

Alief ISD Health and Safety Plan

Updated 9.9.20

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Providing a Healthy, Safe and Ready-to-Learn Environment for AISD students and staff is Alief's top priority as we reopen schools for our community. While we will only reopen for in-person

learning when it is safe and practicable, we are creating detailed policies and procedures now to be prepared for when the time comes. Preserving the health and safety of students and staff is fundamental to every one of these policy and procedure decisions.

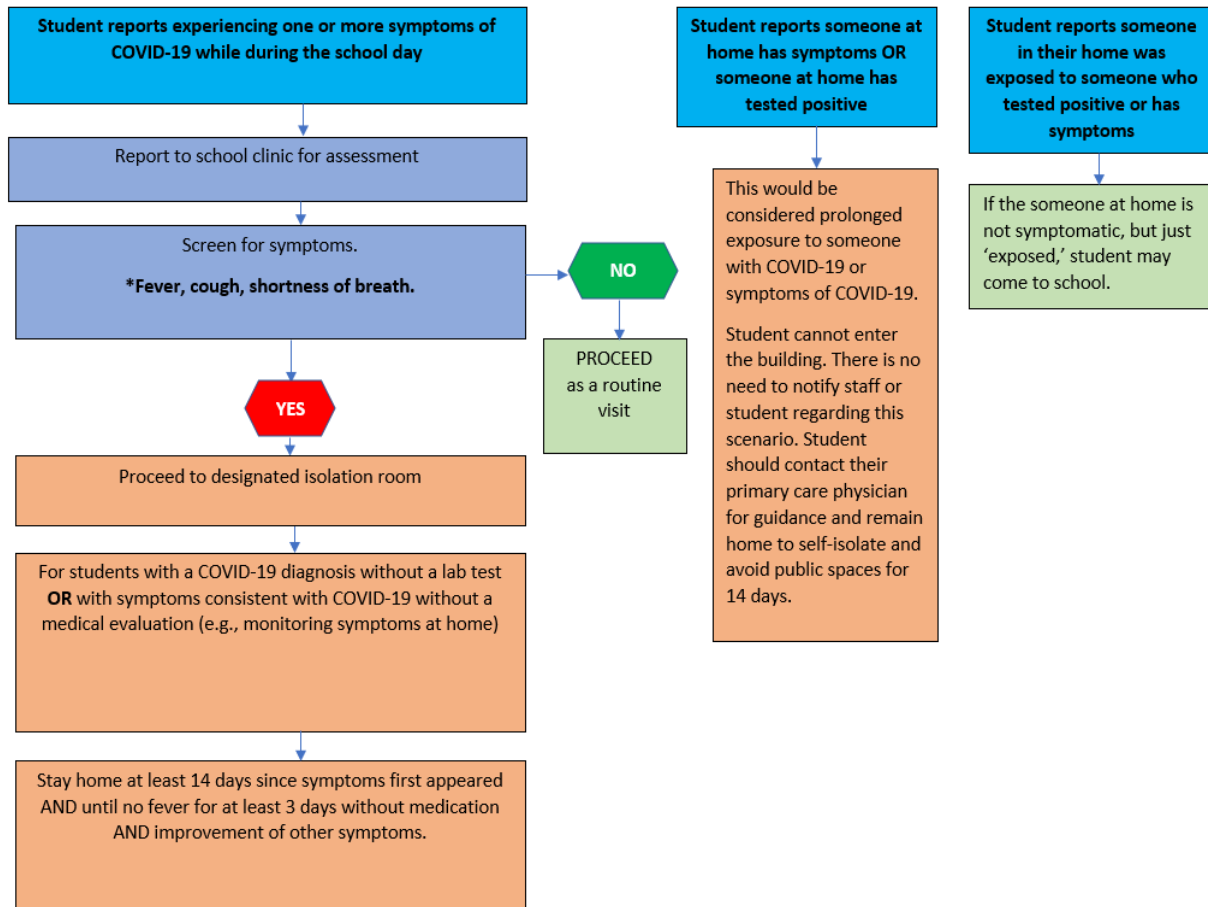
Parents, students, and staff will have questions concerning reopening, such as: what will school look like in a COVID-19 world? How has a day in the life of an Alief student changed since last year? What is expected of teachers and parents this fall? We know that COVID-19 is a contagious virus; however, current science provides evidence that the spread can be reduced when schools follow strict safety measures and have detailed plans to respond to outbreaks. Our safety plan focuses on communicating clear expectations, implementing preventative measures, responding quickly and consistently to cases. Our safety plan and protocols are in compliance with recommendations provided by the Center for Disease Control and Prevention, the Texas Education Agency, and local health authorities.

Containment Practices

Identifying and Isolating Possible COVID-19 Cases on Campus

- Schools must immediately separate any student who shows COVID-19 symptoms while at school until the student can be picked up by a parent or guardian.
- Schools will utilize a separate site or room as an “isolation area” for students who are suspected to have COVID-19
 - The isolation area will be determined by the principal, in consultation with the school nurse and the district Health Services Coordinator, and will be identified before in-person instruction resumes
 - For additional detail regarding the “isolation area”, see [Appendix](#)
- Students who exhibit COVID-19 symptoms are to remain in this isolated area until a parent/guardian can pick up the student.
- Schools will close-off and clean the areas used by the individual who shows COVID-19 symptoms while at school (student, teacher, or staff).
- Students who report feeling feverish will be assessed by the nurse to determine if they are symptomatic for COVID-19
- Schools will designate a separate space to accommodate low-risk nurse visits, such as administering medicines, feminine needs, breathing treatments, and tending to cuts/scrapes
- See flowchart below for additional information on the procedure for students who: 1) have COVID-19 symptoms or have been exposed to COVID-19, AND 2) are not lab-confirmed for COVID-19

COVID-19 Flowchart for Students



Contact Tracing and Case Reporting (response to confirmed case)

When a school learns that a student or staff member has a lab-confirmed case of COVID-19, the school will do the following:

- The confirmed case will be directed to stay home and self-isolate for 14 days
- Close contacts of the confirmed case will be directed to stay home and quarantine for 14 days
- Contact tracing within the school will be conducted by the school’s COVID Response Team (see below)
- Alief ISD’s expectation is that Harris County Public Health will trace contacts outside of the school
- The school will close off and disinfect areas that were used by the confirmed case
- The school will notify the local health department (in accordance with applicable privacy laws including confidentiality requirements of ADA and FERPA Act)

- The school will notify all school staff and families (in accordance with applicable privacy laws including confidentiality requirements of ADA and FERPA Act)
- If there is a high incidence of confirmed COVID cases at a single school, that school may be closed temporarily, based on guidance from the health department and/or the Superintendent's discretion
- For additional detail regarding Case Response see the [Appendix](#)
- For additional detail regarding AISD's response when a school staff member is exposed or diagnosed with COVID-19, see the Staff Response section in the [Appendix](#)

COVID Response Team

- Each campus will have a COVID Response Team that consists of one of each of the following roles:
 - Administrator; Head Custodian; Counselor; Nurse; Attendance Clerk
- Larger campuses may assign multiple people in each role (i.e. two administrators, two counselors, etc).
- Each person on the COVID Response Team will be required to attend [contact tracing training through John Hopkins University](#)

COVID-19 student absence policy

- On-Campus Student Absences: If an on-campus student is absent for a reason that is acceptable to the administrator, the student can still earn the daily attendance credit by fulfilling the remote attendance requirement. A staff member will need to call the student about working in Schoology to be counted present remotely.
- If a student is unable to attend school (including remote learning) because the student is experiencing symptoms of COVID-19 or because the student has been diagnosed with COVID-19, the absence is to be recorded as an excused absence. As with any medically excused absence, the student will be required to provide documentation

Cohorting

- Whenever possible, students, teachers, and staff should maintain consistent groupings of people to minimize virus spread in the school. Specifically:
 - Elementary school students should be taught in self-contained classes as often as possible; and
 - Secondary students should be taught in self-contained classes as often as possible. When that is not possible, students should be exposed to as few teachers as possible and should mix student groups as infrequently as possible.
- The rationale for this limitation is that each additional individual exposure presents greater opportunity for virus spread. If, for example, three classes are taught by a single

science teacher, and a student in one of those classes contracts COVID-19, all three classes are considered a single class group for purposes of potential exposure, because they all had extended exposure to an individual who could have spread the virus. All of these students would need to follow protocols listed above (Contact Tracing and Case Reporting).

- Whenever possible and developmentally appropriate, there should be no group or pair work that would require students to regularly interact within six feet, recognizing that this is not always possible for early childhood students and some students with disabilities.
- When students must be taught by multiple teachers, it is better for students not to be brought together with those in other classes for shared instruction or mixed with other classes during elective or other periods or between classes.
 - Rather than having students change from classroom to classroom, consider having teachers rotate between classes while students stay in one class to minimize students encountering others in the hallway.
 - Alternatively, schools could stagger class start and end times to minimize the number of students in the hallway during passing periods.
- Students must not be brought together in assemblies, field trips, or other group gatherings outside of their class group, unless a distance of 12 feet between groups can be maintained.

Mitigation Practices

Screening

Employees

- All teachers and staff must self-screen for COVID-19 symptoms before coming to campus each day
- The self-screening will include teachers and staff taking their own temperature.
- Teachers and staff will report if they have COVID-19 symptoms or have a lab-confirmed case of COVID-19, via Qualtrics
- If they have COVID-19 symptoms or have a lab-confirmed case of COVID-19, they must remain off campus until they meet the criteria for re-entry as noted below.
- Additionally, they must report if they have had close contact with an individual with a lab-confirmed case of COVID-19.

Visitors

- Before entering a campus, all visitors must self-screen and complete [this form](#) (also accessible via QR code)

Students

- Parents are responsible for conducting self-screenings and temperature checks of their children before boarding the school bus or entering campus. Parents must ensure they do not send their child to school if their child has COVID-19 symptoms or has a lab-confirmed case of COVID-19. While students are waiting to receive confirmation from a lab test, they may still be marked “present” for school if they participate in instruction remotely through Schoology.
- If a student becomes ill while on campus or in a classroom, staff members will refer the student to the nurse’s office and/or isolation area to be evaluated. School nurses will check students’ temperatures and determine next steps.

Face Masks

- To mitigate the spread of COVID-19, masks will be worn by all medically and developmentally able staff, students, and visitors.
- All staff will receive a 3-ply disposable mask provided by the District.
- Students must put on a mask prior to boarding the school bus. They must continue to wear masks on campus at all times. Masks must be worn over the mouth and nose.
- If a student forgets to bring their mask on a given day, the district will provide a disposable mask. Repeated occurrences will result in conferences with administration and, if necessary, a change from in-person to remote learning.
- Campuses may provide short, defined breaks for students to remove masks if students are outdoors and adhering to social distancing requirements.
- Very young children who struggle to tolerate a mask will be encouraged to build mask stamina each day. Students who are physically unable to remove their own masks will not be required to wear a mask.
- Students, staff, and visitors may also choose to wear a face shield *in addition to* a mask; however a face shield is not a replacement for a mask.
- View the [Tips for Wearing a Mask](#) video from Johns Hopkins Medicine for details.
- For more information regarding masks, see [Appendix](#).

Cleaning

- Custodial services will conduct more frequent cleanings and provide cleaning supplies for teachers to clean high-touch surfaces in their classrooms during the day. Custodial services will use supplies that are [EPA approved](#) for use against SARS-CoV-2
- Custodial staff schedules will be arranged for additional cleaning and disinfecting of common space high-touch areas such as door handles, stair handrails, tables, desks, computers, and laptops.

- Classrooms will be provided cleaning supplies so that teachers and other school staff can disinfect high-touch areas (e.g. door knobs and desks) during breaks throughout the day.
 - Custodial staff will be trained to ensure safe and appropriate use of cleaning supplies
 - Custodial staff will use personal protective equipment (PPE) as needed
- Custodial staff will disinfect restrooms and other common-use spaces more frequently throughout the day.
- Custodial staff will conduct routine cleaning/sanitizing at the end of every school day.
- The maintenance department will continue to maintain air filters and change out as needed to ensure better air quality. Additionally, maintenance will work to ensure fresh air supply units are working properly.
- Barrier shields will be installed at receptionist and high-traffic office areas across all campuses and support buildings. Additional barrier shields will be provided in specific work spaces to maintain social distancing requirements.
- As a general rule, water fountains will be non-operational. A few pre-determined water fountains, near cafeterias, will be available for students to refill their own water bottles. Use of these water fountains must be supervised by staff.

Shared objects and playgrounds

- Teachers will make adjustments to ensure that students are not sharing school supplies or instructional materials.
- Teachers will lead recess/wellness activities while practicing social distancing. Playground equipment will not be utilized during recess, wellness activities, or mental breaks.
- Campus principals at elementary/intermediate campuses will create rotating schedules for mental wellness breaks throughout the day.
- Campuses will ask parents to provide labeled water bottles that will be kept on students' desks. Water fountains will be non-operational.

Visitors

- Alief ISD will restrict visits to schools and buildings to those deemed essential to school operations.
- Visitors, when allowed in buildings, will be required to follow the prevention and mitigation requirements of the school.

Physical distancing and protocols to prevent congregating

Physical Distancing

- Schools must place student desks a minimum of six feet apart whenever and wherever possible. Desks must be placed facing the same direction.
- If tables are used, seats will be placed a minimum of six feet apart and students will sit on the same side of the table, facing the same direction.
- Campus leaders will utilize a variety of spaces on campus to support social distancing requirements.
- Schools will promote more frequent hand washing and/or sanitizing when social distancing recommendations are not possible.
- Schools will use non-classroom spaces when feasible and appropriate to comply with social distancing recommendations.
- Handwashing stations, lavatories, and urinals less than six feet apart will be marked off with tape (to take out of operation to ensure social distancing).
- Schools must cancel or postpone special events such as carnivals, holiday functions, and any other special performance type.

Meals

- Elementary students' meals should be eaten in the classroom.
- Secondary students who must line up for food pick-up will follow CDC guidelines by floor markings that outline a 6-foot distance between any two students.
- Secondary students eating meals in the cafeteria or designated areas must sit 6 feet apart. Cafeteria tables/chairs must be marked to establish 6 feet of spacing.
 - Barriers between tables/chairs may be used to assist in maintaining the 6 feet of spacing.
 - Staff will monitor students in cafeteria/eating areas to ensure that students are not mingling and maintain a 6-foot distance between any two students.
 - To support social distancing, students should have an assigned seat for meals whenever feasible
 - Campus leaders will create meal schedules that support social distancing.
- Cafeteria service will provide "Grab and go" meals while also maintaining adherence to nutrition reimbursement requirements
- Off-campus lunch privileges will be suspended until further notice

Buses and Student Transportation

- Students are required to wear masks at all times on the school bus.
- Hand sanitizer will be provided for students and staff who use school buses
- Students and staff are required to use hand sanitizer when entering and exiting the bus
- Whenever possible, students should sit one student per bench to enable social distancing. If this is impossible given the number of students on a route, students should be seated as far apart as possible. Siblings may sit together during transport.
- If weather permits, bus drivers will open windows to allow outside air to circulate.
- The district will encourage families to use alternate modes of transportation (individual drop off and pick up, carpooling, walking, etc.) to reduce bus ridership and the possibility of COVID-19 exposure on buses.
- Bus drivers will receive cleaning supplies to thoroughly clean and disinfect high-touch surfaces such as bus seats, knobs, door handles, steering wheels, and the driver's area after each run.
- Bus drivers will clean and disinfect the bus at the end of the school day.

Transition and Movement in High Risk Areas

- Schools will teach and reinforce the use of masks, especially when distancing is difficult (such as in hallways, arrivals, dismissal, etc.).
- Schools will receive adequate supplies to support healthy hygiene in transition areas, such as hand sanitizer. Contactless sanitizer stations will be used where available.
- Signs and messaging will be posted in highly visible locations, entrances/exits, and restrooms to ensure social distancing.
- Schools will install physical barriers, such as sneeze guards and partitions, when distancing is not feasible.
- Schools will use visual aids to illustrate appropriate spacing and traffic flow throughout the school building.
- Schools will designate hallways or entrances as one-way and post directional reminders on the walls and/or floors.
- When possible, schools will divide entry points rather than funneling all students through the same entry space.
- Schools will reconfigure common areas such as the library, cafeteria, KIVA, foyer, gyms, and other areas previously used by larger groups by spacing out furniture to minimize crowding.
- Schools will consider closing off common seating areas if social distancing is being routinely compromised and/or if students are congregating with others outside of their class/cohort.

- Schools will minimize having multiple groups in common areas and high-traffic areas at once.

Arrivals

- Schools will designate separate entry points for different groups of students in order to spread out arrivals (e.g. day care, car riders, bus riders, walkers). Entry points will be staffed with appropriate numbers of adults to communicate expectations and ensure social distancing
- Parents will not be allowed to enter the campus for morning drop-off or afternoon pick-up
- Schools will schedule/station staff to support distancing upon entry and immediate transition to classrooms. Schools will stagger arrival times of staff to assist in early morning duty.

Dismissal

- Schools will designate exit points for students and implement contactless exit and delivery to cars. When that is not possible, schools will provide gloves to staff.
- Schools will station staff members to support social distancing and monitoring of students' exit.
- Schools will utilize the public announcement system and/or video delivery system to communicate dismissal expectations and to call for students' exit to day care, cars, and buses (staggered dismissals).
- Staff hours may need to be adjusted to accommodate dismissal start time.

Hallways

- Traffic in hallways will flow in one direction where permitted.
- Hall/restroom monitors will help ensure distancing and bathroom capacity.

Staff gathering areas

- Campuses will minimize the number of staff members in lounge areas and staff work rooms to enable social distancing.

Registration

- All parents will be asked to enroll online instead of in-person
- Parents will be contacted via phone or email for any clarifications and notification of completion.
- Parents unable to register online or upload documents should call the campus for assistance. Exceptions will be handled on a case-by-case basis.

Extracurricular activities

- Schools may continue to offer extracurricular activities at their discretion and consistent with the guidance in this document, for non-UIL extracurricular activities and with the guidance found on the UIL website for all UIL activities.
- Under Alief ISD guidelines, UIL, after-school activities, and field trips will be suspended while the district provides 100% Alief Learns at Home instruction.
- Operation of the facilities should be done consistent with the governor's executive orders when UIL events and district events are allowed.
- Specific UIL safety protocols are defined in the Return to Play Athletic and Fine Arts Guidelines.

Hygiene

- Schools will provide hand sanitizer in every classroom and office area. Sanitizer stations will be placed in high-traffic areas such as school entrances, gymnasiums, and cafeterias.
- Students, staff and visitors will be encouraged to sanitize and wash hands frequently.
- Schools will provide signage throughout the building promoting proper handwashing techniques, social distancing practices, and mask requirements.
- Schools will teach students and staff general hygiene practices on the first day of in-person instruction regarding the following: proper handwashing techniques, how to cover coughs and sneezes appropriately, how to properly wear a mask, and other prevention and mitigation strategies that are part of the district's health and safety protocol.

Innovative use of space

- Multiple groups can meet in a larger space such as a gym or cafeteria, so long as the school applies all four of the following factors:
 - Each individual (teacher, staff, or student) must have a minimum of 45 square feet of space.
 - Students must be separated into distinct groups that cannot exceed 22 individuals, including students, teachers and staff.
 - Student desks (or seats at a table if tables are used) must be placed a minimum of six feet apart. It is recommended that students face the same direction rather than facing each other.
 - Each class group must be separated from other groups by at least 12 feet.
- See Appendix for [examples related to large room occupancy](#).

- When feasible and appropriate, it is preferable for students to gather outside rather than inside, because of likely reduced risk of virus spread outdoors. If students gather outside, they should maintain the maximum group size of 22 noted above and maintain 12 feet between groups.

Communication with Employees, Students, and Families

Efficient, ongoing communication and consultation with parents and the school community is critical to maintaining the trusting relationships that are vital to a healthy, productive learning environment. As a District, it is our duty to reassure parents of the safety in our schools and to coordinate among various stakeholders.

The system and process for alerting parents or employees of new COVID-19 cases will follow standard District notification processes, including:

- Email, Letter, Text Messages and/or Phone Calls regarding situations related to safety on campuses or sites.
- Campus-based team members will make phone calls to students, families, and staff to share possible exposure information and complete contact tracing protocols.
- Contact tracing will be conducted by the Campus COVID-19 Team comprised of the nurse, campus administrator, counseling staff, head custodian, and attendance related staff.
- Everyone who has been in contact with an impacted individual will be alerted to ensure overall safety and wellbeing. Through the tracing process, it will be determined whether it is necessary for specific team members and students to be out of the school or work environment.

In the event of a COVID positive case, there is a 14 day quarantine period that will be implemented as deemed necessary. If a specific impacted area of the campus can be clearly identified, this area could be closed and sanitized, while face-to-face instruction may continue in other areas. The decision to close entire areas will be handled on a case-by-case basis after contact tracing is complete.

Coordination with Harris County Public Health

- The following individuals will be the points of contact for Harris County Public Health:
 - General liaison: Hilda Rodriguez, Assistant Superintendent of Support Services
 - Liaison for student case reporting and contact tracing: Dr. Jackie Armwood, Director of Student Services

- Liaison for employee case reporting and contact tracing: Katina Gordon, Director of Risk Management
- Alief ISD will provide information on confirmed positive cases to Harris County Public Health to enable HCPH's support in contact tracing
- If a significant number of confirmed cases occurs at a school, Alief ISD will contact HCPH for advice on modified operations or the potential need for a temporary closure of the school

Additional Protocols and Guidelines

Student Social-Emotional Support

As we all attempt to do what is best for our students, we do so with safety as a paramount consideration. Maslow's Hierarchy of Needs reminds us that at the foundation of any hope of progress, best practices dictate safety be addressed and established if at all possible. With this pandemic not yet in our rear view, we know the importance of social-emotional and mental health considerations. The Counseling Department, with collaboration with our P.A.S.S. and LSSPs, are available to support each campus as we help incorporate social-emotional learning and mental health support for Alief students.

Counseling Training:

Via robust and research-based professional development, all Alief ISD Professional School Counselors are required to participate in training to address the possible SEL (Social-Emotional Learning)/Mental Health impacts of this pandemic and how they may affect children. This will include topics concerning:

- Anxiety
- ACES (Adverse Childhood Experiences)
- Trauma (Individualized and Shared)
- Grief Loss/Survivors' Guilt
- Compassion Fatigue
- Trust Issues
- Empathy
- Resiliency

Counseling Staff are being trained in the ASERT Crisis Re-entry Model. The ASERT Model highlights 4 consistent components:

A: Acknowledge- We are all experiencing this pandemic and its effects together. It serves no one to pretend that this is not the case. On the contrary, not acknowledging this life changing experience can risk diminishing the reality that many may need to process in order to progress in a healthy manner.

S: Support- It is not merely enough to acknowledge trauma and significant change but to also provide relevant and specialized support when available and appropriate.

E: Engage/Evaluate with Empathy- Adults know how they feel. Students know how they feel. The work is to engage in dialogue in a safe manner to validate feelings and refer for additional support if needed/appropriate. Staff can reflect on their trauma-informed training via the KOGNITO platform and evaluate for understanding and effectiveness. The evaluation component is ongoing and cyclical and empathy is at the foundation of these efforts.

RT: Resiliency Training- To minimize any trauma and significant change, individuals and groups must be taught the power of resiliency, what it is, and how to recognize and practice it within themselves. Resiliency training goes hand-in-hand with SEL and character training and is significant to providing students with an emotionally safe environment in which they can learn and co-exist positively with others.

Campus Implementation

Each campus, prior to students returning, will have the opportunity to support their staff as they prepare to engage with students and families. This can be facilitated by campus counselors or other appropriate principals' designee(s). This will include some prescriptive "talking points" that all campuses will share with students to help ensure consistency, accuracy, transparency, and overall effectiveness.

Student Daily Support in the Classroom (In-Person and Virtual):

Teachers must be intentional about building relationships immediately and consistently as they engage with their students. Daily practices such as using students' names and posting their names in their classrooms, doing a quick five-minute SEL lesson or check in, and creating a "Brain Break" area in the classroom for students when they need to take a moment to regroup will all work to help build a sense of belonging and decrease anxiety. SEL lessons can be readily available in the "Brain Break" areas for students to access. Teachers will focus on building resilience in students with restorative practices and integrating SEL within the daily classroom environment. Teachers will utilize the prescriptive talking points that will be shared with them from the Counseling Department.

Regular Emotional/Mental Health Check-In

Campus counselors, our Mental Health Facilitator, our Mental Health Liaison, and other related campus-level support personnel (CIS, Campus Nurse, etc.) are intentional in checking on the mental health and emotional status of students via individual and group support and resources. This can be via face-to face and/or virtual modalities. QR codes can be utilized for easy student access.

Counseling Support Integration

All Alief ISD Counseling staff will be trained using the ASERT Model and will collaborate with our Alief LSSP's, P.A.S.S. team members, Health Services, and Counseling Partners (CIS, CYS) to ensure wraparound services as we support campuses with social-emotional learning and mental health. Additional partners/resources include: Mental Health America of Greater Houston, The Harris Center for Mental health and IDD, Mental Health First Aid, Texas Counseling Association, Center for School Behavioral Health, Kognito, and Depelchin.

Social-Emotional Support: Staff

Alief ISD values and appreciates its dedicated staff. We realize that as we focus on social-emotional support for our district, we must include the adults that help lead and educate our students every day. For staff support, especially considering remote learning and teaching requirements, we have created a Virtual Alief ISD Mindfulness Room that staff may access for social-emotional resources, support, and overall researched-based mindfulness care. Via our Risk Management Department, we also have a dynamic Employee Assistance Program (EAP) available at no cost for employees and their dependents. This program provides confidential counseling and referral services and unlimited telephonic support.

Appendix

COVID -19 Symptoms

Any the following symptoms indicate a possible COVID-19 infection. This list is up-to-date per TEA as of 9/2/20. To check for further updates, refer to the latest Public Health Guidance document on [this page](#)

- Feeling feverish or a measured temperature greater than or equal to 100.0 degrees Fahrenheit
- Loss of taste or smell
- Cough
- Difficulty breathing
- Shortness of breath
- Fatigue
- Headache
- Chills
- Sore throat
- Congestion or runny nose
- Shaking or exaggerated shivering
- Significant muscle pain or ache
- Diarrhea
- Nausea or vomiting

Examples of occupancy and spacing for large rooms

- A 3,000 square foot cafeteria might serve two groups of 22 with 12 feet between student groups, so long as the room configuration allowed for desks to be placed six feet apart. One teacher might serve both of these groups or the groups may have separate teachers. (The exact number of groups and number of individuals total served in a 3,000 square foot space is determined by the layout of the space.)
- A 7,800 square foot gymnasium might serve three groups of 22 with 12 feet between student groups, so long as the room configuration allowed for desks to be placed six feet apart. One teacher might serve both of these groups, or they may have separate teachers. (The exact number of groups and number of individuals total served in a 7,800 square foot space is determined by the layout of the space.)

Additional Information Regarding Masks

Recent studies show that a significant portion of individuals with COVID-19 lack symptoms (are “asymptomatic”) and that even those who eventually develop symptoms (are “pre-symptomatic”) can transmit the virus to others before showing symptoms. Because of this, the CDC and other public health authorities recommend that people wear masks in public settings when around people outside of their household, especially when other social distancing measures are difficult to maintain. Wearing a mask to prevent the wearer’s respiratory droplets from reaching individuals around them is known as **source control**. Source control can be achieved by wearing a surgical mask or non-surgical (cloth) mask.

While these types of masks are primarily intended for source control, they may also offer a limited amount of droplet protection to the user. Surgical masks are specifically designed to be fluid resistant, which will provide a higher level of droplet protection to the user. Source control can also be achieved by wearing a non-surgical (cloth) mask.

All staff and students will be required to wear a facial mask when in-person learning resumes. Each staff member and student will receive a disposable surgical mask provided by the District. Students will also be encouraged to bring their own facial mask from home.



When wearing a facial mask, it is important that the type of mask worn is donned correctly. An improperly worn mask may not provide adequate protection against the COVID-19 virus. Below are some tips on properly wearing a facial mask.

Before donning a mask, wash hands with soap and lukewarm water for at least 20 seconds. If soap and water are not available, use hand sanitizer with 60% alcohol concentration.

To prevent contamination, do not touch the outside of your mask.

All masks should completely cover the mouth and nose region.

If using a surgical mask, contour to the bridge of your nose and extend the bottom to cover your chin for maximum protection.

Masks should not be worn below the chin, over the forehead, or hanging off an ear.

If wearing a cloth face mask, ensure that it is washed daily and prior to coming to campus.

Below is a link to a video demonstrating the proper way to wear a mask.

<https://www.youtube.com/watch?v=Mn6axdkbGd4>

While any mask is better than none, not all masks provide the same level of protection. The CDC does not recommend the following types of masks.

Masks with exhalation valves/vents. These types of mask provide comfort and protection for the wearer, however, infectious respiratory droplets can still escape through the valve and infect others.



Face shields without a mask. Face shields can be worn *in conjunction* with a mask, however, they are not to be worn in lieu of a mask. Face shields are primarily for eye protection, and it is unknown as to whether they can provide protection from respiratory droplets.

Recent studies have concluded that certain other masks may not provide adequate protection against the virus. Alief ISD will follow all CDC recommendations and update this document, as needed.

Responding to Confirmed Cases of COVID-19

Each time a confirmed case of COVID-19 occurs on campus¹ (among students or staff), the school will do the following:

1. Direct the confirmed case to stay home and self-isolate for 14 days. If the case is a student, they will move to remote learning²
2. Direct all close contacts to stay home and quarantine for 14 days. If the close contact is a student, they will move to remote learning. If the close contact is a teacher, they will move to remote teaching.
 - a. At the **elementary and intermediate** levels, or in other settings where a group of students is cohorted for the **majority of the day**, students and teachers in the same class (or cohort) as the positive case are considered to be close contacts.
 - i. Other individuals who spent 15+ minutes within 6 feet of the confirmed case will also be considered close contacts.
 - b. At the **middle and high school** levels, close contact will be defined as: students or staff who spent 15+ minutes within 6 feet of the confirmed case. Some -- but not all -- classmates and teachers might be considered close contacts.
3. Close off areas that were heavily used by the confirmed case in the past 72 hours until the non-porous surfaces in those areas can be disinfected³
 - a. After 24 hours, clean and disinfect the areas used by the confirmed case⁴
4. Notify district administrators. District administrators will notify the local health department (Harris County Public Health).
5. Notify families and staff via letter.
6. Begin contact tracing. Contact tracing within the school will be conducted by the school's COVID Response Team. Alief ISD's expectation is that Harris County Public Health will trace contacts outside of the school.

If the number of confirmed, active COVID cases⁵ at a school reaches 3% of the on-campus population, the school will also take the following steps:

7. Close the school to on-campus learning for 24-72 hours so that:
 - a. The district can confer with the local health department (Harris County Public Health)
 - b. Contact tracing can be completed for the school's confirmed cases
8. If the health department directs the school to close, the school will close to on-campus instruction for a period of time defined by the health department. Students will move to remote learning.
9. If the district is unable to attain guidance from the health department, the school may be closed to on-campus learning for up to 5 days, at the discretion of the Superintendent

¹ Per [TEA](#), "on campus includes the bus and any school facilities"

² If the student is too ill to attend school remotely, this will be an excused absence. If the teacher is too ill to teach remotely, this will follow the absence/leave policy laid out by the district and the FFCRA

³ If 7+ calendar days have passed since that person was on campus, it is not necessary to close these areas.

⁴ Wait 24 hours before cleaning or disinfecting areas used by the confirmed case. If 24 hours is not feasible, wait as long as possible, per CDC [guidance](#)

⁵ Students and staff collectively

Staff exposed or diagnosed with COVID-19: Response

The following checklist is used to guide Risk Management's response when notified that an employee has been exposed to or diagnosed with COVID-19.

- Instruct all employees to immediately contact Risk Management (RM) by phone or email if exposed or diagnosed with COVID-19.
- Direct supervisors to immediately notify Risk Management if an employee reports a diagnosis of or exposure to COVID-19.
- Provide employee the following information:
 - Available leave benefits including FFCRA, emergency paid sick leave (EPSL), expanded family and medical leave (EFML), and state/local personal and sick leave
 - Risk Management's responsibility for notifying individuals identified as at-risk for potential exposure
 - Process for updating personal contact information and emergency contact information
 - Requirement to provide fitness for duty before returning to work
- Inform the superintendent and other relevant district leaders of the situation. Maintain the employee's confidentiality whenever possible and remind others of the need to keep personal and medical information confidential.
- Work with the supervisor and employee to determine the last date the employee was physically present in any district facility.
- Work with facilities staff to sanitize all areas where the employee spent time within 72 hours from being exposed.
- Determine the date and time the employee was in physical proximity (six feet or less) of any employees, students, or the community.
- Identify dates and names of individuals (e.g., employees, students, parents, community members) the employee may have had contact with or been within six feet or less during the last 14 days.
- Contact employees who were identified as having exposure risk by phone and then by follow up mail or email.
- Contact each supervisor that may have had the employee in their work area within the past 72 hours to determine exposure risk and create a clean-up/disinfectant plan (e.g., principal, athletics, fine arts, technology, custodial, maintenance, food service, transportation).
- Monitor the situation closely and keep the superintendent and other relevant district leaders updated.

Response to Employee Exhibiting Symptoms or Diagnosis of COVID-19 Flowchart

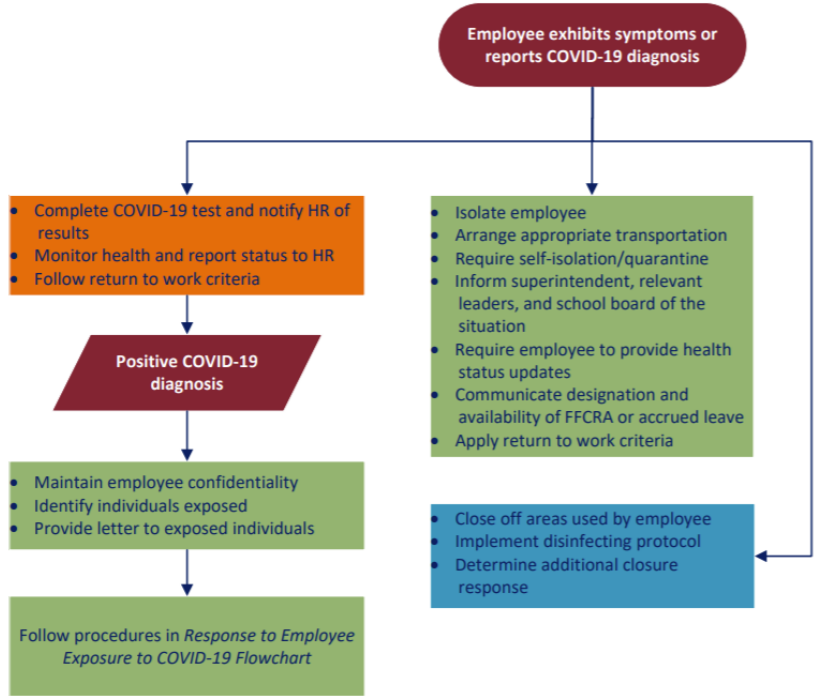
- COVID-19 Symptoms**
- Fever (>100.4)
 - Coughing, shortness of breath or difficulty breathing
 - Congestion or runny nose
 - Chills
 - Muscle or body aches
 - Headache
 - Sore throat
 - New loss of taste or smell
 - Gastrointestinal symptoms (nausea, vomiting, diarrhea)

- Sample Disinfecting Protocol**
- Wait 24 hours to clean and disinfect or as long as possible
 - Ensure safe and correct application of disinfectants
 - Keep disinfectants away from children
 - Provide training on disinfecting procedures

- Exposure Identification Process**
- Determine last date employee was physically present and time the employee was within six feet or less of another individual
 - Keep the identity of the individual confidential to the extent practical
 - Identify names of individuals who may have had contact at that time or within 14 days
 - Confirm all areas that may have been exposed within the past 72 hours

- Sample Return to Work Criteria**
(Employee should work directly with HR)
- Exposed:**
- End of isolation period
- Diagnosed or experiencing symptoms:**
- Fever free without medication for three days;
 - Improved respiratory symptoms for ____ days; and
 - 10 days after onset of symptoms
- To return sooner:**
- Non-COVID-19 diagnosis with doctor's release
 - Two separate negative tests 24 hours apart

Color Key
 Orange = Employee obligations
 Green = Employer obligations
 Blue = Facilities response



School Isolation Room Guidelines

Updated 8/20/2020

Staff or students that present with symptoms of communicable disease while at school will be evaluated by the school nurse in the isolation room designated by the building administrator.

Recommendations for the Isolation Room

Consider the clinic space, an option might be to make the clinic the isolation room and relocate the routine clinic.

Room #1- Persons with no signs or symptoms of COVID-19. Student needs no inhalers or nebulizer treatments. Routine medications and treatments are done here.

Room #2- (Non-Aerosolized Room) Persons exhibit flu-like symptoms/ COVID-19 signs or symptoms. This is a multi-person room with chairs 6 feet apart and partitions between chairs. Everyone is masked. The nurse assesses the student before they enter the room. The nurse will triage these students within 15 minutes of arrival (if feasible). Waiting chairs will have 6 feet between them. Waiting area to be designated. Thirty minute wait time to reuse the space after cleaning

Alternative Room-(Aerosolized Room) Students that need to use an inhaler or nebulizer for treatment if room 2 is occupied.

One hour wait time to reuse the space after cleaning. The room must have a door that closes.

Both rooms must have the following features:

- Chairs spaced 6 feet apart and have partitions between chairs if available. All persons shall be masked.
 - Close proximity to school clinic
 - Well ventilated
 - Running water if possible, or waterless sanitizer station set up
 - Access to a nearby bathroom. Bathroom for Room 2 may not be used by anyone except Room 2 patients
 - A cabinet that locks to contain supplies (touchless thermometer, gloves, gowns, masks, disinfectant, and other necessary equipment, etc.)
 - A phone
 - Two large trash cans with biohazard red bags
 - Designated signage.
-
- Teachers will send students with white passes to Room #1 (see attached pass).

- A pink pass will be used to send ill students to Room # 2 (see attached pass).
- Teachers will look at the checklist to determine which room the student will report to. If the teacher has any questions, he/she must call the school nurse.

The nurse and clinic staff will be familiar with:

- How COVID-19 spreads
- How to identify COVID symptoms
- How to protect themselves
- Environmental cleaning and disinfection procedures
- When to contact Building Administrators, Health Services, and Student Services

Staff/Student Isolation Checklist

- If a staff/student is symptomatic, they will be placed in a controlled isolation room with the door closed. They should have access to a designated isolation bathroom.
- Anyone entering designated rooms must use appropriate Personal Protective Equipment (PPE).
- Parents or guardians of a symptomatic student are to be notified immediately of their child's status and will be asked to pick up the student from campus as soon as possible.
- As a measure to limit exposure and conserve PPE the principal will designate an isolation room to hold unknown and suspected staff/student cases.
 - Staff/students with symptoms of a highly infectious disease should NOT be held in the same room as someone who is showing signs of a respiratory illness such as asthma or COPD without COVID-19 symptoms.
 - Schools should consider removing only gloves and gowns (if used) and performing hand hygiene between visits with people who have the same diagnosis. Extended use of eye protection and facemasks should be considered because the risk of transmission from this type of equipment during extended use is expected to be very low.
 - Care must be taken not to touch eye protection or facemask.
 - Eye protection and/or facemask should be replaced and hand hygiene performed if they become damaged or in contact with bodily fluid when leaving the isolation room.
 - Strict basic infection control practices between staff/students will prevent cross contamination between students. The nurse will practice good hand hygiene and don new gown gloves between students in the isolation room. This includes proper technique for gowning and de-gowning.

- Affected staff/students should wear a face mask to contain secretions while in isolation. If a face mask cannot be tolerated, they should use a tissue to cover their nose and mouth.
- Once staff/student has vacated the isolation room, ventilate well before entering and cleaning.

Health Services will continue to monitor the evolving situation. It is recommended to follow guidelines issued by the Centers for Disease Control and Prevention (CDC), Local Health Department and the Occupational Safety and Health Administration (OSHA).

Protocol for Entering and Exiting the Isolation Room

1. The school nurse will perform hand hygiene.
2. The school nurse will don (apply) appropriate PPE.
3. The school nurse will triage the staff/student. Upon completion of nursing assessment the student will either remain in the isolation area or report to the clinic for routine care.
4. If staff/student remains in isolation room:
 - a. They will be monitored by the school nurse.
 - b. Parent/guardian will be notified immediately.
 - c. When staff or student is picked up, they will be escorted to their vehicle by the school nurse. The school nurse will don new gloves and gown to escort staff/student out of the building.
 - d. If transportation to a hospital via 911 is needed, 911 will be notified that the staff or student is exhibiting possible signs and symptoms of COVID-19.
5. The school nurse will notify the building principal of suspected cases of COVID-19.
 - a. A referral will be sent home with the staff/student to follow-up with medical care.
 - b. Upon returning to school the staff/student will need to meet the current District guidelines and criteria for re-entry into school.
 - c. The school nurse will complete and submit the daily surveillance log to Health Services. All positive COVID-19 will be reported to Student Services for students. Employees will report positive COVID-19 tests to Risk Management.
6. Clean and disinfect the room, surfaces, and equipment in the isolation room.
7. See CDC Guidelines - How to safely remove protective equipment. Poster will be located above trash can. <https://www.cdc.gov/hai/pdfs/ppe/PPE-Sequence.pdf>
8. Perform hand hygiene.

Send student to Room #2 if the student tells you:

- They have been exposed to COVID-19

- Someone in their home has COVID-19
- Complains of fever or chills
- Has a cough
- Complains of shortness of breath or difficulty breathing
- Has fatigue
- Complains of muscle or body aches
- Has a headache
- Has a new loss of taste or smell
- Complains of a sore throat
- Has congestion or runny nose
- Complains of nausea or vomiting
- Has diarrhea
- [CDC symptom guidelines](#)

Send the student to Room #1 for:

- Injuries, i.e., possible broken limb, abrasions, sprains, and strains etc.
- Bloody nose that will not stop with pressure in classroom
- Asthmatic with no COVID-19 symptoms
- Seizures
- A child returning to school with a cast or following hospitalizations
- Administering routine medications
- If a student was in a fight
- Suspected child abuse
- Diabetic
- Asthmatic with no COVID-19 symptoms
- Head Injuries-ALL
- Mild Stomach Ache
- Vomiting or diarrhea
- Eye injuries
- Sprains or strains
- Human/animal bites
- Lice
- Rashes
- Ringworm
- Body fluid contamination

Inappropriate Clinic Visits

The below list can be handled with minor first aid. These situations can be handled in the classroom with the provided first aid kit.

- Hangnails- use a Band-Aid.
- Old insect bites- cool wet cloth, they all swell and itch!
- Scratches and scrapes- wash with large amount of water, Band-Aid
- Scabs- they don't need treatment unless infected
- Loose teeth- they will naturally bleed some until they fall out
- Lost teeth- natural phenomenon, does not need treatment
 - Tooth holders are in your first aid bag, if you run out the student can wrap the tooth in a paper towel and keep it in a pocket
- Nosebleeds that have stopped bleeding

Schools should use the following clinic pass:

CLINIC PASS

NAME _____ DATE _____

CHIEF COMPLAINT:
 Headache Toothache
 Flushed cheeks Earache
 Abdominal pain Scalp
 Nausea Nosebleed
 Vomiting Skin rash
 Inflamed eyes Sore throat

Injury (note source) _____

Other remarks _____

Time left class _____ Teacher _____

Disposition: Return to class _____
 To go home _____
 Rest in clinic _____

Time left clinic _____

Nurse _____

AI SD 45-0190

CLINIC RELEASE PASS

Please send _____
 to the clinic for medication at the following times:

Dates	Time left class & teacher's signature	Time left clinic & nurse's signature

45 - 0444