

updated August 12, 2021

COVID-19 Prevention Plan

St. Joseph Catholic School

2021-2022



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Building Wisdom and Faith Through Service to God

The [State Health Commissioner issued an order](#) requiring all individuals aged two and older to wear masks when indoors at public and private K-12 schools in Virginia, effective Thursday, August 12, 2021.

Under the direction of the SJS school administration, the Office of Catholic Schools and the Chancery of the Arlington Diocese, ***all students, faculty and staff must wear a mask while indoors regardless of vaccination status, and until further notice.***

The SJS Reopen Plan is amended and updated to reflect the current health emergency.



This prevention plan reflects the COVID-19 conditions as they existed July 29, 2021, in Fairfax County. This document is not intended to be the final version, and it must be understood that as conditions in the school or in the community change, this document will change, as will parent and student responsibilities.

Quick Guide

1. SJS will implement the framework for decision-making, evaluating the level of community disease transmission; the community level of vaccination coverage; impacts to the school; the capacity and needs of the community and school; and implement a layered approach to prevention. (see p. 5)
2. SJS promotes vaccination and encourages all eligible students to get vaccinated.
3. SJS strongly encourages all students and staff to wear a mask at all times, regardless of vaccination status. **All students must have a mask with them in school every day.** (see p. 9 and p. 10)
4. SJS will implement 3 feet of physical distance between students at all times, as feasible. Six feet of distance will be maintained between adults and students, as feasible. (see p. 10)
5. SJS will not provide COVID-19 screening but encourages all students and staff to be screened as appropriate. (see p. 11)
6. SJS maintains high quality ventilation systems to clean and disperse air. Additionally, classroom windows will be opened as part of layered prevention.
7. SJS promotes handwashing and respiratory etiquette with adequate signage and hand sanitizers readily available in every classroom. (see p. 11)
8. SJS promotes cleaning and maintaining a healthy facility through continuous cleaning protocols. (see p. 12)
9. SJS strongly insists that students and staff stay home when sick and please see your physician for testing and care. Parents should screen their children every morning for COVID-like symptoms. (see p. 12)
10. SJS promotes contact tracing and quarantine as appropriate.
11. Concurrent teaching and “orange rooms” are eliminated. Cohorts will be used during recess.
12. Distance learning may be implemented on a school-wide or classroom-wide basis. There is no option for individual students to “distance learn.”
13. Students will attend Mass as a school community, but will not mix grades, eliminating the Mass Buddies for the 2021-2022 school year.
14. Cafeteria use on alternating days.
15. Parent volunteer opportunities suspended, except for outdoor recess volunteer monitors, with proof of vaccination and mask.

COVID-19 Mitigation Plan - St. Joseph Catholic School

Overview:

St. Joseph Catholic School adopts the framework for decision-making shared by the Arlington Diocese Office of Catholic Schools, the Virginia Department of Education, and the Virginia Health Department, published July 21, 2021, for the prevention of COVID-19 in our school.

Guiding Principles:

When prevention strategies — especially vaccination, mask use and physical distancing — are consistently and correctly used, the risk of transmission in the school environment is decreased. (VDH/VDOE July 2021)

The St. Joseph Catholic School plan for the prevention of COVID-19 recognizes the validity of the following guiding principles articulated July 21, 2021, VDH/VDOE:

- **Students benefit from in-person learning.** Safely returning to and maintaining in-person instruction during the 2021-22 school year is a priority.
- **Put education first.** Prioritize educational opportunities over athletics, extracurricular activities or other events in the school and surrounding community. Establish reasonably safe in-person educational environments and then consider including extracurriculars and athletics.
- **Focus on prevention.** Promote vaccination, as it is the leading prevention strategy to end the COVID-19 pandemic and can help schools safely return to and maintain in-person learning. Establish a school culture of adherence to prevention strategies both in and out of school. Establish environments in which vaccination is promoted, and people physically distance, wear masks correctly and consistently, practice hand hygiene and respiratory etiquette, and clean frequently. Coordinate closely with local health departments. Educate students/staff to monitor health daily and stay at home if they have symptoms and follow public health recommendations. Consider screening testing programs to identify cases early.

- **Consider community needs.** Consider disease and vaccination trends and also understand the socioeconomic factors, literacy barriers, and other educational needs in your community when developing plans.
- **Be flexible and innovative.** Scientific knowledge evolves rapidly, and local context is incredibly important. Community transmission and the level of impact to a given school can change and the combination of prevention strategies may evolve with time.

In addition, the St. Joseph Catholic School plan for the prevention of COVID-19 was developed using the published *framework for decision-making* (VDOE/VDH) and reflects collaboration among the reopening team members. All relevant stakeholders were given voice in the process; parents were surveyed and faculty and staff were consulted through ZOOM meetings and were invited to comment.

COVID-19 continues to be a community health threat, and attention has been given to creating a plan that is based on the recommendations presented in the Interim Guidance, specific to all Virginia schools.

St. Joseph Catholic School plans to open August 2021, with all students in attendance, the “concurrent teaching” model used during the 2020-2021 school year is eliminated. However, the potential for school-wide or specific class-wide virtual learning exists, depending on the data and other circumstances.

Framework for Decision-Making Process:

COVID-19 case data changes continually, as does the understanding of physicians and scientists relative to social recommendations in the best interests of our communities. No decision can be made in August without the understanding of the potential need to change that decision. Therefore, SJS relies on the following framework for decision-making.

1. Evaluate the level of Community Disease Transmission

To determine the level of community transmission, CDC and VDH recommend the use of two measures: total number of new cases per 100,000 persons in the past 7 days; and the percentage of nucleic acid amplification tests (NAATs) including RT-PCR tests that are positive during the last 7 days.

Indicator	Low Transmission	Moderate Transmission	Substantial Transmission	High Transmission
Total new cases per 100,000 persons in the past 7 days	0-9	10-49	50-99	>+100
Percentage of NAATs* that are positive in the past 7 days	<5.0%	5.0%-7.9%	8.0%-9.9%	>-10.0%

Where the two indicators are at different levels, the higher threshold should be used. **In the event of either indicator registering at substantial transmission or above, masks will be required for all students, faculty and staff.**

The Virginia Department of Health cautions that regardless of what the indicators determine, the more unvaccinated students or staff who interact, the closer the interaction is, and the longer the interactions last, the higher the risk of COVID-19 spread.

This metric will be evaluated and reported weekly for as long as it is available during the school year.

2. Understand Community Level Vaccination Coverage

As an elementary school, grades K-8, 77.5% of SJS students are under the age of 12 and are not eligible to receive any of the COVID vaccines currently approved for emergency use. In the absence of student vaccination information, SJS **assumes all students to be unvaccinated**, and quarantine and mitigation decisions are made on that assumption. Parents are asked to share vaccination status of their child(ren) to guide a fully-informed school response to any COVID-19 outbreak. As of today, in the Commonwealth of Virginia, of children age 12-15, only 4% are fully vaccinated.

This metric will be evaluated weekly, and parents are strongly encouraged to share COVID-19 vaccination status for their children. All information will be kept confidential.

3. Consider the Level of Impact to a School

Notwithstanding the level of COVID-19 transmission in the community, the level of transmission within the school may necessitate the implementation of additional or different mitigation strategies, or intensified prevention strategies. VDH recommends the following considerations to any change in strategy:

- the number of outbreaks experienced and their proximity in time to each other
- the size of any outbreak(s) (number of cases and close contacts identified)
- the level of spread within the school (e.g., whether cases are confined to a particular classroom or grade level)
- the level of student and/or staff absenteeism due to illness or necessary isolation/quarantine and the staff capacity

Criteria to consider	Level of School Impact*		
	Low	Medium	High
Transmission within school	Zero or sporadic cases with no evidence of transmission in school	Two outbreaks within a short time period or sporadic outbreaks in school. Size of outbreaks remains small.	Several outbreaks in school within short time period; size of outbreaks is large or scope of outbreaks is significant (e.g multiple classrooms or grade levels are impacted).
Student absenteeism	At baseline/Low	Slightly above baseline	High
Staff Capacity**	Normal	Strained	Critical

*Level of impact to school can only be assessed for those schools that have opened to in-person instruction. Schools should collaborate with local health departments on contact investigations. Depending on the level of COVID-19 transmission in the school and outbreak status, public health may recommend adjustment to prevention strategies. If a school is conducting a COVID-19 testing program, screening testing data can also be helpful.

**This subjective assessment should factor in a school's ability to maintain adequate staff for facility operations, transportation, teaching, and administrative functions. It should include input from teachers/staff regarding their availability to provide in-person instruction.

This metric will be evaluated weekly/daily and reported as appropriate during the school year.

4. Understand the Capacity and Needs of the Community and School

Both VDH and VDOE recommend a balance between the goal of disease prevention and the goal of providing in-person educational instruction, prioritizing safety-optimized in-person learning environments. St. Joseph Catholic School will assess the prevention strategies on an ongoing basis, to help identify what combination of strategies is best. For example, if within a classroom it is not possible to a distances of 3 feet between students it would be especially important to focus on and layer other prevention strategies such as indoor masking, adequate or increased ventilation, ensuring appropriate hand hygiene opportunities, staying home when sick, and regular cleaning and disinfecting.

SJS recognizes the importance of effective and ongoing communication and commits to continued timely communication with all stakeholders relative to the impact of COVID-19. Staff, students, and families are welcome to ask questions and share concerns, as all meaningful input to helps shape school decisions on the right combination of prevention strategies.

This metric will be evaluated weekly and reported as appropriate during the school year.

5. Determine and Implement a Layered Approach with Multiple Prevention Strategies

Guidance provided by VDH and VDOE recommends schools select prevention strategies that are informed by the levels of community transmission, local vaccine coverage, and the level of impact to a school, including the use of screening testing data to detect cases in schools if available. The following 9 prevention strategies are used alone or in combination, depending on available COVID-19 data.

9 key prevention strategies to create a layered prevention plan:

1. Promoting vaccination
2. Consistent and correct use of masks
3. Physical distancing
4. Screening testing

5. Ventilation
6. Handwashing and respiratory etiquette
7. Cleaning and maintaining healthy facilities
8. Staying home when sick and getting tested
9. Contact tracing in combination with isolation and quarantine.

SJS Planning for the 2021-2022 School Year:

It is understood that all elements of this layered prevention plan are evaluated continuously, using the framework for decision-making.

1. **SJS Promotes Vaccination:** Vaccination is the leading public health prevention strategy to end the COVID-19 pandemic. Parents are strongly encouraged to get vaccinated and vaccinate children 12 and older. Those interested in getting vaccinated can check with their healthcare provider or find a location to get their free COVID-19 vaccine at vaccinate.virginia.gov/ (VDH/VDOE)

Please notify the school nurse with the vaccination status of children who are SJS students.

2. **SJS Promotes Consistent and Correct Use of Masks:** VDH and the Virginia Department of Education (VDOE) strongly recommend that elementary schools (including PreK classrooms) implement a requirement that students, teachers, and staff wear masks indoors, regardless of vaccination status, until vaccination is available for children under 12 years old and there has been sufficient time to allow for children younger than 12 years old to be fully vaccinated. (VDH/VDOE)

Universal masking is one element of a layered approach in the prevention of COVID-19. Current data shows the Delta Variant to be an aggressive mutation of the COVID-19 virus, and all SJS students, faculty and staff are ***strongly encouraged to wear a mask at all times, regardless of vaccination status.***

The decision on whether masks are required for all students and staff is subject to change momentarily based on the data of the decision-making indicators at a given time.

For example, the framework for decision-making indicators showed that if school opened the week of August 2, the total new cases per 100,000 in the previous 7-days, in Fairfax County, was moderate (48.42) and the NAAT (PCR) rate was low at 3.6%. *The community indicator for transmission of COVID-19 under those indicators, was moderate, and masks would have been strongly encouraged for all students, faculty and staff.*

Parents need to be aware that as the framework for decision-making indicators change masking requirements will change. All students must have a mask with them in school every day. **Teachers may require students to wear a mask during small group or other close work.**

- 3. SJS Promotes Physical Distancing:** Students should be at least 3 feet apart combined with indoor mask wearing by all students and teachers/ staff, regardless of vaccination status. If maintaining 3 feet distance is not possible in classrooms, such as when a school is at full capacity, it is especially important to layer other strategies such as masks, screening testing, ventilation, cleaning, staying home when sick etc. (VDH/VDOE)

Students will maintain 3 feet of physical distancing in **classrooms** where possible. In some classrooms, (art and science lab for example) it is not possible to maintain 3 feet of physical distance. In these classrooms, other prevention strategies, such as window ventilation and masks will be used. ***Wearing masks at all times is strongly encouraged, and may be required based on framework for decision-making metrics.***

Physical distance should be maximized to the fullest extent possible in the **cafeteria**. Students will eat in the cafeteria on alternating days, and no hot lunch will be served. Students must bring their own lunch, including drink. Please remember that SJS strives to maintain a safe environment for all students and as

such, peanuts, and all nuts, as well as peanut and all nut products are not permitted. Once the lunchroom can return to its pre-pandemic capacity and schedule, students may return to eating their nuts, peanut foods as well as foods that are labeled as processed on the same lines as nuts, peanut products/peanuts in the lunchroom. Please read the SJS Allergy plan for details. It can be found on the nurses' page on the SJS school webpage.

During recess, students will remain in their cohorts, but masks will not be required. This policy may be reconsidered based on student vaccination rates among older students.

Please refer to the Parent and Student Handbook for directions related to **morning drop off, and afternoon dismissal.** Classes will be dismissed on a staggered schedule and walkers will be dismissed with their classes.

- 4. SJS Promotes Screening Testing:** Screening testing can help promptly identify and isolate cases, quarantine those who may have been exposed to COVID-19 and are not fully vaccinated and identify clusters. This can help reduce the risk to students, teachers and staff, and controlling outbreaks before they expand can help limit any disruption to in-person education. COVID-19 screening tests will not be offered at SJS, and parents can refer to the VDH testing site locator or contact your primary physician or pediatrician for screening information.

- 5 SJS Promotes Ventilation:** Ventilation systems clean and disperse air, decreasing the likelihood that students will inhale particles suspended in the air that are contaminated with the virus that causes COVID-19. As required by law for all educational buildings, outside air must make up a large part of the heating and cooling system for all schools. SJS uses in all our HVAC (Heating and ventilation and Air conditioning System) systems the higher end pleated filters (2 “ thick). Filters are commercial grade and thickness. Filters are changed and equipment inspected regularly. HVAC systems are a priority for SJS facility maintenance. Per CDC guidelines, circulating outside air reduces virus spread, classrooms will also open windows to circulate air, 10 minutes every hour.

6. SJS Promotes Handwashing and Respiratory Etiquette: Hygiene signage will be placed in restrooms and in appropriate locations to remind students of the importance of handwashing. Signage reminding students of social distancing and best practices to reduce the spread of the virus will be throughout the school. Morning school-wide news broadcasts (WSJS) will be used as a communication tool to remind and reinforce best practices in students and staff. Students will be reminded to cover a sneeze or cough. All classrooms have hand sanitizers installed. Additional bottles of hand-sanitizer will be available in each classroom, along with wall-mounted stations. Hand sanitizers in each classroom are not hands free, however, hands free devices are located in the clinic bathroom and also located in some restrooms. The opportunity for soap and water alternatives is available.

7. SJS Promotes Cleaning and Maintaining Healthy Facilities: The following cleaning protocols are in place for every night:

- Facility cleaned each night with extra detail for areas of concern per CDC, using all CDC approved cleaning supplies.
 - Extra detail includes all hard surfaces (desktops, chairs) disinfected; Classroom floors wet moped; Restrooms disinfected and sanitized; Doorknobs, pull handles and light switches wiped clean per CDC requirements.

The following cleaning protocols are in place for daytime:

- Throughout the day, the Cleaners will start at one end of the building completing daily cleaning routine, then start over, in a continuous cycle, with specific attention to restrooms and commonly used touch spots, including door hardware, push bars, pull handles.

8. SJS Promotes Staying Home When Sick and Getting Tested: All students, teachers, and staff who have symptoms of infectious illness, such as influenza (flu) or COVID-19 *must stay home from school and see a healthcare provider for testing and care.*

Students/Staff who become ill while at school:

The nurse/clinic staff should be notified prior to the arrival of a sick student/staff to the clinic. The individual should be masked prior to coming to the clinic. If the individual is unable to walk to the clinic alone, the nurse should be notified so that she may walk down donned in appropriate PPE to assist the individual to the clinic. The individual will be taken to the isolation room for assessment, if the individual falls into the criteria for signs of COVID related symptoms, the individual will remain in the isolation room while the parent/family member is immediately contacted. If symptoms are emergent warning signs such as: trouble breathing, persistent pain or pressure in the chest, new confusion, inability to wake or stay awake, bluish lips or face (this list is not all the possible symptoms), 911 will be called. Operator will be notified that we are seeking care for someone who may have COVID-19. If an individual does not fall into the criteria for having COVID related symptoms, they will be treated appropriately in the clinic and sent back to class or home as needed. ***Administrators will communicate to parents and staff that anyone who is ill must be picked up within an hour or less. Hence, plans should be made ahead of time by families to list reliable emergency contact names on the emergency forms prior to the beginning of the school year.***

If the student/staff cannot be picked up within an hour or less by the family member, the parent/family will be notified that 911 will be called for their child/family member, and the child/family member will be transported to the hospital.

9. SJS Promotes Contact Tracing in Combination With Isolation and Quarantine: The definition of close contact includes an exception for K-12 settings for the purposes of case investigation and contact tracing. In general, VDH uses proximity of within 6 feet for a total of 15 minutes or more within 24 hours to determine the need for quarantining persons who have had close contact exposure to someone with suspected or confirmed COVID-19. In indoor K-12 settings, a student who is within 3 to 6 feet of an infected student is not considered a close contact as long as both students are wearing masks and the school has other prevention strategies in place. This exception does not apply to teachers, staff, or other adults in indoor K-12 settings. Having direct exposure

to respiratory secretions of someone with COVID-19 (e.g., being coughed or sneezed on) is also considered close contact in any setting.

Waiver:

The St. Joseph Catholic School reopening team has collaborated to design this COVID-19 Prevention Plan in order to safely reopen St. Joseph Catholic School for the 2021-2022 school year. This plan represents the planning recommendations and guidelines of the Arlington Diocese Office of Catholic Schools, and the VDH/VDOE *Interim Guidance for COVID-19 Prevention in Virginia PreK-12 Schools* published July 21, 2021. No plan can eliminate all risk, and while administration, faculty and staff of St. Joseph Catholic School will exercise all reasonable precautions, parents assume the risk of sending their children to school. All parents will be required to sign a waiver indicating an acceptance of the risks of sending children to school this fall.

Contact information and procedures for reaching the local health department.

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