

2021-22 COVID-19 Safety Protocols

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Guiding Principles

- Follow guidance from the state and county health agencies for the health and safety of students and staff
- Provide high quality teaching and learning for all students
- Consider the needs of our most vulnerable students in educational programming
- Consider impacts to families

Key Ideas to Encourage Empathy and Center Equity

- There are many reasons why someone may choose to wear or not wear a mask, and those reasons may change over time. Some families may have vulnerable household members or have younger siblings who are not yet eligible for vaccination.
- Understand that each person's needs and story are unique and valuable.
- Show mutual respect, concern, and kindness to one another.
- Tell an adult if you witness or experience mistreatment or bullying related to masking.
- We don't know if or when masking will be required again. As public health experts monitor COVID in our community, the guidance may be updated in the future.
- In support of the choices that will be made by families, students, and staff, we have provided [these helpful resources for staff to facilitate a discussion about masks](#).

COVID-19 Overview

Symptoms of COVID-19

Most coronavirus illnesses are mild with fever and cough. Adults and children with COVID-19 have reported the following symptoms or combinations of symptoms. These may appear 2 – 14 days after exposure to the virus:

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

- Diarrhea

This list does not include all possible symptoms. Please talk to your medical provider for any other symptoms that are severe or concerning to you.

To learn more about COVID-19 symptoms, visit the [Centers for Disease Control and Prevention website](#).

Safety Precautions at Home

Self-isolation is required if you have been diagnosed with COVID-19 or had close contact with someone who has a confirmed diagnosis of COVID-19. If you are experiencing cold or flu-like symptoms, contact your healthcare provider. You may be told to self-isolate, which means stay at home until you receive the results of your test. You are also asked to continue to monitor yourself for symptoms, avoid all contact with others, and follow health district advice.

- Stay six feet (or two meters) away from others who are not in your household.
- Stay away from people who are sick.
- Stay home when you are sick.
- Even when masks are worn, continue practicing proper physical distancing.

Keeping Each Other Safe

If you, or someone in your immediate family, has tested positive for COVID-19, is awaiting a COVID-19 test result, or has had direct contact with a positive case of COVID-19, REPORT IT.

Employees should report a positive result to their supervisor and Human Resources immediately. Families and students should report to the school nurse or school administrator immediately.

Daily Parent/Guardian Planning for a Sick Student

Families and caregivers should make a plan in case their child needs to be picked up early from school due to illness. Please ensure contact information is up to date with the school. You can [check your contact information in ParentVUE](#) to ensure that it is up to date. If you need to make changes, contact your school.

PSESD Guidance for Early Learning

In making these decisions, the following was taken into consideration:

- Head Start Programs serve a highly vulnerable population of children and families in communities that have been most significantly impacted by COVID-19.
- Children in our programs (ages 0-4) are not yet eligible to be vaccinated.
- Washington State American Academy of Pediatrics highly recommends that mask use and other mitigation practices continue in child care settings due to ineligibility for vaccination of this age group and serving children with special health care needs.
- Many Early Learning children live in multi-generational homes with vulnerable family members.
- HS programs are required to follow the Interim Final Rule with Comment, a Performance Standard—regarding universal masking (as well as vaccinations).

Masks

- Required: All staff in Head Start Programs must continue wearing masks in indoor settings and on PSESD Early Learning routes.
- Required: All children over 2 years old must be offered and encouraged to wear masks to the best of their ability in indoor settings (except while eating or sleeping).
- The mask requirement for transportation will only apply to our PSESD transportation staff and early learning children on those buses.
- Exceptions continue to be in place as they have been, in alignment with current PSESD COVID-19 Guidance.
- PSESD will continue to provide PPE supplies. Requests can be made via this [survey](#).
- PSESD staff conducting site visits will always wear a mask.

Screenings

- Required: Early Learning Programs still need a process for identifying/screening individuals for symptoms of COVID-19.
- Required: Continue to follow PSESD COVID-19 Guidance for Screening options (either Screening Upon Arrival or Quarterly Health Attestation/Agreement).
- Required: Any individual with symptoms of COVID-19 must stay home (regardless of vaccination status). They should get tested and/or see a health care provider. (DOH is updating the symptom flowchart and it will be available early next week).

Reporting Positive Cases/Isolation/Return to School

- Continue to report any positive cases (staff or children) within your Early Learning programs to PSESD (elcovid@psed.org) and to local public health.
- Anyone who tests positive must isolate at home for a minimum of five days. They may return after day 5 with a negative antigen test, if no symptoms or symptoms have significantly improved and no fever for 24 hours. See PSESD COVID-19 Guidance (Isolation) for more details.

Notification of Exposure/Quarantine

- New: Contact Tracing is no longer required.
- Required: All staff and families must be notified of an exposure. Direct notification to staff is required. Families may be notified via group communication (instead of individual contact tracing).
- New: Staff and children with exposure will monitor for symptoms, but are no longer required to quarantine, unless symptoms develop.

Other Mitigation Measures to Continue

- Physical distancing as much as possible during eating and sleeping/resting.
- Frequent hand washing at all required and recommended times.
- Increased ventilation
- Routine cleaning, sanitizing and disinfecting
- Maintain pre-portioned meals distributed to children; No family style meals.
- Maintain oral health education activities; No tooth brushing in class.
- For staff with vaccination exemptions/accommodations, continue to follow current practices.

Vaccinations

As mandated by Governor Jay Inslee, all K-12 and early learning educators, school staff, coaches, bus drivers, school volunteers and others working in school facilities must be fully vaccinated by October 18, 2021.

- Employees must provide proof of vaccination by showing their vaccine card, certificate of COVID-19 vaccination, or Washington State Immunization Information System printout. Proof of vaccination cannot be proved through an attestation.
- Employees who are not yet fully vaccinated may continue working now but must be fully vaccinated or obtain an exemption by Oct. 18, 2021 as a condition of continued employment.

- Employees who do not provide proof of vaccination or an approved medical or religious exemption by Oct. 18, 2021, will be subject to non-disciplinary dismissal from employment for failing to meet the qualifications of the job.
- There may be continued additional safety requirements for employees who are granted exemptions.

Vaccination Verification

Schools should begin verifying student and staff vaccinations. Fully vaccinated students and staff who do not have symptoms do not have to quarantine when exposed to COVID-19 and may not require COVID-19 testing as indicated below. Further, while universal masking is required of all students and staff now, there is the possibility in the future that fully vaccinated people may no longer be required to wear masks indoors.

- Acceptable documentation for verifying the vaccination status of students, volunteers and visitors includes at least one of the following:
 - CDC vaccination card which includes name of person vaccinated, type of vaccine provided, and date(s) administered, or a photo of the vaccination card.
 - Documentation of vaccination from a health care provider with the information listed above.
 - State immunization information system record with the information listed 4 above.
 - Other school immunization record system that provides the information above.
- Parent/guardian or personal attestation is not an acceptable form of verification for K12 students, nor for volunteers or visitors.
- Schools may use their existing systems for verification of vaccines required for school entry to verify COVID-19 vaccination or establish a new system that meets the requirements above.
- By September, schools utilizing the Washington Immunization Information System (WA IIS) School Module will be able to run a student COVID-19 report for vaccination status. The report will show students who are due now for COVID vaccination.

Response Protocols

If a Student Becomes Sick

Northshore School District will use the Department of Health [COVID-19 Return to Work/School Flow Chart](#) to ensure the health and safety of students, families and staff.

If a student experiences COVID-like symptoms while attending school:

- Teacher or staff excuses student(s) from classroom, cohort/pod or area within the school and notifies COVID-19 Supervisor and/or school nurse.
- COVID-19 Supervisor, school nurse, or their designee takes the student(s) to the designated isolation room/area until transportation can be arranged to send the student(s) home or to seek emergency medical attention; AND
 - Note: If multiple ill students or staff must be placed in the same isolation room/area, NSD will ensure mask use and that they maintain at least 6 feet of distance between them.
- COVID-19 Supervisor or school nurse notifies parent(s), guardians or caregiver(s) of ill student(s).
- Parent(s), guardian(s), or caregiver(s) picks up student(s). The student(s) should consult with their healthcare provider for evaluation and determination if testing is recommended.

Child with Symptoms/Siblings

The child with symptoms should be isolated and sent home as soon as possible. Caregivers of the sick child should contact their medical provider and get the child tested for COVID-19 as soon as possible. Siblings who are not exhibiting symptoms do not need to be quarantined or sent home at that time. The siblings can continue to attend school or childcare but should monitor their health. If any symptoms arise in the siblings, they should also stay home and their caregivers should contact a healthcare provider.

If the original sick child tests positive for COVID-19, that child must stay home and isolate. At that time all household members, including the siblings, would be considered close contacts and must also quarantine (stay home, not go to work, school or childcare).

The Return to School Following Illness Exposure Guidance in the Department of Health [Return to School Flowchart](#) help people calculate the isolation and quarantine periods for all household members.

If a Staff Member Becomes Sick

If a staff member experiences COVID-like symptoms while attending school:

- Teacher or staff notifies COVID-19 designated Supervisor or school nurse.
- COVID-19 Supervisor, school nurse, or their designee takes staff to designated isolation room/area until transportation can be arranged

Note: If multiple ill staff must be placed in the same isolation room/area, NSD will ensure mask use and that they maintain at least 6 feet of distance between them.

If a Student or Staff Member Tests Positive for COVID-19

If a student or staff member is diagnosed with a confirmed COVID-19 illness, the school should be notified immediately (preferably the building COVID-19 Supervisor or school nurse). Once notified, the building COVID-19 Supervisor will initiate a COVID-19 Positive Case Response Protocol.

If the staff or student who tested positive is currently at the school during their infectious period, they should report to the school isolation room and/or return home immediately regardless of if they are experiencing symptoms. If a staff member or student is not in the building, *they should not come to work or school.*

When Can You Return to School?

On January 7, 2022, DOH issued updated guidance which incorporated CDC changes around quarantine and isolation periods. These changes are complicated, and in some cases, will be impossible for the district to implement in full. This document outlines the guidelines that NSD has implemented effective this week.

Returning to School after Symptoms

If a person with COVID-19 symptoms tests negative for COVID with either a molecular (PCR) **or** antigen test **or** home test, they may return to school following existing school policies as long as they are not a close contact of someone with COVID-19 and subject to quarantine.

If a person with COVID-19 symptoms tests negative for SARS-CoV-2 with an antigen test, it is recommended, but not required, they either have a confirmatory PCR test or repeat an antigen test within 48 hours.

If a person with COVID-19 symptoms does not get tested for SARS-CoV-2 or does not see a health care provider and is given an alternative diagnosis, they should follow the same isolation guidance as persons who test positive for SARS-CoV-2. This is irrespective of vaccination status.

Isolation

Isolation is when someone who has confirmed COVID-19 stays home and away from others.

Any student or staff member with COVID-19 should isolate at home. This isolation guidance applies regardless of vaccination status.

If a student or staff member tests positive by either a molecular or antigen test, they can return to school when the following criteria are met:

- 5 days have passed since symptom onset, or since positive test collection date if no symptoms are present
- AND - No symptoms are present, or symptoms are resolving;
- AND - No fever within the past 24 hours without the use of fever reducing medications.

Students and staff should continue monitoring for symptoms and wearing a well-fitting mask around others through day 10 (days 6-10) both in and out of school, including during extracurricular and sports activities.

No test is required to return to school from isolation.

Quarantine

Quarantine is when someone who has been exposed to COVID-19 stays home and away from others for the recommended period of time.

Who Must Quarantine*:

Students and staff who come into close contact with someone with COVID-19 should quarantine for at least 5 days (day 0 through day 5) after their last close contact with a person who has COVID-19 if they are in one of the following groups:

- Have not completed the primary series of recommended vaccine (2 doses of Pfizer & Moderna or a single dose of Johnson & Johnson) including the two-week curative period.
- Those who are not vaccinated or have not fully completed a primary vaccine series.

(* note that this guidance differs from DOH guidance)

Who Does Not Need to Quarantine:

Students and staff who come into close contact with someone with COVID-19 do not need to quarantine if they:

- Have received all recommended vaccine doses, or
- Had confirmed COVID-19 within the last 90 days.

Duration of Quarantine:

Quarantine can end after 5 full days beginning after the last close contact (the date of last close contact is considered day 0) if:

- no symptoms have developed and
- after receiving a negative test result from a test taken no sooner than day 5.
- The test can be either antigen or molecular (PCR). Home tests are not allowed.

Students and staff must wait to receive a negative test result from a test taken no sooner than day 5 post-exposure and provide the negative test documentation to the school before returning.

Proof of a negative COVID-19 test includes the original, a copy, or a photo of a document or other communication from the test provider or laboratory that shows:

- The first and last names of the individual tested.
- The type of test performed (must be molecular or antigen).
- The date the specimen was collected (must be on or after day 5 post-exposure).
- A negative result.

Students and staff should continue monitoring for symptoms and wearing a well-fitting mask around others through day 10 (days 6-10) both in and out of school, including during extracurricular and sports activities.

If an individual or student who is a close contact chooses not to test or does not get tested, quarantine should last for 10 days after the last close contact.

However, if any COVID-19 symptoms develop during the 10 days, the individual should isolate and get tested.

For additional information on the updated Quarantine and Isolation guidance, please visit the [CDC FAQ](#).

Exclusion of Individuals with Symptoms of COVID-19

Students, children, and staff who have symptoms of [COVID-19](#), are **required** to stay home and should get tested and/or see a health care provider and follow the return to work/care/school protocol accordingly (see [At-Home Isolation Protocol and Returning to School or a Program](#) section). See also the [What to do if a Person is Symptomatic](#) flowchart as a reference.

Any student, child, or staff member who tests positive for COVID-19 is **required** to isolate at home following current guidelines from DOH (see [At-Home Isolation Protocol and Returning to School or a Program](#) section) and the [CDC](#). This isolation guidance applies regardless of vaccination status.

At-Home Isolation Protocol and Returning to School, Care, or a Program

A student, child, or staff who tests positive for COVID-19 is **required** to isolate at home, regardless of vaccination status. The isolation period is 10 full days from the start of symptoms or the date of positive test. See [Calculating Your Isolation Period](#) for additional information.

The individual may return to school/care after 5 full days of isolation if:

- Their [symptoms](#) have improved or they are asymptomatic, AND
- They are without a fever for the past 24 hours without use of fever-reducing medications.

AND IF returning to school/care days 6-10, the individual is **required** to:

- Wear a well-fitted mask or face shield with a drape during days 6-10 of their isolation period, consistent with CDC guidance, **OR**
- Test negative with an antigen or at-home test any day after day 5 before returning without a mask. Testing beyond day 10 is not necessary.

If the individual is not able to wear a well-fitted mask or face shield with a drape, AND does not test negative, they are **required** to continue isolating through the end of their isolation period.

See also the [What to do if a Person is Symptomatic](#) flowchart as a reference.

Isolation of COVID-19 Cases within a Facility

Any student, child, or staff who reports or exhibits [COVID-19-like symptoms](#) is **required** to be immediately isolated from others, sent home, and referred to diagnostic testing as soon as feasible, regardless of vaccination status. While waiting to leave the school or program, the individual with symptoms is **required** to be isolated in a designated isolation space. They are **required** to wear a well-fitting face mask, if tolerated and age appropriate. Anyone providing care or evaluation to the isolated individual is **required** to wear [appropriate PPE](#).

Masks are **required** by all children, staff, and visitors aged 2 years and older in the nurse/health room and in the isolation room as these are considered health care settings. Staff may require a certain level of respiratory protection when working with individuals in isolation who are known or suspected to have COVID-19. Refer to L&I's [Coronavirus Facial Covering and Mask Requirements](#) for additional details.

The designated isolation space for individuals with COVID-19-like symptoms is **required** to be separated from the space used for those requiring general first aid or medicine distribution in a school setting, or from shared space with other children in

a child care/early learning setting. For schools, if the nurse's office has an exam room designed with a negative air flow and directly exhausted air, this room should be given priority as an isolation space. If this is not available, the isolation space would ideally be a room with a door that can close and a window that can be opened to improve ventilation. A properly sized HEPA air filter could be used to increase filtration, see [DOH ventilation guidance](#) for more information.

If no appropriate indoor space is available (e.g., already occupied) and the student or child can be supervised and made comfortable, an outdoor setting is an acceptable emergency alternative if weather and privacy permit.

Notifying Groups or Individuals of Potential Exposure

Staff are **required** to be notified of exposure

In addition, schools and providers are **required** to directly notify any student who has been identified as immunocompromised, medically fragile, or otherwise at [high risk](#) for severe COVID-19 of potential exposure. Notification should be provided to all employees and high risk individuals, irrespective of their vaccination status or recent infection within the past 90 days.

For the rest of the general school and youth-serving population, schools and providers are **required** to have a process in place to inform students, children, families, and staff when there are cases or outbreaks in the school.

Regardless of vaccination status, students, children, and staff who were potentially exposed to COVID-19 should be encouraged to:

- Monitor for [symptoms](#), AND
- Consider wearing a well-fitted mask (if age appropriate) for 10 days after the last date of exposure, especially during activities like high-risk indoor sports, performing arts, etc., AND
- Get tested 3-5 days after their last exposure. Molecular (PCR/NAAT), antigen, and at-home tests are acceptable. If they test positive, they must [isolate](#).
 - For individuals who have been recently infected (within the past 90 days), antigen testing should be performed as PCR results may remain persistently positive and not be indicative of a new, active infection.

See also the [What to do if You Receive an Exposure Notification](#) flowchart as a reference.

Exposed students, children, and staff may continue to take part in all in-person instruction and care, including sports, performing arts, and other extracurricular activities, as long as they are not symptomatic. If an exposed student, child, or staff develops symptoms, they are **required** to immediately isolate at home and follow

the protocols outlined in the [Exclusion of People with Symptoms of COVID-19](#) section.

Ensure Access to Diagnostic Testing for COVID-19

K-12 schools are **required** to ensure access to timely diagnostic testing for students and staff with symptoms or who were potentially exposed and want to test. This can be done at the school, at a centralized site for the district, and/or in partnership with a trusted and accessible community-based testing provider and local public health. Timely testing of symptomatic students and staff helps reduce days of in-person instruction lost. Additionally, symptomatic individuals with negative COVID-19 test results may be able to return to school earlier.

Molecular (PCR/NAAT), point of care (POC) antigen, and at-home tests are acceptable.

<https://www.doh.wa.gov/Portals/1/Documents/1600/coronavirus/820-218-K12SupplementalRecommendations.pdf>

<https://www.doh.wa.gov/Portals/1/Documents/1600/coronavirus/820-105-K12Schools2021-2022.pdf>

If you are concerned about your health or possible impacts on school or work attendance, notify your healthcare provider (for ANY health concerns), supervisor (staff) or school nurse (students).

Resources for Staff/Students:

- [How to care for yourself or others with COVID-19](#)

Section Material Sources:

- [COVID-19 Return to Work/School Flow Chart](#)
- [Symptoms of Coronavirus](#)

If There is a COVID-19 Case at School

To protect staff and student privacy (HIPAA and FERPA), Northshore School District will not share names or health information of students and staff. Instead the school and school district will work with public health officials on communication and the next steps, which may include self-isolation, self-monitoring, contact tracing, and testing.

Following a positive case, a thorough cleaning of the impacted areas will be conducted. If this cleaning disrupts normal school operations, families will be notified about any scheduling changes.

Students and staff members should self-monitor to ensure they are not developing symptoms. If the individual had close contact with any students or staff members who may need testing, those individuals will be contacted.

What is Exposure?

Close contact is defined as a person matching any of the following descriptions:

- Living in the same household as a person with COVID-19
- Caring for a person with COVID-19
- Being within 6 feet of a person with COVID-19 for a combined total of 15 minutes or more within a 24-hour period, OR
- Being in direct contact with saliva or other body secretions from a person with COVID-19 (e.g., being coughed on, kissing, sharing utensils, etc.).

In a K-12 indoor classroom, the close contact definition excludes students who were at least three feet away from an infected student when

- A. both students were wearing face coverings/masks and
- B. other prevention strategies were in place. This exception does not apply to teachers, staff, or other adults in the indoor classroom setting.

Notifying Groups or Individuals of Potential Exposure

Staff are **required** to be notified of exposure following the requirements in [WAC 296-62-600](#). See the L&I guidance document [Questions and Answers: Reporting and Notification Requirements of HELSA and PPE Usage](#).

In addition, schools and providers are **required** to directly notify any student who has been identified as immunocompromised, medically fragile, or otherwise at [high risk](#) for severe COVID-19 of potential exposure. Notification should be provided to all employees and high risk individuals, irrespective of their vaccination status or recent infection within the past 90 days.

For the rest of the general school and youth-serving population, schools and providers are **required** to have a process in place to inform students, children, families, and staff when there are cases or outbreaks in the school.

Regardless of vaccination status, students, children, and staff who were potentially exposed to COVID-19 should be encouraged to:

- Monitor for [symptoms](#), AND
- Consider wearing a well-fitted mask (if age appropriate) for 10 days after the last date of exposure, especially during activities like high-risk indoor sports, performing arts, etc., AND
- Get tested 3-5 days after their last exposure. Molecular (PCR/NAAT), antigen, and at-home tests are acceptable. If they test positive, they must [isolate](#).
 - For individuals who have been recently infected (within the past 90 days), antigen testing should be performed as PCR results may remain persistently positive and not be indicative of a new, active infection.

See also the [What to do if You Receive an Exposure Notification](#) flowchart as a reference.

Exposed students, children, and staff may continue to take part in all in-person instruction and care, including sports, performing arts, and other extracurricular activities, as long as they are not symptomatic. If an exposed student, child, or staff develops symptoms, they are **required** to immediately isolate at home follow the protocols outlined in the [Exclusion of People with Symptoms of COVID-19](#) section.

Ensure Access to Diagnostic Testing for COVID-19

K-12 schools are **required** to ensure access to timely diagnostic testing for students and staff with symptoms or who were potentially exposed and want to test. This can be done at the school, at a centralized site for the district, and/or in partnership with a trusted and accessible community-based testing provider and local public health. Timely testing of symptomatic students and staff helps reduce days of in-person instruction lost. Additionally, symptomatic individuals with negative COVID-19 test results may be able to return to school earlier.

Molecular (PCR/NAAT), point of care (POC) antigen, and at-home tests are acceptable.

Districtwide data showing all confirmed cases and quarantines is available on the [COVID-19 Dashboard](#).

Staying Safe at School

Hygiene

Handwashing is one of the best ways to protect yourself and your family from getting sick. Learn when and how you should wash your hands to stay healthy.

How Germs Spread

Washing hands can keep you healthy and prevent the spread of respiratory and diarrheal infections from one person to the next. Germs can spread from other people or surfaces when you:

- Touch your eyes, nose and mouth with unwashed hands
- Prepare or eat food and drinks with unwashed hands
- Touch a contaminated surface or objects
- Blow your nose, cough or sneeze into hands and then touch other people's hands or common objects

Key Times to Wash Hands

You can help yourself and your loved ones stay healthy by washing your hands often with soap and water or use alcohol-based hand sanitizer, especially during these key times when you are likely to get and spread germs:

- Before and after you put on, take off, or adjust your face covering.
- Before you touch your eyes, nose and mouth.
- Before, during and after preparing food
- Before and after eating food
- Before and after caring for someone at home who is sick with vomiting or diarrhea
- Before and after treating a cut or wound
- After using the toilet
- After [changing diapers or cleaning up a child who has used the toilet](#)
- After blowing your nose, coughing or sneezing
- After touching an animal, animal feed, or animal waste
- After handling pet food or pet treats
- After touching garbage

The guidance for the list of key times to wash hands was developed based on data from a number of studies. There can also be other times when it is important to wash hands.

Additional information on hand washing can be found at this link:

- [Show Me the Science - How to Wash Your Hands | Handwashing](#)
- [Return to School Video Series: Washing Your Hands](#)
- [Return to School Video Series: Lavarse las Manos](#)

All classrooms will be provided with disinfecting wipes and hand sanitizer that have been approved by the EPA for effectiveness and low toxicity. Additional disinfecting wipes and hand sanitizer will be made available in key administrative areas.

Masks

Correct use of well-fitting masks or face coverings protects the wearer as well as others, thereby helping to prevent transmission of COVID-19.

While masks are no longer required universally in schools or provider settings, there will be situations when the use of well-fitting masks may be temporarily required for individuals by DOH and/or local public health (e.g., days 6-10 when a student, child, or staff returns from isolation after 5 days unless they have tested negative per [At-Home Isolation Protocol and Returning to School or a Program](#) section). Masks may also be required universally during clusters and/or outbreaks in classrooms or with groups of students (e.g., a choir class or a sports team), or within provider settings, to limit disease transmission and ensure in-person instruction and care (see [Responding to Clusters and Outbreaks](#) section).

Students, children, and staff will have the choice to wear a mask at school and/or at provider settings, with the expectation that others' choices will be respected. Some may need to wear a mask because they or a member of their household is [high risk](#) for severe COVID-19 disease.

Students, children, and staff who are immunocompromised, medically fragile, and/or otherwise high risk for severe disease should consult their health care provider about whether or not to continue wearing well-fitted masks. Staff who provide for students and children with disabilities that require close contact should strongly consider wearing appropriate PPE when providing care. In addition, schools should leverage recommended mitigation measures in meeting the needs of their high-risk populations, following all existing state and federal laws in doing so.

Schools and providers should provide masks and other appropriate PPE to staff, students, and children as needed or desired.

While correct use of well-fitting masks helps prevent the spread of COVID-19, there are specific exceptions to mask recommendations based on age, development, or disability. See [DOH's Guidance on Face Coverings](#) and [CDC Recommendation Regarding the Use of Face Coverings](#) for more information. Employees have the right to choose to mask or select more protective masks. Refer to L&I's [Coronavirus Facial Covering and Mask Requirements](#) for additional details.

Testing

Students in grades K-12 will participate in District-provided regular COVID-19 testing, unless their families elect to opt out of this testing. Any symptomatic student at a District facility may be administered rapid antigen testing with parent consent. Students who opt out of rapid antigen tests may be subject to exclusion from District property until the conclusion of any quarantine period and/or testing process, per guidelines of local, state, and federal health authorities.

All students and staff must ultimately pursue testing if symptomatic, or considered a close contact of a COVID-positive person, and/or complete the recommended quarantine period for persons with symptoms or persons with close contact. Molecular (PCR/NAAT), antigen, and at-home tests are acceptable. If they test positive, they must [isolate](#).

Batch Testing

The District has a pool testing system. Students will be tested in class on a weekly basis. Batches will contain up to 10 samples, and therefore each classroom may contain multiple batches. Staff will also be tested weekly. Staff assigned to specific programs or classrooms will include their samples with one of the batches from the program or classroom to which they are assigned. Educators not assigned to specific programs or classrooms (i.e., STSs, ESAs, nurses, counselors, school assistants, 1:1 paraeducators, etc.) will include their samples with a classroom batch.

Classroom teachers and staff for all in-person programs will observe student COVID testing and collect samples upon completion.

Consent

Opt-in consent will not be required for batch testing students or staff with CIC Health. Families & staff may opt out through the [CIC Health opt-out form](#). To ensure enough time for schools to prepare testing materials, opt-out forms must be completed by 10:00 a.m. the day prior to testing. Students may also opt out at the time of testing. Students may not be forced to test.

If any student (or staff) has had COVID-19 in the past 90 days, they should not be included in the batch test. After a person has tested positive for COVID-19, their body will continue to “shed” the virus and should not test for 90 days as it could create a false positive result.

Staff who are unvaccinated will not have the option to opt-out of batch testing.

Testing Schedule

Each student is currently scheduled to be tested once per week.

Testing will occur on Monday, Tuesday & Wednesday of each week. Testing schedules are as follows:

Monday

- **BOTHELL HS/ATI Program**
- Innovation Lab HS
- Secondary Academy for Success/ATP Program
- Canyon Creek
- Canyon Park MS
- Crystal Springs
- Frank Love
- Maywood Hills
- Shelton View
- Skyview MS
- Westhill

Tuesday

- **INGLEMOOR HS**
- Kenmore MS
- Northshore MS
- Arrowhead
- Kenmore Elem
- Lockwood
- Moorlands
- Woodmoor

Wednesday

- **NORTH CREEK HS**
- Leota MS
- Fernwood
- Kokanee
- Ruby Bridges
- Wellington
- **WOODINVILLE HS**

- Timbercrest MS
- Cottage Lake
- East Ridge
- Hollywood Hill
- NN/NFP at Bear Creek Campus
- Sunrise
- Woodin

Sample Size

Each batch contains up to 10 samples. Any actions taken as a result of a positive batch, will **ONLY** affect those in the positive batch. No action is necessary for other batches from the same class with no positive results, or for individuals who opted out of testing or students who were absent on the day of testing.

Actions for a positive batch result:

- Fully vaccinated persons (staff & students) included in the batch do not have to quarantine, but must take a Covid test* within 3 days of notification and present results as soon as possible.
- Unvaccinated persons included in the batch must quarantine until they receive a negative test.
 - Unvaccinated students/staff will be sent home immediately based on parent availability upon known batch results if students are in school at the time. If parent pick is not an option, consult your COVID Supervisor for

Confirmatory Testing

Antigen tests, point of care (POC) molecular tests, or at-home tests are acceptable.

PCR Testing

- Students or staff who are included in a batch test that has a positive test result will be invited to attend one of NSD's PCR testing days for confirmatory testing.
- Confirmatory testing will not be required, however, students or staff who decline to do confirmatory testing (within the required window) must quarantine for the full 14-day quarantine.
- Staff/students included in a positive batch should pursue confirmatory PCR testing either on their own, or attend the next district hosted PCR testing event.
- NSD hosted PCR testing will take place at Pop Keeney Stadium on Wednesday, Thursday & Friday each week between 12 p.m. – 2 p.m.

On-site Rapid Antigen Testing

School nurses may administer a rapid antigen test to a student (with parent consent) or staff member who the nurse determines is displaying symptoms of COVID-19 at school, according to local health guidelines.

Performing Arts

High aerosol-producing performers [e.g., singers, woodwinds and brass, speech/debate, dance (competitive and dance squads) and theatre performers] should consider wearing appropriate masks and/or use appropriate bell covers while practicing and/or performing.

- Bell covers with appropriate material – MERV 13 or 3-layer medical face mask or similar material – are recommended for:
 - Brass and woodwind instruments when indoors.
 - The end or barrel of a recorder when indoors.
- Masking with appropriate material – 3-layer medical face mask or similar material – should be considered in general music and elementary classrooms when singing is performed. Staff may provide students with a mask designed to fit snugly while allowing for facial movement during singing.

Performers, directors, and other support personnel should physically distance indoors to the degree possible. Ensure that all students have access to their chosen performing arts course. Space constraints should not limit access to these classes.

- The use of cohorts within a performing arts activity group limits the potential for group-wide transmission in the event of an exposure or outbreak.

Maximize ventilation of the space as much as possible. If a space is smaller and/or not well-ventilated, consider using portable HEPA air cleaners to supplement. See also [Ventilation](#) above for best practices to allow appropriate time for air change.

Practice good hygiene collecting water condensation from brass instruments. Consider using absorbent pads for students to empty spit valves rather than emptying directly on the floor.

Athletics

Maximize ventilation of indoor space as much as possible. If a space is smaller and/or not well-ventilated, consider using portable HEPA air cleaners to supplement or moving the activity outdoors. See also [Ventilation](#) above for best practices to allow appropriate time for air change.

Athletes, coaches, athletic trainers and other support personnel should consider wearing masks when participating in indoor activities, especially high-risk indoor sports (e.g., basketball, wrestling, water polo, indoor cheer), where aerosolization may occur

and the indoor space is not well ventilated; and should distance to the degree possible whenever not playing.

- The use of cohorts within the team limits the potential for team-wide transmission in the event of an exposure or outbreak and should be considered for practices, warm-ups, and when traveling.

Screening Testing for Sports, Performance Arts, or Other Activities/Events

To promote safer participation in school-sponsored activities, schools may implement screening testing protocols for all athletes in high-risk indoor sports (e.g., basketball, wrestling, water polo, indoor cheer), performing arts (e.g., choir, band, theatre), and/or other activities.

- Screening testing of participants can be performed either at a regular weekly cadence (e.g., once or twice per week) or be performed on the day of the production, competition, or event. Individuals who tested positive for COVID-19 in the past 90 days and recovered do not need to participate in screening testing unless symptomatic, at which time an antigen test is recommended.
- All participants in indoor low- or moderate-risk sports, or other activities, may also participate in screening testing. This is especially important when community levels are high. Please see the [CDC's COVID-19 community levels](#) for more information.
- Any athlete, performer, or staff member with a positive test is required to isolate and should not participate in training, rehearsal, competitions, productions, or events during their isolation period. Follow the [Exclusion of People with Symptoms of COVID-19](#) and [Isolation of COVID-19 Cases](#) sections above for more information. [Exposure notification](#) of the team as a group may be warranted. [Report cases](#) as required.

Other Co-curricular or Extracurricular Activities (CTSOs, Clubs, Interest Groups, STEM Fairs, Field Trips, etc.)

Students, children, staff, support staff, and volunteers should consider the guidelines within this document when hosting or participating in school- or program-sponsored activities, contests, shows, etc., to minimize the risk for COVID-19 transmission.

Personal Protective Equipment (PPE)

Using Personal Protective Equipment (PPE) is based upon several precautionary factors when physical distancing and other protective measures are not feasible or effective. The guidance for PPE use is determined by local health officer/department guidance, L&I requirements based on the role and the need to protect workers and the level of risk associated with the COVID-19 contagion.

Specific information and training will need to be offered in order to teach use of PPE. The use of personal protective equipment will vary depending on the role or situation in the educational setting and may include: surgical masks, KN95 masks, N95 masks, eye protection, face shields, gowns and gloves.

Families may see staff members wearing different levels of PPE based upon the task or job the staff member is assigned to.

Physical Distancing

Per OSPI's K-12 COVID-19 Requirements for the 2021-2022 School Year, the District will implement protocols to maintain a minimum separation as recommended by state and county health departments between all employees, students, and others to the maximum extent feasible. Building-specific strategies to increase physical distancing may include:

- Rearranging desks/tables to maintain 3 feet of space between students, to the degree possible
- Keeping students in cohorts/clusters, to the degree possible
- Reducing the number of staff/students in hallways at any time, to the degree possible
- Assigning seats, to the degree possible
- Limiting access to essential visitors or volunteers

Each building should continue to use signage to encourage physical distancing to lower the risk of transmission. Building Administrators will work with Facilities for traffic flow and sign placement that is specific to their building.

Some staff will work regularly with multiple groups of students such as elementary specialists and secondary teachers. The layering methods of all of these interventions help to decrease risk of transmission of COVID-19. This may include:

- Compliance with mask wearing, physical distancing, hand washing, and other precautionary measures.
- Regular cleaning and disinfecting of the learning spaces.

Drinking Water

Drinking fountains will be closed. Water will be available to students to fill water bottles through such means as classroom faucets, water bottle filling stations or water dispensing stations.

Food and Nutrition

Free lunch and breakfast will be available when students return to campus in the Fall. Students can choose to access school meals or may bring their own. Free breakfast and lunch meals will be available to all students through the end of the 2021-2022 school year.

Meals

- Although there will be no charge for breakfast or lunch reimbursable meals, the Food & Nutrition department will need to track the meals served at the time of service.
- Special diet requests must be arranged in advance through the Director of the Food & Nutrition Services.
- Only complete breakfast or lunch meals will be free. Incomplete meals or a la carte items must be charged to student accounts.

Physical Distancing/Masks

- Maximize distance between students to the degree possible when masks cannot be worn, such as when eating lunch
- 3 ft physical distancing will be required in lunch lines, to the degree possible
 - Stickers will be adhered to the floor for appropriate distancing markers
 - Designated walking paths will be marked where necessary

Food Safety/Sanitation

- Students will sanitize their hands as they enter the lunchroom or service area
 - Hand sanitizing stations will be set up in each food service serving space
- Standard sneeze guard/food covering requirements will be in effect
- Standard cleaning/sanitizing requirements will be followed in the kitchen and lunchroom areas

A la carte

- Milk only will be available for purchase at all levels for students who have money in their account.
- A la carte breakfast and lunch items will be available for purchase at the Middle School and High School levels for students who have money in their account.
- All COVID-related physical distancing and eating requirements will be enforced to the extent possible with a la carte food items as well as school meals.

Transportation

Transporting Students on School Buses

Student transportation includes different sizes and styles of school buses, cars and vans. When school starts, parents/guardians must evaluate their child for symptoms of illness each day PRIOR to sending their child to the bus stop or school. Student Health Checks will not be done at the bus stop or on the bus.

Personal Protection Equipment (PPE) for bus drivers and students

Every NSD Transportation Department vehicle assigned to transport a student will carry a small PPE packet (extra disposable face masks, hand sanitizer, disinfectant wipes, and gloves).

Vehicle Ventilation

Windows and roof hatches will remain slightly open to increase ventilation along with airing out the bus between shifts.

- Students should dress warmly as several windows will be lowered and roof hatches will be slightly open to provide ventilation and increase air circulation.
- The driver's window remains closed while the bus is in motion and if possible, defrost fans turned on and facing towards the driver to keep air flowing past the driver's area.

Seating

The number of passengers assigned to one bus is limited (depending on size of the bus).

- The elementary level bus will have younger students in the front half of the bus and older students sitting towards the back.
- To limit sit time on the bus, students should depart the bus soon after arriving at the school load zone.

Cleaning

Frequent cleaning procedures for commonly touched surfaces on the bus are required.

- After each run, the driver will wipe down high touch surfaces (handrail, seat tops and securement equipment, etc.) with a disposable disinfectant wipe.
- At the end of the day, the driver will clean the inside of the bus, including the driver's area (clean handles, steering wheel, key, control panel, radio knobs, etc. with disinfectant wipes).

Other

- If a student appears to be ill and alone at the stop, the driver will call dispatch for instructions.
- If a student appears to be ill while onboard the student will be assigned to a specified seat. The driver will call dispatch to notify the school and the student will be sent to the health room upon arrival.
- Eating and drinking on the bus will not be permitted at any time.
- Reminders: Frequent hand washing, use of hand sanitizer and not to touch face.

Recess/Outdoor Spaces/Playgrounds

Although not required, masks are strongly recommended for unvaccinated individuals when outdoors in crowded spaces or when in close contact with people from outside their household for a sustained period of time, as the risk of COVID-19 infection increases with the duration and closeness of contact between individuals. Schools should support students and staff who choose to wear a face covering outdoors.

Schools will develop plans to promote student groups staying together and physical distancing during non-instructional time.

- This could include staggering of break times and zoning of outdoor spaces for groups of students.
- Play structures may be open for use during recess, but could be included in zoning plans to allow maximum physical distancing while in use.
- Schools will develop site-specific plans to promote physical distancing and reduce the risk of infection.

At the start/end of recess breaks each day, all available school doors will be utilized to support physical distancing measures. Once students are in class, doors other than the main entrance may be locked for security purposes.

Visitors on School Grounds

Northshore School District Buildings are open to staff, parents as well as essential volunteers & business partners.

- Visitors must sign-in at the main office with phone number/email
- As mandated by Governor Jay Inslee, all K-12 and early learning educators, school staff, coaches, bus drivers, **school volunteers** and others working in school facilities must be fully vaccinated by October 18, 2021.

Keeping our Facilities Safe

Cleaning, Sanitizing and Disinfecting Facilities

Cleaning and disinfection protocols for a probable case of COVID-19 will comply with CDC recommendations. Access to areas visited by a probable case of COVID-19 will be restricted until cleaning and disinfection is completed.

General Interior Cleaning

Includes: Offices, Lobbies, Auditorium, Gym, Classrooms, and Stairwells.

- Disinfection of all areas between student groups
- Daily cleaning and sanitization of all general areas
- Daily cleaning and sanitization of all drinking fountains
- Clean and sanitize all high touch surfaces. Door handles and knobs, light switches, desk tops, tables, pencil sharpeners, phones. (Computer keyboards, mouse, electronic equipment will not be cleaned by custodial staff. Disinfecting wipes will be supplied in all areas to allow disinfection of electronic equipment.)

Restroom, Locker and Health Room Cleaning

Daily Service (5 days per week)

- Daily sweep and damp mop all floors with Virex II disinfecting solution, vacuum carpeted areas.
- Daily clean and disinfect all wash basins, urinals, toilet bowls and locker room benches using Virex II disinfectant.
- Daily damp wipe with Virex II disinfectant all flush valves, piping, hinges, faucets and other devices.
- Daily damp wipe with Virex II disinfectant all partitions, shower stalls and doors, walls, floor drains, tile walls, sinks counters, receptacles, shelves, metal doors, and light switch fixtures.
- Daily empty and damp wipe trash receptacle with Virex II disinfectant. Replace liners daily.
- Daily clean and disinfect all entry doors, handles, push and kick plates.
- *Health Rooms*: disinfect as needed.

Cafeteria, Kitchen and Dishwashing Areas

- Food preparation areas are disinfected daily using products approved for those areas.

- Daily empty, clean and sanitize all waste receptacles and replace liners. Return receptacles to their prior position.
- Daily clean and sanitize all sumps and drains.
- Daily wet mop all hard surface floors with VirexII disinfectant.
- Daily clean and sanitize all high touch surfaces with EPA registered disinfectant. Door handles and knobs, light switches, and tables.

Updates to the Handbook

As we update the handbook, changes will be noted in this section.

- 8/24/21 added: Information regarding students becoming ill at school, as well as, students or staff testing positive for Covid 19
- 8/24/21 updated Transportation information
- 8/26/21 added 3rd bullet point under Visitors on School Grounds regarding vaccination mandate
- 8/31/21 added updated guidance for MASKS - Outdoor Spaced Requirements (page 11)
- 9/16/21 updated link to King County Health Return to Work/School Flowchart
- 9/16/21 updated “close” contact information from King County
- 9/20/21 edited name of Return to Work/School Flow Chart for better understanding
- 9/20/21 added detailed information on Performing Arts and Extracurricular Activities
- 9/22/21 added Vaccination Verification information
- 9/22/21 added information on Testing
- 9/23/21 updated quarantine length to reflect current Public Health recommendations
- 10/8/21 updated link to new Return to Work/School flowchart
- 01/17/22 update DOH isolation information
- 01/21/22 updated to clarify DOH guidance for NSD
- 3/12/22 updated guidance from Department of Health for Schools
- 3/12/22 added guidance from PSESD for Head Start programs