LEAP Academy University Charter School

Preparedness Plan for Addressing Coronavirus Disease (COVID-19)

I. **Understanding What is Coronavirus (COVID-19)**: Coronaviruses are a large family of viruses that are common in people and many different species of animals, including camels, cattle, cats, and bats. Rarely, animal coronaviruses can infect people and then spread between people such as with MERS-CoV, SARS-CoV, and now with this new virus (named SARS-CoV-2). The virus has been named "SARS-CoV-2" and the disease it causes has been named "coronavirus disease 2019" (abbreviated "COVID-19").

On January 30, 2020, the International Health Regulations Emergency Committee of the World Health Organization declared the outbreak a "public health emergency of international concernexternal icon" (PHEIC). On January 31, 2020, Health and Human Services Secretary Alex M. Azar II declared a public health emergency (PHE) for the United States to aid the nation's healthcare community in responding to COVID-19.

II. **The Risk:** Outbreaks of novel virus infections among people are always of public health concern. The risk from these outbreaks depends on characteristics of the virus, including how well it spreads between people, the severity of resulting illness, and the medical or other measures available to control the impact of the virus (for example, vaccine or treatment medications). The fact that this disease has caused illness, including illness resulting in death, and sustained person-to-person spread is concerning. These factors meet two of the criteria of a pandemic. As community spread is detected in more and more countries, the world moves closer toward meeting the third criteria, worldwide spread of the new virus.

- For most of the American public, who are unlikely to be exposed to this virus at this time, the immediate health risk from COVID-19 is considered low.
- People in communities where ongoing community spread with the virus that causes COVID-19 has been reported are at elevated, though still relatively low risk of exposure.
- Healthcare workers caring for patients with COVID-19 are at elevated risk of exposure.
- Close contacts of persons with COVID-19 also are at elevated risk of exposure.

- Travelers returning from affected <u>international locations</u> where community spread is occurring also are at elevated risk of exposure.

More cases of COVID-19 are likely to be identified in the coming days, including more cases in the United States. It's also likely that person-to-person spread will continue to occur, including in communities in the United States. It's likely that at some point, widespread transmission of COVID-19 in the United States will occur.

Widespread transmission of COVID-19 would translate into large numbers of people needing medical care at the same time. Schools, childcare centers, workplaces, and other places for mass gatherings may experience more absenteeism. Public health and healthcare systems may become overloaded, with elevated rates of hospitalizations and deaths. Other critical infrastructure, such as law enforcement, emergency medical services, and transportation industry may also be affected. Health care providers and hospitals may be overwhelmed. At this time, there is no vaccine to protect against COVID-19 and no medications approved to treat it. <u>Nonpharmaceutical interventions</u> would be the most important response strategy.

III.   **Spread of the Virus and Symptoms**

❖ **What are common symptoms of COVID-19?:** Patients with COVID-19 have had mild to severe respiratory illness with symptoms of fever, cough, and shortness of breath. It takes 2 to 14 days after a person gets the virus in their body to become ill. COVID-19 is a new disease, and we are learning more each day about its symptoms and how it is spread.

❖ **How does the virus spread?:** Most often, it is spread from person-to-person via respiratory droplets produced when an infected person coughs or sneezes, similar to how flu and other respiratory pathogens spread. These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs. It's currently unclear if a person can get COVID-19 by touching a surface or object that has the virus on it and then touching their own mouth, nose, or their eyes. Often, with most respiratory viruses, people are thought to be most contagious when they are most symptomatic (the sickest).

❖ **Who should seek medical evaluation for COVID-19?:** Students, staff, and volunteers who are:
  o Ill with a fever, cough, or difficulty breathing AND have traveled from China , South Korea, and any other country listed in the CDC website in the last 14 days.

- Ill with fever, cough, or difficulty breathing AND have been identified by public health officials as a recent close contact of a confirmed COVID-19 case or had recent close contact with someone who is being evaluated for COVID-19 infection.

IV. **LEAP Academy's Policies and Expanded Application of Interventions to Address Coronavirus:** LEAP has reviewed the existing policies and has made proper updates to ensure that the school is prepared to respond. Specific policies and regulations have been expanded to better address the spread of COVID-19. **(Expanded application for Coronavirus is shown in red.)**

Policy and Regulation 8451: Control of Communicable Diseases

A. *Detection of Communicable Diseases*

1. Teachers will be trained to detect communicable diseases in pupils by recognizing the symptoms of disease.

Coronavirus Expanded Response: A series of trainings and orientations will be provided to all teachers and staff by the Medical Director and School Nurses to ensure that everyone at the school is properly trained to address and respond to symptoms from the virus.

2. In general, a pupil who shows one or more of the following symptoms should be sent to the school nurse for evaluation and/or treatment:

a. Pain, generalized or specific
b. Chills
c. Fever
d. Earache
e. Vomiting
f. Sore throat
g. Enlarged glands
h. Skin eruption
i. Running nose or
j. Red and discharging eyes.

Expanded for Symptoms of Coronavirus

a. **Fever**
b. **Cough**
c. **Shortness of breath**

3. A pupil who shows symptoms of any of the following communicable diseases should be sent promptly to the school nurse for evaluation.

a. Chicken pox: Small reddish, itchy eruptions on the skin resembling pimples or blisters, which later fill with fluid and form crusts; slight fever.

b. German measles (rubella): A common cold followed by a light red rash on face and body; small beady lumps behind ears; slight fever.

c. Measles (rubeola): Cold, runny nose, watery and light-sensitive eyes, fever, followed by bluish-white specks (Koplik spots) on inside of mouth, red blotchy rash, and dry cough.

d. Mumps: Tenderness and swelling of the salivary glands below and a little in front of the ear; fever.

e.   Streptococcal infections (including scarlet fever, sore throat, and erysipelas): Sudden onset of fever, sore throat, strawberry tongue, followed by bright red rash on body, usually on the inner arm and thigh.

f.   Whooping cough (pertussis): A common cold, with irritating cough, followed by repeated series of violent coughs without inhaling, often with respiratory whoops. Cough may end with vomiting.

g.   Fifth disease (erythema infectiosum): Fine rash that is most apparent on the cheeks and later spreads to arms and legs, low grade fever.

h.   Pink eye (conjunctivitis): Redness of white areas of eyes, accompanied by some itching; eyes may discharge pus and be light sensitive.

i.   Head lice (pediculosis): Itching scalp, presence of lice and nits at hair roots.

j.   Impetigo (staphylococcus infection): Lesions.

k.   Meningitis-meningococcal: Severe headache, chills, vomiting, convulsions, fever, stiff neck, pain in neck.

l.   Hepatitis infectious: Fever, anorexia, nausea, malaise, abdominal discomfort, followed by jaundice.

m.   Coronavirus: Fever, Cough, Shortness of Breath.

4.   Any person who is ill or infected with any disease below and as outlined in N.J.A.C. 8:57-1.3 or any communicable disease, whether confirmed or presumed will be reported immediately by the school Principal to the County Health Officer or to the New Jersey Department of Health if the County Health Officer is not available. Such telephone report will be followed up by a written report or electronic report within twenty-four hours of the initial report. The diseases to be immediately reported are:

a.   Botulism (Clostridium);
b.   Diphtheria (Corynebacterium diphtheriae);
c.   Haemophilus influenzae, invasive disease;
d.   Hepatitis A, institutional settings;

e.   Measles;

f.   Meningoccal disease (Neisseria menengitidis);

g.   Pertussis (whooping cough, bordetella pertussis);

h.   Plague (Yersinia pestis);

i.   Poliomyelitis;

j.   Rabies (human illness);

k.   Rubella;

l.   Viral hemorrhagic fevers, including, but not limited to, Ebola Lassa, and Marburg viruses;

m.   Foodborne intoxications, including, but not limited to, mushroom poisoning;

n.   Any foodborne, waterborne, nosocomial, outbreak or suspected outbreak or any outbreak or suspected outbreak of unknown origin;

o.   Any other disease included in N.J.A.C. 8:57-1.3.

p.   Coronavirus

B.   *Exclusion From School*

1.   A pupil who exhibits any of the symptoms described in A2 or whose condition suggests the presence of a communicable disease as described in A3 or A4 will be sent to the school nurse's office. The teacher will ensure that the pupil is accompanied by an adult or a responsible pupil.

2.   The teacher will communicate to the school nurse, directly or by written note, the reason for which the pupil is sent for medical assessment.

3.   The school nurse will examine the pupil and, in consultation with the school medical inspector if the pupil's condition so indicates, recommend to the Principal the pupil's exclusion from school for medical reasons.

4.   In the event neither the school nurse or the school medical inspector is available to be consulted about the pupil's condition, the Principal may determine to exclude the pupil from school.

5.   The parent, adult family member, or other responsible adult designated by the parent will be promptly notified by telephone of the pupils' exclusion and requested to come to school to fetch the pupil. Until the adult arrives to remove the pupil, the

pupil will be kept in an isolated location in the school and will be made as comfortable as possible. The pupil will be supervised at all times by a school staff member.

C.   Readmission to School

   1. A pupil who has been excluded from school or retained at home by reason of having or being suspected of having a communicable disease shall not be readmitted to school until the pupil presents written evidence that he/she is free of communicable disease.
   2. Evidence that a pupil is free of communicable disease will consist of the certification of the school medical inspector or another qualified physician who has personally examined the pupil.
   3. **No pupil who has the Corona virus communicable disease will be readmitted to school until a physician's certificate indicating the symptoms of the disease have ceased has been provided to the Principal or designee or the school nurse.**

D.   Reports

   1.   The school nurse will file such reports as may be required by the New Jersey State Department of Health and in the reporting of communicable diseases in schools.

   2.   When the rate of school absenteeism is in excess of fifteen percent, the school nurse shall report the absenteeism to the local and/or the County Board of Health.

   3.   The teacher may, with the advice and consent of the Principal and the school nurse, inform the parent(s) or legal guardian(s) of pupils in his/her class that a pupil in the class has contracted a communicable disease. The information given to parents or legal guardians may include the specific symptoms of the disease and parent(s) or legal guardian(s) may be encouraged to consult their personal physicians for inoculations that may prevent the disease or ease the symptoms of the disease.

Policy 2412: Home Instruction Due to Health Condition (In case of need for Home Instruction)

LEAP Academy University Charter School shall provide instructional services to an enrolled student whether a general education student in Kindergarten through grade twelve or special education student age three to twenty-one, when the

student is confined to the home or another out-of-school setting due to a temporary or chronic health condition or a need for treatment that precludes participation in their usual education setting, whether general education or special education.

A.   *Request For Home Instruction Due To A Temporary or Chronic Health Condition*

1.   The parent shall submit a request to the School Principal that includes a written determination from the student's physician documenting the projected need for confinement at the student's residence or other treatment setting for more than ten consecutive school days or twenty cumulative school days during the school year.

2.   The Principal shall forward the written determination to the school physician, who shall verify the need for home instruction. The school physician may contact the student's physician to secure additional information concerning the student's diagnosis or need for treatment, and shall either verify the need for home instruction or shall provide reasons for denial to the Principal. A copy is to be sent to the Chief Academic Officer or Lead Person.

3.   The Principal with approval from the Chief Academic Officer shall notify the parent concerning the school physician's verification or reasons for denial within five school days after receipt of the written determination by the student's physician.

B.   *Providing Services*

1.   The school district shall provide instructional services within five school days after receipt of the school physician's verification or, if verification is made prior to the student's confinement, during the first week of the student's confinement to the home or out-of-school setting.

2.   The school district shall be responsible for the costs of providing instruction in the home or out-of-school setting either directly, through online services, including any needed equipment, or through contract with another district Board of Education, Educational Services Commission, Jointure Commission, or approved clinic or agency for the following categories of students:

a.   A student who resides within the area served by this Board of Education and is enrolled in a public school program; or

b.   A student who is enrolled in a nonpublic school that is located within the area served by this Board of Education pursuant to N.J.S.A. 18A:46A-1 et seq.

C.   *Minimum Standards For Home or Out-of-School Instruction*

1.   The district shall establish a written plan for the delivery of instruction to continue the student's academic progress and to maintain a record of delivery of instructional services and student progress.

2.   The teacher providing instruction shall be a certified teacher.

3.   The teacher shall provide instruction for the number of days and length of time sufficient to continue the student's academic progress and dependent upon the student's ability to participate.

4.   For a student with disabilities, the home instruction shall be consistent with the student's Individualized Education Plan (IEP) to the extent appropriate, and shall meet the Core Curriculum Content Standards. When the provision of home instruction will exceed thirty consecutive school days in a school year, the IEP team shall convene a meeting to review and, if appropriate, revise the student's IEP.

5.   For a student without a disability, the home instruction shall meet the Core Curriculum Content Standards and the requirements of the Board of Education for promotion to the next grade level. When the provision of home instruction will exceed sixty calendar days, the school physician shall refer the student to the Child Study Team for evaluation pursuant to N.J.A.C. 6A:14.

Expanded for Corona Virus: The school will work closely with NJ Department of Education and the County Office of Education to create plans in case of epidemic spread of the virus.

Board approved March 12, 2020

C.1: **How Remote Learning at LEAP will work at LEAP**

- Posting of Assignments - Teachers will post assignments for all classes on their individual teacher pages for each day that school is operating in a virtual home instruction environment. Most teachers, especially in grades 6 to 12 will utilize Google Classroom to manage online student learning. Some teachers, especially in high school may continue to use Canvas in lieu of Google Classroom to manage online student learning.

  ○ Parents can access the Oncourse portal at https://www.oncourseconnect.com/

- Teacher Communication - Teachers email addresses will be clearly posted on the teacher page in Oncourse. Additionally, the teacher will provide a link for each class so that parents can sign up to receive notifications from the teacher for that class.

- Google Classroom or Canvas- Teachers currently utilize one of these learning management systems to manage online student learning, primarily in grades 6 through 12. Teachers and will continue to utilize one of these learning management systems to provide students with copies of assignments, video links, opportunities for class discussions etc. Students will also take quizzes, complete activities and submit assignments via Google Classroom or Canvas.

- Private Youtube Videos- Teachers will be able to make videos to teach more detailed lecture-type lessons. This will not provide students the ability to ask questions but it will provide another way for students to learn material and watch a lesson over again if they need to listen to the material a second time.

- Online Math Videos (Envision Math)- Our math series has learning videos for each lesson. We are going to ask students to watch the videos so they can build their knowledge of the concept prior to an assigned assessment.

- Logins and Passwords- Students are being provided a copy of their logins and passwords for Google and Clever the week of March 16th, 2020. Clever is a single portal which then provides students access to Canvas, ImagineMath and MeasureUp. The links for Google and Clever are as follows:

  ○ https://classroom.google.com/

  ○ https://clever.com/in/leap/

Parents can request their student's password my sending an email to helpdesk@leap.rutgers.edu

- Imagine Math (Grades K-5)- Students are able to access mini (teacher) lessons and quizzes to support their learning.

- Measure Up (Grades 1 to 8)- Students are able to access skill building tutorials to support their learning

- Work Packets- Will be sent home as another way for students to practice important skills. The work packets will be organized by the classroom teacher based on what the students in their classroom are covering

- Additional Questions – In addition to contacting your child's teacher, you are always welcome to contact your child's principal:

  ○ Grades K to 3 – Barbara Dunlap – bdunlap@leap.rutgers.edu

  ○ Grades 4 to 8 – Lisely Mendez-Rivera - lmendezrivera@leap.rutgers.edu

  ○ Grades 9 to 12 – Ian Fallstich – ifallstich@leap.rutgers.edu

V. **Strategies for Preventing the spread of COVID-19 in the schools:** The following strategies will be shared with all teachers, staff and parents to ensure that the school has a proactive approach to prevention of Coronavirus spread. Principals, Health personnel, social workers and support staff will ensure that these practices are occurring in all buildings.

- Staying home when students or staff are sick.
- Frequent hand washing with soap and water for at least 20 seconds, especially after going to the bathroom, before eating, and after they blow their nose. Help young children do the same. If hands are visibly dirty, use soap and water to clean hands.
- If soap and water are not readily available, using an alcohol-based hand sanitizer with at least 60% alcohol.
- Advising persons to avoid touching their eyes, nose, and mouth with unwashed hands.
- Following the school's routine cleaning and disinfection program. Emphasizing to clean and disinfect frequently touched objects and surfaces.

- Covering coughs or sneezes with a tissue, then throwing the tissue in the trash and cleaning hands with soap and water or hand sanitizer (if soap and water are not readily available).
- Urging students and staff to get a flu shot during the flu season.
- Providing adequate supplies for good hygiene, including clean and functional handwashing stations, soap, paper towels, and alcohol-based hand sanitizer.

VI. **Cleaning and Disinfecting Procedures:** Special attention will be provided to routine cleaning of buildings. LEAP will continue to follow standard procedures for cleaning with third party certified "green" cleaners and disinfecting with an Environmental Protection Agency (EPA) registered disinfectant with a claim for human coronaviruses. Typically, this means daily sanitizing surfaces and objects that are touched often, such as bathrooms, water coolers, desks, countertops, doorknobs, computer keyboards, hands-on learning items, faucet handles, phones and toys.

Disinfecting is the responsibility of school custodial staff. They are trained to use disinfectants in a safe and effective manner and to clean up potentially infectious materials and body fluid spills – blood, vomit, feces, and urine. Contact your custodian or school nurse if students are ill and your classroom needs cleaning and disinfection. Clean the surface first to remove all organic matter. Custodial staff should follow the disinfectant manufacturer's instructions for use including:

- Using the proper concentration of disinfectant
- Allowing the required wet contact time
- Paying close attention to hazard warnings and instructions for using personal protective items such as gloves and eye protection
- Using disinfectants in a sufficiently ventilated space

Classroom Cleaning Tips for Teachers: School custodial staff is responsible for cleaning schools. However, teachers will be asked to assist to tackle dirt and germs safely and effectively. Supplies will be provided for every classroom and replenish regularly. For teachers, the following practices are suggested:

Teach Good Handwashing Habits: The number one way to keep germs from spreading is to teach good handwashing. Use plain soap and water for handwashing before eating, after using the bathroom, after recess, and anytime they get dirty. Antibacterial soap isn't recommended. Use plain fragrance-free soap.

When there is no access to a sink, as on a field trip, alcohol-based (at least 60% alcohol, dye-free and fragrance-free) hand sanitizer or alcohol-based sanitizer wipes can be used. Hand sanitizers are not a substitute for handwashing. They aren't effective when hands are dirty or greasy.

Teach Students the Right Way to Wash Hands

- Wet hands with clean, running water (warm or cold), and apply plain fragrance-free soap.

- Lather hands by rubbing them together with the soap. Be sure to lather the backs of hands, between fingers, and under nails. The area under the fingernails typically has the largest concentration of germs on the hand and is the most difficult to clean.

- Scrub hands for at least 20 seconds. Use handwashing songs, such as CDC's Happy Handwashing Song, to encourage complete handwashing.

- Rinse hands well under clean, running water.

- Dry hands using a clean towel then turn off the tap.

Wash Hands Often

It is important to wash hands often because people may have germs on their hands then touch their eyes, nose, and mouth without even realizing it. Provide time needed for all students and staff to wash hands frequently, especially:

- ✓ Before preparing or eating food.
- ✓ After using the bathroom.
- ✓ After recess, P.E. class, sports practice or games.
- ✓ After returning from a field trip.
- ✓ After petting, handling or cleaning up after animals.
- ✓ After blowing nose, coughing or sneezing.
- ✓ After touching an infected wound.
- ✓ Before and after treating a cut or wound.
- ✓ Before and after caring for someone who is sick.
- ✓ After touching garbage.

Choose Handwashing Instead of Hand Sanitizer: Hand sanitizers are not a substitute for proper handwashing. Hand Sanitizers aren't effective when hands are dirty or greasy. Proper handwashing with soap and water removes germs and dirt. Scrubbing and rinsing are necessary to wash off the dirt and germs. Application of hand sanitizers typically doesn't include the important scrubbing, rinsing, and drying steps. Hand sanitizers have very limited ability to kill even flu viruses and they don't kill germs like norovirus, which causes gastrointestinal illness. When there is no access to a sink, such as on a field trip, you can use alcohol-based hand sanitizers (at least 60% alcohol, dye-free and fragrance-free), but rub a generous amount and thoroughly wet the skin. Be aware that some people may have a sensitivity reaction since hand sanitizers are a chemical.

Cleaning, Sanitizing, and Disinfecting: Know the difference between cleaning, sanitizing, and disinfecting. Use the right product for the task:

- CLEANING removes dirt and most germs. Use soap and water. Choose green cleaners certified by a third party such as Green Seal or EPA's Safer Choice. In the classroom, cleaning is the focus.
- SANITIZING reduces germs to safe levels, for example in food service environments. Food code regulations have specific requirements for sanitizers in the cafeteria and kitchen.
- DISINFECTING kills most germs, depending on the type of chemical, and only when used as directed on the label.

In schools, custodial staff use disinfectants and sanitizers regularly only in high-risk areas – nurse's office, bathrooms, cafeterias, kitchens, drinking fountains, sink and door handles, and athletic facilities; preferably, when students are not present. Overuse does not provide any additional protection and can expose students and staff to harmful chemicals.

Students should never use disinfectants. Disinfectant wipes shouldn't be used to clean hands. This includes Clorox wipes.

If students are helping to clean:

- They should only use soap and water.
- Fragrance-free baby wipes could be used for quick cleaning.
- Most store-bought cleaning products are not safe for children to use.

Rely on Cleaning to Remove Dirt and Germs: If staff, besides trained custodial staff, needs to assist with classroom cleaning, they should use a school or district provided basic cleaner. A third party certified green cleaner is preferred.

- Custodial staff can make a simple all-purpose cleaner for classrooms. Mix one teaspoon of fragrance-free dish soap in a spray bottle filled with water. Spray on surface and scrub with paper towels or a microfiber cloth. Rinse and wipe dry to remove any residue.
- Microfiber cleaning cloths improve cleaning – the removal of dirt and germs. Dampened with water they are great dust removers. With soap and water, they remove most germs.
- Disinfecting is the responsibility of school custodial staff. They are trained to use disinfectants in a safe and effective manner and to clean up potentially infectious materials and body fluid spills – blood, vomit, feces, and urine. Contact your custodian or school nurse if students are ill and your classroom needs cleaning and disinfection. If teachers use disinfectants, the district must provide training and supply the appropriate cleaner and sanitizer or disinfectant.

Teachers should not bring common cleaning products (including bleach) from home into the classroom

- Some common cleaning products are dangerous when mixed. <u>Never mix bleach</u> with ammonia, acids, or other disinfectants. An example: Comet, containing bleach, would react with Windex, which contains ammonia, to form poisonous vapors.
- Common household cleaners and disinfectants may not be appropriate for schools and may cause allergic reactions or have other health impacts.
- Schools and districts must have a Safety Data Sheet for each chemical used in the school.

VII.   Education for Prevention

LEAP will implement a prevention through education approach to ensure that all children are following proper hygiene and cleaning processes. School nurses and the Health Center will provide talks for classrooms to ensure that all students are taught proper ways to prevent the spread of diseases.

The Family Support Center and Social Workers Team will leverage parent's engagement in this process through meetings and trainings.

VIII. **Staff Roles and Oversight**

- Each school building will designate an illness prevention person/ or committee to help monitor, educate and be on the alert.
- Building principals will ensure that they follow every regulation and preventive measure for their buildings.
- Janitorial personnel will be trained on proper cleaning and sanitization and a checklist will be developed to remind them of the proper processes.
- The CAO/Lead Person will serve as the liaison with the NJDOE and the County Office to ensure that the school is up to date in official communications.
- The Medical Inspector will oversee the deployment of medical responses and will provide guidance on staff and student training.
- The Parent Coordinator will ensure that information is flowing to families.
- Teacher will be at the forefront for ensuring classrooms are cleaned, students are taught techniques to combat spreadable diseases, report any concern with a student immediately to the Principal.
- In the case of the need for sending students home and providing home instruction, the Principals will work with the CAO/lead person to develop adequate planning.

Resources for Information:

- Source: https://www.npr.org/sections/goatsandsoda/2020/02/28/809580453/just-for-kids-a-comic-exploring-the-new-coronavirus (Explaining the virus to students)
- https://www.doh.wa.gov/Portals/1/Documents/Pubs/333-233.pdf (School Supply List for Healthy Classrooms)