



# **ASCEND LEADERSHIP ACADEMY COVID-19 GUIDANCE**

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## Ascend Leadership Academy COVID-19 Guidance

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## 1. Current Public Health Guidance

This guidance was developed in order to secure the safety and protection of students, families, and staff as ALA operates in the current COVID-19 environment. This guidance does not substitute current federal/state federal guidance. The primary use is to clarify and document ALA's specific procedures and operations. ALA will, to best extent possible, keep this guidance updated as new information is published by North Carolina Department of Health and Human Services (NCDHHS) and/or North Carolina Department of Public Instruction (NCDPI).

Taken from [StrongSchoolsNCToolkit](#) dated 26 August 2021:

*After months of decline, North Carolina is experiencing a rapid increase in COVID-19 cases and hospitalizations among those who are unvaccinated. The Delta variant, which is now the predominant strain of the COVID-19 virus in North Carolina, is significantly more contagious than the original virus. While the original virus spread from one person to an average of two or three people, the Delta variant is spreading from one person to an average of six people. Therefore, unvaccinated people are at greater risk of catching and spreading COVID-19, and they pose a risk to children under 12 who cannot be vaccinated and those who are immunocompromised. Getting vaccinated is the most effective way to prevent serious illness, hospitalizations and death, and slow community spread. Rigorous clinical trials among thousands of people ages 12 and older, have proven that vaccines are safe and effective.*

For guidance pertaining to ALA's Sports Program, see ALACovidGuidanceSportsSAP06NAug2021 located in [ALA Admin Google Drive](#).

### Resources used in guidance development:

- [StrongSchoolsNC Public Health Toolkit \(K-12\)](#) updated 26 Aug 2021.
- [Interim Guidance for Administrators and Participants of Youth and Amateur Sports Programs](#) updated 06 Aug 2021

## 2. ALA Requirements

Each section is organized into categories that prioritize implementation of the strategies which are most effective in lowering the risk of COVID-19 exposure and spread in school sessions and school activities:

- Strategies that **SHOULD** be implemented by all schools. These are strategies that, if not implemented, create conditions of high risk for COVID-19 exposure and spread. **NCDHHS strongly advises that school leaders adopt all the strategies in the SHOULD sections.**
- Strategies that school leaders **COULD CONSIDER** adopting. These are strategies to provide additional layers of prevention

### 2.1 Promoting Vaccination

Achieving high levels of COVID-19 vaccination among eligible students as well as teachers, staff, and household members is one of the most critical strategies to help schools safely resume full operations.

Vaccination is currently the leading public health prevention strategy to end the COVID-19 pandemic. People who are fully vaccinated against COVID-19 are at low risk of symptomatic or severe illness, including hospitalization or death. A growing body of evidence suggests that people who are fully vaccinated against COVID-19 are also less likely to have an asymptomatic infection or transmit COVID-19 to others than people who are not fully vaccinated. In most settings, people who are fully vaccinated can safely resume activities they did before the pandemic.

**ALA will:**

1. Require teachers and staff to report vaccination status.
2. Require teachers and staff who are unvaccinated, or do not disclose vaccine status, participate in screening/testing programs.

## 2.2 Cloth Face Coverings

The following guidance reflects the latest CDC recommendations on masks:

When teachers, staff, and students consistently and correctly wear a mask, they protect others as well as themselves. Consistent and correct mask use is especially important indoors and in crowded settings when physical distancing cannot be maintained.

- **Indoors:** Mask use is recommended for all people including students, teachers, and staff in K-12 settings. Children under 2 years of age should not wear a mask. **Outdoors:** In general, people do not need to wear masks when outdoors. However, particularly in areas of substantial to high transmission, CDC recommends that people who are not fully vaccinated wear a mask in crowded outdoor settings or during activities that involve sustained close contact with other people who are not fully vaccinated.
- **During school transportation:** CDC's Order applies to all public transportation conveyances, including school buses. Regardless of the mask policy at school, all passengers and drivers should wear a mask on school buses, including on buses operated by school systems, subject to the exclusions and exemptions in CDC's Order.

*Cloth face coverings should **not** be placed on:*

- *Anyone who has trouble breathing or is unconscious.*
- *Anyone who is incapacitated or otherwise unable to remove the face covering without assistance.*
- *Anyone who cannot tolerate a cloth face covering due to developmental, medical, or behavioral health needs.*

**ALA will:**

1. Require all children and staff to wear face coverings consistently when indoors. Schools K-12th grade should make mask use universally required (i.e., required regardless of vaccination status) given that most of the student population in those grades are not yet eligible for vaccination.
  - a. Because students cannot mask consistently during mealtimes, students should maintain physical distancing of a minimum of 3 feet to the fullest extent possible when actively eating. Consider having meals outside where risk of virus transmission is low.
2. Per CDC's Order, require passengers and staff to wear a face covering on buses, vans, and other group school transportation.
3. Share guidance and information with teachers, staff, students, and families on the proper use, wearing, removal, and cleaning of cloth face coverings, such as [CDC's guidance on wearing and removing cloth face masks](#) and [CDC's use of face coverings](#).
4. Provide masks to those students who need them (including on buses), such as students who forgot to bring their mask or whose families are unable to afford them. No disciplinary action should be taken against a student who does not have a mask as described in the U.S. Department of Education COVID-19 Handbook, Volume 1.
5. Exceptions to face coverings are people who:
  - a. Should not wear a face covering due to any medical or behavioral condition or disability (including, but not limited to, any person who has trouble breathing, or is unconscious or incapacitated, or is otherwise unable to put on or remove the face covering without assistance);
  - b. Is under two (2) years of age;
  - c. Is actively eating or drinking;
  - d. Is seeking to communicate with someone who is hearing-impaired in a way that requires the mouth to be visible;
  - e. Is giving a speech for a broadcast or to an audience;
  - f. Is working at home or is in a personal vehicle;
  - g. Is temporarily removing his or her face covering at work, as determined by local, state, or federal regulations or workplace safety guidelines;
  - h. Has found that his or her face covering is impeding visibility to operate equipment or a vehicle; or
  - i. Is a child whose parent, guardian, or responsible person has been unable to place the Face Covering safely on the child's face.

### 2.3 Physical Distancing and Minimizing Exposure

Physical distancing means keeping space between yourself and other people outside of your household. It is a key tool to decrease the spread of COVID-19.

Because of the importance of in-person learning, schools where not everyone is fully vaccinated should implement physical distancing to the extent possible within their structures, but not exclude students from in-person learning to keep a minimum distance requirement.

**ALA will:**

1. Maintain a minimum of three (3) feet of distance between K-12 students who are not fully vaccinated within school settings to the greatest extent possible without excluding students from full-time, in-person learning.
2. Maintain a minimum of six (6) feet between adults (teachers/staff/visitors) and students and between adults (teachers/staff/visitors) who are not fully vaccinated within school settings to the greatest extent possible.
3. Instruction that includes singing, shouting, playing wind instruments, rigorous dance, or exercise, should be held outside if possible. If held indoors, ensure consistent mask use and 6-foot physical distancing between students.

## 2.4 Testing

Testing for COVID-19 can help quickly identify those who are infected and those who have been exposed but have yet to develop symptoms. Viral testing strategies in partnership with schools should be part of a comprehensive approach. Testing should not be used alone, but in combination with other prevention to reduce risk of transmission in schools. When schools implement testing combined with prevention strategies, they can detect new cases to prevent outbreaks, reduce the risk of further transmission, and protect students, teachers, and staff from COVID-19. School testing programs can increase family confidence in school attendance and reduce barriers to testing access in a community.

**ALA will:**

1. Require teachers and staff to report vaccination status and require those who are unvaccinated, or do not disclose vaccine status, to participate in screening/testing programs.
2. Refer individuals to diagnostic testing who have symptoms of COVID-19 or disclose recent known close contact to a person with COVID-19.

## 2.5 Handling Possible, Suspected, Presumptive, or Confirmed Positive Cases of COVID-19

**Symptoms:** Students, teachers, and staff who have symptoms of COVID-19, should stay home and be referred to their healthcare provider for testing and care. Staying home when sick is essential to keep infections out of schools and prevent spread to others.

For students, staff, and teachers with chronic conditions, symptom presence should represent a change from their typical health status to warrant exclusion from school. Occurrence of any of the symptoms below while a student, teacher, or staff member is at school suggests the person may be referred for diagnostic COVID-19 testing or evaluation.

- Fever or chills
- Cough
- Shortness of breath or difficulty breathing

- Fatigue
- Muscle or body aches
- Headache
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea

More information on how to monitor for symptoms is available from the CDC.

**Diagnosed:** People presumed to have or are diagnosed with COVID-19 must stay home until they meet the criteria for return to school. Staying home when sick with COVID-19 is essential to keeping COVID-19 infections out of schools and preventing spread to others.

**Exposed:** It is also essential for people who are not fully vaccinated to quarantine after a recent close contact to someone with COVID-19. Close contact with a case is defined as being physically exposed within 6 feet of another person for 15 minutes or longer cumulatively, within a 24-hour period

NOTE: As of 7/9/21, CDC added an exception to the need to quarantine in the close contact definition, excluding students who were within 3 to 6 feet of an infected student (laboratory-confirmed or clinically compatible illness) where:

- both students were engaged in consistent and correct use of well-fitting face masks; and
- other K–12 school prevention strategies (such as universal and correct mask use, physical distancing, increased ventilation) were in place in the K–12 school setting.
- This exception does not apply to teachers, staff, or other adults in the indoor classroom setting.

***ALA will:***

1. Have staff perform self-monitoring of symptoms.
2. Have families conduct home-based symptom screening for students, following typical school policies to keep children at home when ill. Recommend that families refer children to diagnostic testing who exhibit symptoms of COVID-19.
  - a. NCDHHS does not recommend daily COVID-19 symptom screening for all students at school entry. Schools should follow their typical procedures for exclusion as they would for any type of illness if a child is symptomatic at school.
3. Immediately isolate symptomatic individuals to a designated area at the school.
  - a. Maintain a dedicated space to isolate symptomatic individuals who become ill during the school day or disclose that they have tested positive for COVID-19. That space should not be used for other purposes.
4. Require symptomatic persons to wear a cloth face covering or a procedure mask while waiting to leave the facility or be tested.
  - a. Cloth face coverings should not be placed on:

- i. Anyone who has trouble breathing or is unconscious.
  - ii. Anyone who is incapacitated or otherwise unable to remove the face covering without assistance.
  - iii. Anyone who cannot tolerate a cloth face covering due to developmental, medical, or behavioral health needs.
5. Require school nurses or dedicated school staff who provide direct patient care to wear appropriate Personal Protective Equipment (PPE) and perform hand hygiene after removing PPE.
6. Ensure symptomatic students remain under visual supervision of a staff member who is at least 6 feet away. The supervising adult should wear a cloth face covering or a procedure mask.
7. Have a plan for how to transport an ill student or staff member home or to medical care.
8. Refer to diagnostic testing individuals who exhibit symptoms of COVID-19 at school or disclose recent known close contact to a person with COVID-19.
9. Implement cleaning and disinfecting procedures following [CDC guidelines](#).
10. Utilize [NCDHHS and the CDC quarantine guidance](#).
11. See [StrongSchoolsNCToolkit](#) for Quarantine requirements.

## 2.6 Cleaning and Hygiene

Cleaning of surfaces and washing hands with soap and water for 20 seconds or using hand sanitizer reduces the spread of disease. The below reflects updated CDC guidance on cleaning and hygiene.

People should practice handwashing and respiratory etiquette (covering coughs and sneezes) to keep from getting and spreading infectious illnesses including COVID-19. Schools can monitor and reinforce these behaviors and provide adequate handwashing supplies. If handwashing is not possible, use hand sanitizer containing at least 60% alcohol (for teachers, staff, and older students who can safely use hand sanitizer). Hand sanitizers should be stored up, away, and out of sight of young children and should be used only with adult supervision for children under 6 years of age.

Cleaning and disinfecting of surfaces can also reduce the spread of disease. In general, cleaning once a day is usually enough to sufficiently remove potential virus that may be on surfaces. Disinfecting (using disinfectants on the U.S. Environmental Protection Agency COVID-19 list removes any remaining germs on surfaces, which further reduces any risk of spreading infection.

### ***ALA will:***

1. Provide adequate supplies to support healthy hygiene behaviors (e.g., soap, hand sanitizer with at least 60% alcohol for safe use by staff and older children, paper towels, and tissues).



2. Teach and reinforce handwashing with soap and water for at least 20 seconds and/or the safe use of hand sanitizer that contains at least 60% alcohol by staff and older children.
3. Clean surfaces once a day, prioritizing high-touch surfaces. If there has been a sick person or someone who tested positive for COVID-19 within the last 24 hours, clean and disinfect the space using an EPA approved disinfectant for SARS-CoV-2 (the virus that causes COVID-19). Ensure safe and correct use and storage of cleaning and disinfection products, including securely storing and using products away from children, and allowing for adequate ventilation when staff use such products.

## 2.7 Transportation

Local education leaders and schools should follow the guidelines below and the [CDC Transportation Order](#) for their transportation vehicles (e.g., buses, vans).

### **ALA will:**

1. Ensure that all students ages 5 years and older, and all teachers, staff, and adult visitors wear face coverings when they are on a bus or other transportation vehicle, unless the person (or family member, for a student) states that an exception applies.
2. Enforce that if an individual becomes sick during the day, they do not use group transportation to return home and follow protocols outlined above.
3. Enforce if a driver becomes sick during the day, they follow protocols outlined above and not return to drive students until they meet criteria to return.
4. Keep windows open while the vehicle is in motion to help reduce spread of the virus by increasing air circulation, if appropriate, safe, and weather permitting.
5. Clean transportation vehicles regularly. Children should not be present when a vehicle is being cleaned.
6. Ensure safe and correct use and storage of cleaning and disinfection products, including storing products securely away from children and adequate ventilation when staff use such products.
7. Clean frequently touched surfaces in the vehicle (e.g., surfaces in the driver's cockpit, hard seats, arm rests, door handles, seat belt buckles, light and air controls, doors and windows, and grab handles) prior to morning routes and prior to afternoon routes.
8. Keep doors and windows open when cleaning the vehicle and between trips to let the vehicles thoroughly air out.
9. Clean equipment including items such as car seats and seat belts, wheelchairs, walkers, and adaptive equipment being transported to schools.
10. Create a plan for getting sick students home safely if they are not allowed to board the vehicle.
  - a. Parents/Guardians are to stay with students until onboard bus. If parents/guardians are not present, bus driver is to contact ALA school administrators.

11. Provide hand sanitizer (with at least 60% alcohol) to support healthy hygiene behaviors on all school transportation vehicles for safe use by staff and older children.
  - a. Hand sanitizer should only remain on school transportation while the vehicles are in use.
  - b. Systematically and frequently check and refill hand sanitizers.

## 2.8 Water and Ventilation Systems

When reopening a building after it has been closed for a long period of time, it is important to keep in mind that reduced use of water and ventilation systems can pose their own health hazards. There is an increased risk for Legionella and other bacteria that come from stagnant or standing water.

### **ALA will:**

1. Ensure ventilation systems operate properly and increase circulation of outdoor air as much as possible by opening windows and doors, using fans, or other methods. Do not open windows and doors if they pose a safety or health risk to people using the facility.
2. Take steps to ensure that all water systems and features (e.g., sink faucets, drinking fountains) are safe to use after a prolonged facility shutdown by following the [CDC's Guidance for Reopening Buildings After Prolonged Shutdown or Reduced Operation](#) and the [CDC's Ventilation in Schools and Childcare Programs](#) to minimize the risk of diseases associated with water.

## 2.9 Protecting Vulnerable Populations

Everyone is at risk for getting COVID-19 if they are exposed to the virus, but some people are more likely than others to become severely ill. Read more information from the CDC. People at increased risk include anyone who: [www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-with-medical-conditions.html](http://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-with-medical-conditions.html)

### **ALA will:**

1. Include possible accommodations on health related plans to limit risk for exposure for students with special health care needs (e.g., Individual Healthcare Plans, Individual Education Programs, Section 504 Plans).

## 2.11 Additional Considerations

1. Workers at increased risk for severe illness from COVID-19 include older adults and people of any age with certain underlying medical conditions if they are not fully vaccinated. Workers who have an underlying medical condition or are taking medication that weakens their immune system may NOT be fully protected even if fully vaccinated and may need to continue using additional prevention measures. For additional information, see CDC guidance.

### 3. Resources

- NCDHHS: [North Carolina COVID-19](#)
- NCDHHS: StrongSchoolsNC Public Health Toolkit (K-12) Frequently Asked Questions ([English](#) / [Spanish](#))
- CDC: [Considerations for Schools](#)
- CDC: [Cleaning and Disinfecting Your Facility](#)
- CDC: [Reopening Guidance](#)
- CDC: [Coping with Stress](#)
- EPA: [Disinfectants for Use Against SARS-CoV-2](#)
- FDA: [Food Safety and the Coronavirus Disease 2019 \(COVID-19\)](#)
- HHS/OSHA: [Guidance on Preparing Workplaces for COVID-19](#)
- DHS: [Guidance on the Essential Critical Infrastructure Workforce](#)

## Attachment 1—Glossary of References and Supporting Information

### **References**

- [StrongSchoolsNC Public Health Toolkit \(K-12\)](#) updated 05 Nov 2020.
- [StrongSchoolsNC Infection Control and PPE Guidance \(K-12\)](#) updated 05 Nov 2020.
- [Reference Guide for Suspected, Presumptive, or Confirmed Cases of COVID-19 \(K-12\)](#) updated 05 Nov 2020.

### **Abbreviations and Acronyms**

**ALA-** Ascend Leadership Academy

**CDC-** Center for Disease Control

**DHHS-** North Carolina Dept of Health and Human Services

**EPA-** Environmental Protection Agency

**FDA-** Food and Drug Administration

**OSHA-** Occupational Safety and Health Administration

**OPR-** Office of Professional Responsibility

**PPE-** Personal Protective Equipment

### **Terms**

**Asymptomatic-** Not showing any symptoms (signs of disease or illness). Some people without any symptoms still have and can spread the coronavirus. They're asymptomatic, but contagious.

**Cleaning-** refers to the removal of dirt and impurities, including germs, from surfaces. Cleaning alone does not kill germs. But by removing the germs, it decreases their number and therefore any risk of spreading infection. [CDC reference](#).

**Close Contact-** Someone who was within 6 feet of an infected person for a cumulative total of 15 minutes or more over a 24-hour period starting from 2 days before symptoms began (or, for asymptomatic individuals, 2 days prior to test specimen collection date) until the time the individual is isolated. NOTE that CDC in its guidance update dated 7/9/21 stated an exception for K-12 students when exposure was 3 to 6 feet of an infected student, where both students were engaged in consistent and correct use of well-fitting masks, and other prevention strategies were in place in the K-12 school setting.

**Disinfecting**- works by using chemicals, for example EPA-registered disinfectants, to kill germs on surfaces. This process does not necessarily clean dirty surfaces or remove germs. But killing germs remaining on a surface after cleaning further reduces any risk of spreading infection. [CDC reference.](#)

**Exposure**- Being within 6 feet of someone diagnosed with COVID-19 for a cumulative total of 15 minutes or more, over a 24-hour period.

## Attachment 2—Bus Transportation Procedures

A parent/guardian **must be** present with each student at the bus stop. Parent/guardian is to remain at stop until bus departs. Additionally, parent/guardian should be present at student's designated spot at time of arrival. Symptom Checks is **NOT** required prior to bus entry.

### **School Bus Pick-up:**

1. The student will board to the last open seat toward the rear of the bus.
2. Expectation is that each student will sit facing forward and in his/her seated row for the duration of the ride.
3. **Cloth masks must be worn at all times while on bus.**

### **School Bus Arrival:**

1. The bus driver will direct each student to disembark when safe to leave the bus.

### **If a student fails at-home screening:**

1. Students will not be allowed to ride bus to school.
2. Bus driver will notify school administration (via phone call or text) of each student(s) who does not clear screenings.
3. ALA staff will attempt follow-up communication with students and parents/guardians.

## Attachment 3—Car Line Arrival/Dismissal Procedures

Symptom Checks are **NOT** required prior to exiting their car upon arrival to ALA's campus.

Staff will monitor arrival/dismissal to discourage congregating and ensure students report directly to class for arrival or their car for dismissal.

### **Car Line Drop Arrival:**

1. Cars will be directed to line up in the far lane.
2. Students will utilize hand sanitizer (provided at main entrance) prior to entering the building.

### **Car Line Dismissal:**

1. Students will remain in class until called upon.
2. ALA staff will call names incrementally to minimize the number of students waiting together.
3. Front of building is the only designated pick-up location.
4. All vehicles must have student tag visible on dashboard.

## Attachment 4—Staff Classroom/Office Responsibilities

Every ALA staff member will be tasked to help implement health protocols to ensure the safety of all students and staff. ALA staff will be expected to help monitor and ensure adherence to all protocols in this guidance to include social distancing. If there are any concerns or issues that arise, please contact ALA admin immediately.

***Though not all inclusive, the following procedures should be completed each school day.***

**Classroom/Office Inventory-** Staff will ensure the following items are available prior to the start of each school day:

- Hand Sanitizer (with at least 60% alcohol)
- Cleaning Products as supplied by ALA admin. Products will be EPA registered disinfectants effective against coronavirus.
- Tissues
- Gloves
- Extra face cloths for teacher (ALA admin will have extra face cloths for students if needed)

**Beginning of School** - Upon arrival and before students enter classroom:

- Complete Classroom inventory as stated above. If supplies/items are needed, please contact ALA admin.
- Clean and disinfect high-touch areas (e.g., door handles, light switches, desks, tables, chairs, and carts). Use provided cleaners and gloves for protection.

**Classroom Transition:** To be completed during students/teacher transition between class periods.

- Complete Classroom inventory as stated above. If supplies/items are needed, please contact ALA admin.
- Clean and disinfect high-touch areas (e.g., door handles, light switches, desks, tables, chairs, and carts). Use provided cleaners and gloves for protection.
- Limit use of classroom/office materials and disinfect (if applicable) between uses or provide adequate supplies to assign for individual use.

**End of School** - Prior to leaving and after student dismissal:

- Clean and disinfect high-touch areas (e.g., door handles, light switches, desks, tables, chairs, and carts). Use provided cleaners and gloves for protection.
- Ensure all large debris/garbage from classroom floors are picked up and disposed of in proper receptacles.
- Complete Classroom inventory as stated above. If supplies/items are needed, please contact ALA admin.