine if a positive case occurs in school.

- Large spaces, such as multi-purpose rooms and auditoriums will be marked and utilized to account for appropriate physical distancing. Large gatherings (such as all-school assemblies and school-wide celebrations) will not occur.

- The risk of transmitting the virus outdoors is much lower, so schools will be considering the use of outdoor learning spaces more often.
- In K-5 classrooms, every best effort will be made to maintain stable groups (children will remain in one classroom for learning). There will be ample time for children to use the restroom and be outside with peers. Elementary teachers are very experienced in ensuring movement for children.
- Schools will assign students to cohorts when possible and limit their exposure to other cohorts within the building. This means that students should stay with the same group of students and adults throughout the day. A cohort is an individual's personal collection of people who have been in their 6-foot perimeter (these are the people who they usually interact with). Cohorting may not be feasible for middle and high school students and thus, assigned seating will help to reduce contacts among older students.
- Schools will use assigned seating, and keep records of those seating charts to assist with identifying close contacts in the event a member of the school community is diagnosed with COVID-19.
- If classes must rotate, schools will consider rotating teachers, rather than moving groups of students throughout the school building.
- Strict adherence to a specific size of student groups is discouraged, as this may limit the ability to provide in-person education.
- Students will be spaced as far apart as possible. Six feet apart is best. When six feet is not attainable face coverings will be used in mitigation.
- Desks will be placed facing forward in the same direction so students do not sit face-to-face.
- Schools will place physical distancing markers and cues throughout the building, which will remind and prompt students to remain six feet apart in areas where they are not stationary, such as hallways, cafeterias, restrooms and other locations where lines assemble.
- Schools will require hand hygiene before and after students move from one space to another within the building. Proper hand hygiene information will be taught to students of all ages and all staff.
- Posters and signs to remind students and staff about cough etiquette and hand hygiene will be displayed in bathrooms, cafeteria, classrooms etc. In addition, parents/guardians will receive similar information through school communication forums such as newsletters, and will be reminded to keep sick children home from school.
- Visitors to the buildings will be limited and properly screened.

Special Education

Every child and adolescent with a disability is entitled to a free and appropriate education and is entitled to special education services based on their individualized education program (IEP). Students receiving special education services may be more negatively affected by distance-learning and may be disproportionately impacted by interruptions in regular education. It may not be feasible, depending on the needs of the individual child and adolescent, to adhere both to distancing guidelines and the criteria outlined in a specific IEP. Attempts to meet physical distancing guidelines should meet the needs of the individual child and may require creative solutions, often on a case-by-case basis.

- All special education students will be provided instruction relative to their IEP goals.
- A child's case manager will work with families to ensure a child's IEP is being met.
- Services will be provided in a pull-out and/or push-in model to ensure the student's IEP goals are being addressed.

Large gatherings will be limited based on current CDC recommendations. This may result in:

- Students report to a classroom or designated area upon arrival, instead of gathering in common areas such as the cafeteria, hallways, gyms, etc.
- Altered cafeteria procedures
- Limited attendance and/or guidelines at sporting or other events
- Concerts and performances in small groups
- Cancellation or modification of school dances or parties

Masks and Face Coverings: **Updated 8/19/2020** Face coverings are an important strategy to reduce transmission of the novel coronavirus, both by reducing the spread of infection from the wearer to those around as well as by preventing acquisition of the infection by the wearer. It is recommended that school leaders require K-12 students to wear face coverings. Recently published guidance from the American Academy of Pediatrics has indicated that "cloth face coverings can be safely worn by all children 2 years of age and older, including the vast majority of children with underlying health conditions, with rare exception." The use of face coverings can provide an additional layer of protection against the spread of infection.

Face coverings should especially be considered for all age groups during periods when students are not cohorted or cannot physically distance (e.g. in hallways or during entry and dismissal periods). As noted above, it is also appropriate for all students to wear masks or face coverings while riding the bus."

- School staff members will wear masks, face coverings and/or clear face shields at Levels 1 and 2, as the data indicates COVID-19 transmission is more likely from adult to student, than from student to adult. Face coverings should be worn by staff members at all times when they are in close proximity to students or other staff members. In lecture formats, where the teacher is stationary and appropriately physically distanced from students, face coverings may not be necessary.
- In some circumstances, such as when working with young children or deaf or hard of hearing students, the need to convey facial expressions and mouth movements is important; in these circumstances, the use of a clear face shield will be expected.
- **Face coverings for students are highly recommended and may be mandatory in some buildings/situations.**
- Older children, such as those in middle and high school, are likely to be able to follow guidance regarding proper mask usage. Additionally, these students are less easily cohorted. Thus, the use of face coverings can provide an additional layer of protection against the spread of infection. Face coverings should be considered for all age groups during periods when students are not cohorted or cannot physically distance (e.g. in hallways or during entry and dismissal periods).
- Staff and students will be instructed on the proper manner in which a face covering should be worn.
- Efforts will be made to destigmatize the wearing of face coverings.
- Continuous usage of face coverings is not recommended for young children.
- Face coverings will be considered for some age groups during periods when students are not cohorted or cannot physically distance (e.g. in hallways or during entry and dismissal times).
- Students with medical conditions that prohibit them from being able to wear face covering will be exempt as long as they have a document from their medical provider.

Transportation: While bus transportation is available, due to COVID-19 physical/social distancing recommendations, it is highly recommended that parents consider providing transportation for their own children.

School bus transportation may not readily allow for physical distancing. However, strategies to reduce contact on buses and risk of infection will include:

- **Face masks will be required.**
- Screening of COVID-19 symptoms at home prior to getting on the bus.
- Encouraging hand hygiene upon boarding the bus.
- Assigning students to seats so contacts are stable.
- Seating siblings together.
- Loading the bus from back to front.
- Having windows open when safe and weather-permitting.
- Bus drivers and bus aides will use personal protective equipment, such as face masks and face shields and/or eye protection, as long as these do not impair driving.
- Busses will be frequently sanitized.
- Bus routes are subject to change.

Surveillance, Screening, and Triage: All possible precautions for absolute safety will be taken by all school personnel.

- Students and staff who have a fever (100.4 or higher without fever-reducing medication) and/or cough will be asked to stay home and report the absence to the building attendance office or supervisor.
- Students and staff who have been traveling must complete a daily self-screening (travel is defined as any place outside of Adair County). This self-screening outlines that you should not enter a building if, in the past 14 days, you have experienced:
 - A fever (100.4 or higher) or a sense of having a fever (you don't feel well)
 - Chills, cough, sore throat, headache
 - New loss of smell or taste, new muscle aches
 - You or a close contact has been diagnosed or presumptively diagnosed with COVID-19
- Anyone allowed into the school buildings may be screened by school personnel.
- Individuals who are identified to have symptoms will be instructed to wear an appropriate mask, use hand sanitizer, and go to a designated area to be picked up by parents and sent home as soon as possible.

- Individuals suspected of being exposed to COVID-19 may be excluded from entry into the building.
- Health Services staff regularly keeps a log of health room visits. The name and phone/number/address of all persons seen with fever and new cough will be recorded. Due to student privacy, these records are not public, however, information may be shared with the Adair County Health Department, as required. These students will not be allowed to re-enter the school until the individual is fever-free without fever reducing medication for 72 hours.

Contact with those with COVID: Individuals who come in contact with persons who have been tested and are awaiting their results, or with persons who have tested positive, must follow the high-risk or medium-risk categories of this protocol:

COVID Infection: Degrees of Contact by Individuals	Individual's Response to Contact
<p style="text-align: center;"><u>HIGH-RISK</u></p> <p>If contact was:</p> <ul style="list-style-type: none"> ● Direct and inside ● Extended contact with positive case (person to person for more than 15 minutes) 	<ul style="list-style-type: none"> ● Remain at home 14 days

<p style="text-align: center;"><u>MEDIUM-RISK</u></p> <p>If contact was:</p> <ul style="list-style-type: none"> ● Direct and inside but little time in contact with positive case ● Moderate social distancing (person to person for less than 30 minutes, mostly 6 ft. apart) 	<ul style="list-style-type: none"> ● Usually self-monitor ● Temperature scan ● Face mask in presence of others
<p style="text-align: center;"><u>LOW-RISK</u></p> <p>If contact was:</p> <ul style="list-style-type: none"> ● Indirect, outside ● Able to maintain social distance consistently 	<ul style="list-style-type: none"> ● Self-monitor

The Adair County Health Department will provide guidance on students and staff who have had contact with people who are suspected COVID-19 positive. In the event of a suspected case of COVID-19, the following protocols will be followed:

SCENARIO: An employee or student doesn't feel well and visits the school nurse. The nurse determines symptoms may be COVID related. The employee or student will be temporarily separated from others.

STUDENT: The school nurse will contact the parent. If medically stable, the student will be monitored while in isolation until their parent/guardian is able to pick them up. When the parent arrives, the nurse will encourage the parent to have the child tested. The nurse will offer to assist the parent with making phone calls to the healthcare provider. The healthcare provider will arrange for the student to be tested. If the student tests positive for COVID, the healthcare provider will contact the parent. The Health Department will then contact the parent and conduct a risk assessment (contact tracing). The parent will be asked about any close contacts the student may have had from the 48 hours prior to symptoms up to and including the day the student began isolation measures. They will direct the parent on what the student and any other

person at possible risk of being infected with what to do. If the student has been told to self-isolate, the family will be requested to call the school.

EMPLOYEE: The employee will contact their primary healthcare provider and the provider will arrange for testing. If the employee tests positive for COVID, the provider that ordered the test will call the employee with the positive result. The Health Department will also contact the employee and conduct a risk assessment (contact tracing). If the employee resides in a county other than Adair, then that county's Health Department will contact the employee. The Health Department will ask the employee about all close contacts the employee had from the 48 hours prior to symptoms up to and including the day the employee began isolation measures. They will direct the individual and any other person at possible risk of being infected with what to do. If the employee has been told to self-isolate, they should contact his/her/their direct supervisor/principal.

Protocol for Schools Assisting Health Department in Close Contact Identification for COVID-19 Cases

School notified by family or Health Department about student with **positive** test for novel coronavirus

Student* AND household contacts** immediately excluded from school until approved by the Health Department for return to school.

Contacts identified: Students with close contact with the **positive** student:

- During the student's infectious period (48 hours before and for 10 days after symptoms developed)
- Within 6 feet
- Contact >15 minutes

Classroom contacts seated within 6 feet in the front, side, and back of student

Lunch contacts within 6 feet for > 15 minutes

Free period contacts within 6 feet for > 15 minutes

Transportation contacts within 6 feet for > 15 minutes

Sports team or extracurricular contacts within 6 feet for > 15 minutes

Provide list of students who are possible close contacts to the Health Department:

- Student name
- Parent(s) name and phone number
- Home address
- Face covering usage***

Health Department will determine which students should be quarantined and excluded from school.**

*****Face covering** usage may be considered for those students who can reliably be expected to wear and report compliance with mask usage.

*Students with a positive test will be isolated and should not come to school until no fever for ≥ 24 hours (without fever-reducing medication) AND symptoms improving AND approved by the local health department to return to school (typically 10-14 days from start of symptoms). For St. Louis City, patients must also be released by primary care provider.

**Students who are determined to be close contacts will be quarantined and should not come to school until at least 14 days after last potential exposure AND approved by the local Health Department for return to school.

Health Department	Phone
St. Louis County case reporting (cdcs.doh@stlouisco.com)	314-615-2660
St. Louis County provider question (provider-COVID@stlouisco.com)	
St. Louis County school nurse liaison	
St. Louis City	314-657-1499
St. Louis City school reporting (casereporting@stlouis-mo.gov)	314-657-1453
St. Charles County	636-949-1899
Missouri Department of Health	877-435-8411
Illinois Department of Health	800-889-3931