



WOODBIDGE SCHOOL DISTRICT

40 Beecher Road – South
Woodbridge, Connecticut 06525

August 16, 2022

Christine Syriac – Interim Superintendent
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Dear Beecher Road School Parents,

It is with great pleasure that I reach out to welcome our new and returning families to the start of the 2022/23 school year at Beecher Road School. Summer break passes swiftly. Hopefully you were able to spend time out of doors with your children this summer. The summer break provides an opportunity for summer camp experiences, family trips, reading for leisure and making lasting family memories. Please make the most out of the remaining weeks before school reopens for students on Monday, August 29. Our first two days of school will be early release days (1:10 PM) for our students. The building principal, Analisa Sherman, and her staff will be sharing your children's classroom teacher and important information about BRS arrival/departure times and the protocols for drop-off/pick-up that will be in place at the start and the end of school.

Our COVID protocols that will be in place for the start of school will be very similar to when the school year concluded in June. Please reference the [Safe Return to In-Person Instruction](#) posted on the district web site. I have highlighted where changes were made. *Please also note that Masking remains voluntary for staff and students at this time.*

The Connecticut State Department of Education (CSDE) and the Department of Public Health (DPH) announced their [Launching into Healthy Learning](#) initiative for the start of the 2022/23 school year. The initiative provides guidelines for reopening that are designed to maximize in-person learning and to keep our students in school as much as possible. The three key areas of focus from the CSDE and DPH are to provide vaccination clinics and encourage everyone to keep vaccinations current, to provide access to free home test kits, and to provide a strategy for what to do when your child is not feeling well. When you review the [Operation Strategies](#) document from the CSDE and DPH, please review the section [Test-Mask-Go](#). This section suggests a strategy to use when you are not certain if the symptoms your child has are due to allergies, the common cold, a mild respiratory illness or COVID. If your child has no fever you should test your child with an at home test kit. If the test is negative and you feel your child is well enough to come to school then it is okay to do so. The guidelines suggest a mask, which at this time that remains a choice at BRS. **If your child has a fever, they must stay home.** If you have any questions once school is in session, please do not hesitate to contact the Nursing Office. The only time that we will currently require a mask is after a student or staff member has tested positive for COVID. We will follow the CDC guidance: a positive COVID test requires a five-day isolation, if on day six there is no fever (after not taking fever-reducing medication for 24 hours) the COVID positive individual may return to school, however, they **MUST** wear a mask through day ten. As in the past, all COVID positive cases should be reported to our school nursing department.

The State has discontinued Project COVID DeteCT. I know that some families participated in the program and your children were tested at school. We will no longer provide testing at BRS. We do have access to free test kits and encourage families to request free home testing kits from the district office. Contact tracing ended in the spring and will not be occurring at the start of school. The Nurse Supervisor, Robin Froehle and I will continue to receive guidance from our local health department (QVHD), the DPH, and the CSDE and will keep you informed of any changes to our protocols. While we are no longer cohorting our students, we are developing alternative plans that will be ready for implementation should the need arise for a return to cohorting.

It is our hope that students and staff will remain healthy and attend school as much as possible this year. I know in the past when your child was out, there were times when access to remote instruction was available from the classroom. Please know that will not happen this year. Public Act 22-80 does not permit dual instruction --simultaneously teaching in-person and remote learners in Grades PreK-8. Building administration will work with teachers to develop a process so parents will know how to access student work when their child is out absent for any period of time.

Again, welcome to a new school year at Beecher Road School.

Sincerely,


Christine Syriac
Interim Superintendent

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LAUNCHING INTO HEALTHY LEARNING – Fall 2022

Respiratory Disease Prevention Strategies for School, Child Care, and Camps: *Continuing forward to support in-person learning and child care.*



Minimize impacts from respiratory disease outbreaks and maximize successful in-person learning and child care during the coming school year by thoughtfully employing familiar mitigation strategies.

As we continue last school year's transition away from executive orders to local decision-making regarding COVID-19 response, it is important for schools, child care programs, and youth camps to keep in mind the tools and resources for respiratory disease prevention that remain available to them. As part of this local decision-making process, schools, child care programs and camps are reminded to continue to work collaboratively with their local health departments and members of their communities, including staff and families, to determine which of the various prevention strategies are most appropriate to implement within their facilities. The Connecticut Department of Public Health (DPH) offers the following guidance to assist in local decision-making, in the context of local conditions, to balance respiratory disease prevention measures with maximizing in-person participation opportunities for children.

START HEALTHY with vaccination.

Vaccinations are the **first and most important** line of defense in preventing respiratory diseases like COVID-19 and influenza from disrupting the continuous operation of schools, child care programs, and youth camps. The effectiveness of any other respiratory disease prevention strategy at a school, child care program or youth camp is likely to be dependent on the underlying level of COVID-19 and influenza vaccination in staff and children. **Everyone 6 months of age or older can receive both COVID-19 vaccine and a seasonal vaccine for influenza.** Many school aged children are eligible for a **COVID-19 vaccine booster dose** right now, and it is likely that the Centers for Disease Control and Prevention (CDC) will recommend that **all eligible school aged children should receive a COVID-19 booster dose before winter.** Schools, child care programs, and youth camps should encourage all children and staff to get [up-to-date](#) with their COVID-19 vaccinations prior to the start of the school year and should encourage the same for seasonal influenza vaccines when they become available this fall. Hosting on-site vaccination clinics is a great way to encourage vaccination and show your support to the children and families you serve. [DPH can assist](#) facility administrators with organizing these events and [local health departments](#) can be a great resource as well.

MAXIMIZE IN-PERSON LEARNING with symptom awareness and at-home testing.

It is clear that in-person attendance provides the greatest benefit to children for both social/emotional/physical wellbeing and academic achievement. CDC recommends that people with symptoms of infectious diseases, including COVID-19, influenza, and gastrointestinal infections should stay home and get tested for COVID-19, and DPH supports this recommendation. However, DPH also recognizes the severe impact this prevention strategy can have on in-person learning opportunities, student achievement, attendance, and engagement for some children and communities. This is especially true during fall and spring allergy seasons and the winter months when mild respiratory symptoms seem to be almost constant. CDC continues to advise that children and staff should not report in-person to school, child care, or camp if they are experiencing any COVID-19 symptoms, regardless of a negative test result. While DPH supports CDC's guidance, we also support an alternative approach for those administrators who feel that it may benefit their students and staff by providing more in-person learning opportunities.

DPH advises that children and staff with **mild respiratory disease symptoms** (infrequent cough, congestion, runny nose, sore throat, etc.), **no fever, and no known COVID-19 case in their household** should self-test at home for COVID-19 prior to leaving for school, child care, or camp every day they have symptoms and can be allowed to attend in-person if their test result is negative and they feel well enough to participate. **Anyone with a fever ($\geq 100^{\circ}\text{F}$) or who feels feverish should not report in-person** until their fever has resolved for at least 24 hours without the use of medication and should test for COVID-19. COVID-19 self-tests kits will be made available to all school districts, child care providers, and operating youth camps (see DPH/CSDE/OEC's [Launching into Healthy Learning: Operational Strategies – Fall 2022](#) information). Families can also order self-test kits by visiting [COVID.gov/tests](https://www.cdc.gov/tests). Children and staff choosing to report in-person with mild symptoms should be **strongly encouraged** to wear a well-fitting mask indoors. Anyone testing positive for COVID-19 should complete isolation according to the [CDC Q/I Calculator](#).

USE AVAILABLE PREVENTION TOOLS based on conditions in your area.

School districts, child care programs, and youth camps are **still required to report COVID-19 cases** using systems put in place by DPH and OEC, and DPH encourages continued sharing of general information about COVID-19 cases in your facilities with families. However, DPH recommends that school, child care, and camp administrators rely on the CDC [COVID-19 Community Levels](#) to determine when to consider applying enhanced measures for the prevention of respiratory viral diseases (e.g., COVID-19, influenza). Facilities located in counties with **Low** community levels can focus on maximizing in-person learning days and rely on routine everyday strategies to provide healthy learning environments. If their county moves to the **Medium** level, administrators can consider whether implementing some additional prevention strategies could be beneficial in mitigating any impact that increased COVID-19 cases in their community may have on in-person learning. Facilities located in counties with a **High** COVID-19 Community Level can consider whether implementing even more advanced mitigation strategies could be beneficial, including such things as universal masking and contact tracing, to prevent further surges or outbreaks at their facilities. Administrators who may be experiencing case clusters or outbreaks at a facility should [contact DPH](#) and [their local health department](#).

Facilities located in counties with **LOW** community levels should maintain everyday prevention strategies:

- Encourage and facilitate [COVID-19 vaccination](#) for all children 6 months of age and older and all staff, including [booster vaccine doses](#) when recommended.
- Support children and staff who choose to continue [wearing a mask](#) even when not required.
- Follow [isolation guidelines](#) for individuals who have tested positive for COVID-19 or who have symptoms and live in a household with someone with COVID-19.
- Recommend [self-testing and masking](#) for children and staff with respiratory disease symptoms (with or without fever) or known exposures to COVID-19 cases with or without symptoms.
- Ensure that ventilation systems are well-maintained and operating appropriately.
- Maintain routine cleaning and disinfection protocols for all classroom surfaces and common areas.
- Continue advising parents to report cases of COVID-19 to the school and maintain accurate absentee data.

Additional prevention strategies to consider for facilities located in counties with **MEDIUM** community levels:

- Increase spacing between seated individuals in classrooms and during other activities, if possible.
- Be prepared to respond quickly to rapid increases in absenteeism, cases, or outbreaks in schools.
- Increase ventilation to ensure maximum delivery of fresh outdoor air to occupied spaces, appropriate filtration of any recirculated air, and use of outdoor spaces to the extent possible.
- Reinforce frequent hand cleaning and proper respiratory (cough/sneeze) etiquette.
- Communicate early and often with students, staff, and families regarding any changes in policies and procedures in order to ensure a heightened awareness of any respiratory disease symptoms.

Advanced prevention strategies to consider for facilities located in counties with **HIGH** community levels or those experiencing outbreaks:

- Implement a universal mask use policy for indoor spaces.
- Limiting outside visitors to the school to those who are necessary for instruction or student support.
- Cohort classrooms and during meals, recess, and other gathering times.
- Implement strategies to monitor and prevent in-school transmission of COVID-19, such as contact tracing, quarantine or daily screening testing (i.e., *Test-Mask-Go*) of close contacts of a COVID-19 case in any setting (with or without symptoms), and classroom-level exposure notifications.
- Discuss whether extracurricular activities that involve high-intensity close contact (e.g., indoor athletics, performing arts) should be temporarily suspended.

Head Start programs operating in public schools and in the community must also meet national performance standards and follow [COVID-19 requirements set forth by the U.S. Department of Health and Human Services](#). These requirements may differ from state guidance, and schools are urged to work closely with Head Start programs to ensure that policies and procedures take into account any differences that may impact a child or family's experience with in-person learning.



LAUNCHING INTO HEALTHY LEARNING

Operational Strategies - Fall 2022

The Connecticut Department of Public Health (DPH), State Department of Education (CSDE), and Office of Early Childhood (OEC) are excited to announce the **Launching into Healthy Learning** initiative for the start of the 2022-2023 school year! This initiative is designed to get Connecticut's kids back to school, child care, and camp at the scheduled start of the school year, to keep them there in-person as much as possible throughout the year, and to keep them healthy and learning all year long. In addition to updated DPH guidance for K-12 school administrators, child care, and youth camp program operators (*Respiratory Disease Prevention Strategies for Schools, Child Care, and Camps: Fall 2022*), DPH, CSDE, and OEC will work closely with school districts, child care, and youth camp facilities in the coming weeks to provide the following resources to Connecticut's children and their families.

COVID-19 VACCINATION CLINICS will be organized for all 36 of Connecticut's Alliance School Districts that are open to school, child care, and youth camp staff, students, and families in those communities. DPH, CSDE, and OEC will coordinate with Alliance District administrators, child care operators, and youth camps to deliver on-site state-sponsored mobile vaccination clinics ("yellow vans") to offer COVID-19 primary or booster vaccine doses to anyone 6 months of age or older. Administrators, child care operators, and youth camps in non-Alliance Districts can also request free mobile vaccination clinics for their communities by contacting SDE.COVID19@ct.gov at CSDE (for school district administrators) or HealthEquityTeam@ct.gov.

SELF-TEST KITS will be available free of charge to all Connecticut schools, child care programs, and youth camps to distribute to their students, staff, and service providers (e.g., bus drivers, specialized instruction providers, etc.). The State of Connecticut has ordered approximately 2.5 million self-test kits (5 million individual tests) for distribution to school districts and early childhood education programs. The State plans to order additional self-test kits for distribution to licensed child care programs and operating youth camps throughout Connecticut as well. For more information on test kit distribution, school administrators should work within their Districts to coordinate COVID-19 supply requests or contact SDE.COVID19@ct.gov for more information. School districts, licensed child care centers, and operating youth camps will receive additional information in the coming days directly from CSDE and OEC.

TEST-MASK-GO is an optional strategy designed to increase the number of days of in-person learning and care available to children, both to improve the social/emotional/physical wellbeing of students, staff, and their families and to enhance learning recovery. The fall and spring allergy seasons combined with New England winters present a challenge for schools, child care, and youth camp facilities that were advised in previous years to exclude individuals from in-person attendance if they had any of a long list of symptoms associated with COVID-19. Schools, child care programs, and camp operators choosing to utilize a *Test-Mask-Go* strategy can **give children and staff with mild respiratory disease symptoms (e.g., infrequent cough, congestion, runny nose, sore throat, etc.)** the option to continue participating in-person provided:

- they are **fever-free (< 100°F)** and feel well enough to participate,
- **they do not live with anyone who has had COVID-19 in the past 2 weeks,**
- they can wear a mask consistently and correctly (if facility operators require them to do so), and
- **they test negative for COVID-19 prior to reporting in-person on every day they have symptoms, as well as one final test on the morning their symptoms have completely resolved.**

Individuals who have **any** respiratory disease symptoms **should not** use the *Test-Mask-Go* strategy if:

- **they have a fever ($\geq 100^\circ\text{F}$) or feel feverish** (they should not report in-person until their fever has resolved for at least 24 hours without the use of medication)
- **they live with a person who recently tested positive for COVID-19** (within the past 2 weeks)

Instead, these individuals should stay home until their symptoms resolve and test for COVID-19. Anyone testing positive for COVID-19 should complete isolation according to the [CDC Q/I Calculator](#). School, child care, or youth camp administrators or health staff who have questions regarding *Test-Mask-Go* should contact DPH.EPI@ct.gov.