

August 2021
PSD Stay Safe to Stay Open
Plan Revisions/Additions

This updated plan is presented as a follow up to the Board of Education approved plan from July. The plan below was approved by the Board of Education at their meeting held on August 24, 2021. This plan will be in place for the start of the 2021-22 school year. The Board will regularly review the status and performance of the plan as a standing item at all Board of Education regularly scheduled meetings.

Definition of Key Terms

Positive: Individual who has tested positive for Covid-19.

Probable: Individual who has a known close contact exposure (within 6-feet for \geq 15 minutes) to a confirmed positive cse and who has symptoms for Covid-19.

Close Contact: Individual identified through the contact tracing process to have been exposed to a positive case (within 6-feet for \geq 15 minutes).

Vaccinated: Individual who is known to be fully vaccinated for Covid-19. This means 2-weeks past the final dose of the vaccination process.

Confirmed Recently Infected: Individual who has tested positive for Covid-19 in the past 90-days. Note that Recently Infected individuals enjoy the same status in regard to the contact tracing and quarantine procedures as fully vaccinated individuals.

Rapid Antigen Test (C19): Nasal swab test that provides either a positive or negative result in approximately 15-minutes. Rapid tests are not as accurate as the more sensitive PCR tests but provide the benefit of faster results that can help inform timely decision making.

Polymerase Chain Reaction (PCR) test: PCR tests are highly sensitive and accurate tests used for diagnosing Covid-19. Test results are typically available within 24-hours.

Mitigation Decision Guidance (MDG) Model: This model, utilizing the 7-day average of new cases within Pewaukee School District boundaries will be used to guide decisions to escalate or de-escalate mitigation measures. The district will look for a 3-day trend of the metric meeting or exceeding (or falling below for de-escalation) of the prescribed benchmark when considering a change in measures. Other data including internal rates of infection and quarantine will also be considered. (Descriptive terms identifying notable changes in mitigation as levels increase notated in **bold**).

Scale using 7-day avg new cases within district boundaries (3 or more days at or above benchmark. When moving up levels, a 2 week minimum implementation should be expected).	Masking	Quarantine	Testing
<3.5	<u>Optional</u>	Positive & Probable only required to complete 10-day quarantine; offer testing for probable and close contacts. Vaccinated or recently infected (past 90-days) who are identified as symptomatic close contacts may return with a negative PCR test.	Recommended / Optional for close contacts and unvaccinated staff.
> or = 3.5	Recommended when indoors for students & staff; unvaccinated staff asked to wear in presence of students and when they cannot socially distance (6 feet)from colleagues	Positive & Probable individuals only required to complete 10-day quarantine; Close contacts encouraged to submit a negative test. Vaccinated or recently infected (past 90-days) who are identified as symptomatic close contacts may return with a negative PCR test.	Encouraged as weekly screener for non-vaccinated staff & for all non-symptomatic close contacts; consider special event-based screen testing (e.g. dances)

> or = 7.5	Recommended when indoors for students & staff; unvaccinated staff <u>asked</u> to wear in presence of students and when they cannot socially distance (6 feet)from colleagues	Positive & Probable individuals required to complete 10-day quarantine (symptomatic vaccinated or recently infected individuals may return with negative PCR test); All close contacts required to submit negative test (day 1) & confirming test day 3-5 to return or must complete full CDC prescribed quarantine 10-day, or early return day 8 with a negative test from day 6 or 7).	Weekly screen testing required for non-vaccinated staff, Required testing for close contacts (day 1 & confirming between day 3-5) to return or complete full CDC quarantine; Require special event-based screening tests (e.g. dances; non-curricular, non-athletic group events)
> or = 10	Required w/waiver option allowed for students only; required for staff	Positive, Probable individuals required to complete 10-day quarantine(symptomatic vaccinated or recently infected individuals may return with negative PCR test); Non-vaccinated Close Contacts must complete full quarantine. Close contacts may return on day 8 with negative test on day 6 or 7. Vaccinated or recently infected may return with a negative test and confirming test day 3-5. (Full CDC Guidance)	Weekly screen testing required for un-vaccinated staff; Require special event-based testing or consider cancellation or postponement
> or = 14	Required masking - no waiver except medical (Board Action Required)	Positive, Probable individuals required to complete 10-day quarantine(symptomatic vaccinated or recently infected individuals may return with negative PCR test); Non-vaccinated Close Contacts must complete full quarantine. Close contacts may return on day 8 with negative test on day 6 or 7. Vaccinated or recently infected may return with a negative test and confirming test day 3-5. (Full CDC Guidance)	Weekly screen testing required for un-vaccinated staff. Require special event-based testing or consider cancellation or postponement

Learning Environment Change Process & Metrics

The decision to move to *Temporary Virtual Learning* (TVL) will be made by the Superintendent for up to two weeks without Board approval to respond to increasing viral spread within the district. If a Board of Education meeting is not scheduled during the two school weeks of the change, a special Board meeting will be convened to review status and consider action.

Learning Environment Metrics - The Administration will focus primarily on internal metrics when considering moving groups of students to TVL environments as a strategy for reducing viral transmission. Groups may range from classroom sections, to houses (grade level cluster of classrooms), grade levels, or full school buildings. These decisions often require fairly rapid decision making in response to changing conditions. Key metrics include:]

- Student infections (positive and probable cases)
- Students in quarantine
- Staff infections (positive and probable cases)
- Staff in quarantine (for exposure or to care of their own children in quarantine)
- Substitute fill rates

Guiding Questions - The decision to move a group to TVL, and how long the group should be kept out of school is complicated and must be done when considering the full context of the situation. The following questions are considered when making these kinds of determinations:

- What group or groups are experiencing increased rates of infection? (Class, grade, house, school)
- Is the increase or outbreak in infections related to a common factor? (e.g. athletics team participation, known common social event, neighborhood, etc.) Or does the increase in infections seem to be spread randomly among members of the group?
- Do we have reason to believe we may have the spread contained (e.g. common factor individuals already in quarantine)?
- Does the spread seem to be growing or declining?
- Do we have a fairly immediate scheduled break coming? (e.g. Spring Break, Winter Break, etc.)
- How many are already placed in quarantine and when are they scheduled to return?
- Are staff in quarantine? Are we able to adequately staff classrooms?

The move to TVL has been, and will likely continue to be necessary from time to time as we work through the Pandemic. The District understands the burden such a decision places on families and will continue to carefully consider all options when determining whether or not to implement this strategy. When moving groups to TVL, the length of time students are placed in virtual will be kept as short as reasonably possible.

The **table below** includes **all categories of recommendations** outlined in the guidance from the CDC and other health agencies. For each category, in the **far right column**, you will find a detailed description of the strategies currently in place in our school district.

 Table 1: Public Health Guidance and PSD Implementation Plan

Category	Current Public Health Guidance (CDC)	PSD Approach in each category
Learning Environment	Students benefit from in-person learning, and safely returning to in-person learning is a priority for the 2021-22 school-year.	 All schools will have students return to 5-days per week in-person learning (A fully virtual learning model was offered to families however demand was too low to staff any fully virtual sections so this is not an option in the upcoming year.) Emergency Remote Learning (ERL) environments will be provided as needed for individual students placed in quarantine. This will be supported with our 1:1 Chromebook program and the use of our Learning Management Systems (LMS) which include SeeSaw and Canvas, and other supporting technologies such as videoconferencing. Temporary Virtual Learning (TVL) environments (learning from home via virtual instruction) may be employed in an effort to limit viral spread if outbreaks among groups occur. This may be used with classrooms, houses, grade levels, or full school buildings. Transition to TVL would typically be for a maximum of 2 weeks (full quarantine period).
Vaccination Promotion	Vaccination is the leading public health prevention strategy to end the COVID-19 pandemic. Promoting vaccination can help schools safely return to in-person learning as well as extracurricular activities and sports.	 The District has hosted three onsite vaccination clinics for staff and two that included students once they became eligible (12 and over). The District will organize another onsite clinic once children under the age of 12 become eligible (authorization anticipated sometime in the fall). The District encourages staff and students to be vaccinated but recognizes and respects it is a personal choice to be vaccinated. The District does not require vaccination for staff or students. There will be some differentiation in relation to mitigation protocols for individuals who are fully

		vaccinated or confirmed of recent infection (past 90-days) such as differences in contact tracing, testing and quarantine procedures.
Masking	Communities experiencing substantial or higher viral spread (currently includes Waukesha County), recommend that all individuals 2-years of age and older (students, staff & visitors), regardless of vaccination status, wear facemasks when indoors.	 District recommends masking for all individuals when indoors regardless of vaccination status. Wearing of facemasks is required on all buses by Federal mandate. District provided parents the option of voluntarily selecting placement of their student(s) into a mask required section in grades 4K-6 (grades not fully eligible for vaccination). Adequate demand was received to establish sections in grade 5K-5. The District redeployed a parent survey on 8/19/21 to determine if there is sufficient demand for additional masked sections in 4K-6. The results show adequate demand and additional voluntary masked sections will be added in grades 4K-6 All unvaccinated staff will be asked to wear face masks indoors whenever in the presence of students and/or when unable to socially distance (6 feet) among groups of colleagues. Exceptions may be appropriate depending on staff role with students (e.g. Speech & Language). This will be relaxed if infections decline and stabilize. The District may impose a student mask requirement if viral spread in the school and/or community increased to 7-day new positive case rate as defined in the red category in the MDG model. A student mask requirement would include a parent waiver (opt out) option unless additional future Board of Education action were taken to restrict the use of waivers.
Contact Tracing, Isolation &	Implementation of contact tracing, testing, isolation, and quarantine protocols for	District is staffed in all schools with fully qualified nurses who will continue to work with administration

Quarantine	positive cases, probably (exposure & symptoms), and close contacts.	 to contact trace all school-based cases. Students who are confirmed positive, probable, or exposed as in-home contacts will be required to complete quarantine (minimum of 10-days inclusive of 24 hours or more of no fever and improving symptoms). Fully vaccinated or confirmed recently infected may return if wearing a mask indoors and be tested on days 3-5. Once testing negative no mask required. Non-symptomatic close contacts will be notified of exposure and CDC recommendations provided to the parents. Voluntary quarantine will be supported with Emergency Remote Learning. All non-symptomatic close contacts choosing not to quarantine (return to school), will be encouraged to complete a Rapid Antigen test (day 1), and a confirming test 3-5 days later (testing services available at school). The District may additionally require close contacts (students or staff) to submit a negative test prior to returning to school with a subsequent confirming test 3-5 days after exposure as described at level orange in the MDG Model. The District may additionally require quarantine of close contacts who are non-symptomatic if infection rates increase in the community or within the school system as defined at level or in the MDG model.
Ventilation	Enhanced ventilation procedures	 Enhanced ventilation practices will continue to be employed by the school district in alignment with CDC recommendations. Needlepoint Bipolar-Ionization HVAC systems have been installed in all school buildings. These systems improve air quality and have been shown to substantially eliminate Covid-19 particles in the air and on surfaces.

Testing	Screening testing identifies infected people, including those with or without symptoms (or before development of symptoms) who may be contagious, so that measures can be taken to prevent further transmission.	 The District has partnered with DHS, DPI and Noah Laboratories to provide access to rapid antigen and PCR testing in all health rooms for students and staff. Recommendation that unvaccinated staff be tested as a preventative measure one time per week. A protocol has been established in which testing will be offered for students and staff who are identified at school as symptomatic, or non-symptomatic close contacts, (with parental approval for students). PCR Tests will be recommended for symptomatic close contacts (probable cases/subject to quarantine) Rapid Antigen Tests will be recommended for non-symptomatic close contacts with a confirming Antigen or PCR test on day 3-5. (Eligible to return to school) The District may additionally require close contacts (students or staff) to submit a negative test to return to school with a confirming test 3-5 days after exposure as defined in the orange level of the MDG model. The District may additionally require quarantine of close contacts who are non-symptomatic if infection rates increase in the community or within the school system as defined in the red level of the MDG model.
Physical Distancing & Cohorting	Distancing: Recommendation that when possible, when indoors, individuals maintain 3-6 feet social distancing to reduce transmission. Cohorting: Cohorting means keeping people together in a small group and having each group stay together throughout an entire day. Cohorting can be used to limit the number of students, teachers, and staff	With full student attendance (as opposed to the hybrid/50% attendance models utilized earlier in the 2020-21 school year) it is very difficult to maintain social distancing consistently between students. It is recommended however that all reasonable efforts are made to create more opportunity to spread out students and staff (e.g. extra lunch periods, more tables, use of outdoor spaces, etc. whenever possible.) Cohorting strategies will be utilized in the elementary grades

	who come in contact with each other, especially when it is challenging to maintain physical distancing.	to reduce interaction outside of classroom or 'house' groups (lunch time, etc.).
Symptom Monitoring	Students, teachers, and staff who have symptoms of infectious illness, such as influenza (flu) or COVID-19, should stay home and be referred to their healthcare provider for testing and care, regardless of vaccination status. Staying home when sick with COVID-19 is essential to keep COVID-19 infections out of schools and prevent spread to others.	Students (with support of parents) and staff are urged and expected to self monitor for symptoms of infectious illness and not report to school whenever symptomatic . Staff who are able to continue their duties (e.g. provide instruction virtually) will not be charged sick leave. Students found to be symptomatic at school will be asked to wear a mask and will remain in isolation until picked up by a parent or are allowed to leave school (older students).
Cleaning & Disinfection	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>U.S. Environmental Protection Agency COVID-19 list external icon</u>) removes any remaining germs on surfaces, which further reduces any risk of spreading infection. If a facility has had a sick person or someone who tested positive for COVID-19 within the last 24 hours, clean AND disinfect the space.	 Enhanced cleaning procedures and sanitation including: Increased frequency of cleaning of high touch surfaces Utilization of hydrostatic and PureFX sprayers to enhance clearing and disinfect spaces Flexible response cleaning for targeted sanitation in locations with higher incidence of illness Contracting with Riteway Busing for high touch surface cleaning in between routes and full bus sanitation each evening
Handwashing & Respiratory Etiquette	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.	Proper handwashing and respiratory etiquette will be taught and promoted in the school system. Signage encouraging hand washing and respiratory etiquette will be visible throughout the school district. A high level of access to handwashing locations and hand sanitizer throughout the school district will be maintained.

	 Teach and reinforce handwashing with soap and water for at least 20 seconds. Remind everyone in the facility to wash hands frequently and assist young children with handwashing. 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). 	
Volunteers & Visitors	Schools should limit nonessential visitors, volunteers, and activities involving external groups or organizations, particularly in areas where there is moderate-to-high COVID-19 community transmission.	 At level yellow of the MDM model: Volunteers may serve on campus in non-student settings if fully vaccinated and wearing a mask if not socially distanced from other staff. The district will re-evaluate the ability of volunteers to work with students when infections decline and stabilize. Mentors (Insight Program) will meet virtually with students at this time. The district will re-evaluate student ability to meet in-person with mentors when infections decline and stabilize. Visitors will be restricted during the school day until infection rates sustain at reduced levels (metric level TBD). Whenever possible, meetings with parents and other visitors will be handled virtually. Restrictions on volunteers and visitors may relax if infections decline level green MDM model.
Outdoor Spaces	When possible, utilize outdoor spaces which greatly reduce virus transmission due to the high level of ventilation. Masks not required in outdoor settings.	 Maximization of the use of outdoor spaces with students Emphasis on holding higher respiration activities outdoors including physical education, choir, and

		band (weather permitting).
Data Metrics	Localities should monitor community transmission, vaccination coverage, screening testing, and occurrence of outbreaks to guide decisions on the level of layered prevention strategies	The Pewaukee School District will maintain a comprehensive dashboard of metrics to support informed decision making. Key data will be shared regularly with PSD families to keep all families informed of current status. Metrics utilized include: • 7-day new positive case rates utilized as primary metric for the PSD Mitigation Decision Guidance Model (MDGM) that will be used to guide decisions to increase or relax mitigation measures. Other data will also be considered in making these decisions. • Disease burden models (WI, MN, and Harvard Resilience) and rates of infection for the community. (Currently using 10-day case rates for all Census Tracts contained fully, or partially within the boundaries of the district). • Student cases (positive and probable) • Students in quarantine • Staff cases (positive and probable) • Staff in quarantine • Longitudinal data of weekly infections (during school year) Additional Data - monitored on external sites: • State and Waukesha County Case Rates (overall and by age group) • Age group hospitalizations • State and Waukesha County Vaccination Rates (overall and by age group)