

COVID MITIGATION POLICY REVIEW

**Updated: 1/23/2022*

**Adopted by the Great Oaks Academy Board:*

PURPOSE AND PRIORITIES

Great Oaks Academy priorities regarding COVID-19 mitigation are:

1. Establish a protocol that champions the best interests of students, whollistically.
2. To advocate for and encourage parent/family choice and input in children's education.
3. To craft an approachable and reasonable policy based on available data, the context of the Academy.
4. With humility, to welcome feedback from our community and act upon it as necessary.

DISCUSSION

Great Oaks Academy has determined to review our COVID-19 mitigation policies as outlined in our Safe Return to Learning Plan, which was adopted by the Board in August, 2021. Policies that made sense in the relative uncertainty and turmoil of 2020 and 2021 are not implicitly suitable for use in 2022, given current rates of vaccinations and vaccine availability, and given the changing nature of this issue. We approach this policy review in light of our Mission to cultivate and nurture the whole child, mind and body, in order to resist the urge to magnify a single facet of children's well-being at the expense of others. Any policy we make for education dramatically impacts not just the present health of children, who are a vulnerable population, but their future flourishing. It is our intention to represent and protect their inherent interests in our policy.

In-Person Learning

The CDC outlines a number of educational guidelines, which we have incorporated to our best ability and to the extent that such guidelines make sense for our community. We agree with the CDC, and other health policy institutions, which maintain that students benefit most from in-person education. We acknowledge that not only are hybrid and distance learning options less beneficial, but may pose significant other harms to children's mental health, long-term development, and etc.¹ Students are not just vectors for disease, they are our future and represent complex entities of mind, body, and will. We must be cognizant of decisions we make now that may negatively impact their social, emotional, or

1

<https://docs.house.gov/meetings/IF/IF02/20210922/114054/HHRG-117-IF02-Wstate-BethHegT-20210922.pdf> , <https://nationalpost.com/opinion/opinion-time-for-kids-to-get-back-to-normal>, <https://www.hhrjournal.org/2021/10/ensuring-rights-while-protecting-health-the-importance-of-using-a-human-rights-approach-in-implementing-public-health-responses-to-covid-19/>

educational development in the future. These are unknown risks and we cannot minimize them in good conscience, especially as emerging evidence suggests increasing harm as a result of school shutdowns.²

In terms of health risk, the overwhelming data suggests that risk from COVID-19 is stratified by age and complicated by comorbidities. The data shows that a vast majority of children under the age of 18 have an extremely low risk from COVID-19³, that schools are not significant locales of viral transmission⁴ regardless of the presence or lack of other measures implemented, and that in-person learning does not place most teachers in greater risk as compared with working adults in other fields.⁵ As a result, Great Oaks Academy will continue to prioritize in-person learning. Our mitigation protocol is one line of defense against community spread of COVID-19, and it has been effective, given the low number of cases and classroom closures we've sustained compared to other schools.

We do understand that short of stopping all beneficial life activities, some spread will occur, and in fact, several health authorities are suggesting that COVID is nearing an endemic stage, much as the common cold or flu. This is simply an additional reason that the policies we implement now need to look toward the long term.

Please Note: In order to maintain policies which prioritize students overall well-being through in-person learning and parent choice, Great Oaks emphasizes the necessity of partnership with families to be abundantly cautious and to help us remain safely open, by practicing daily health screening, keeping children with symptoms at home, and utilizing free testing options so that we can keep students in class as much as possible.

Vaccination

² Violence:

https://www.edweek.org/leadership/threats-of-student-violence-and-misbehavior-are-rising-many-school-leaders-report/2022/01?utm_source=nl&utm_medium=eml&utm_campaign=eu&M=64273696&U=2875804&UUID=f530139f25c2b64ce2e441fc9dd92d5e, Obesity: <https://pubmed.ncbi.nlm.nih.gov/34529635/>,

Mental Health: <https://www.cdc.gov/mmwr/volumes/70/wr/mm7015a3.htm>, Impact on Learning: <https://www.mckinsey.com/industries/education/our-insights/covid-19-and-education-the-lingering-effects-of-unfinished-learning>,

³ <https://www.medrxiv.org/content/10.1101/2021.11.30.21267048v1>, <https://nationalpost.com/opinion/opinion-time-for-kids-to-get-back-to-normal>, <https://www.mcri.edu.au/sites/default/files/media/documents/covid-19-and-child-and-adolescent-health-140921.pdf>

⁴ <https://www.eurosurveillance.org/content/10.2807/1560-7917.ES.2020.26.1.2002011>, <https://www.cdc.gov/mmwr/volumes/70/wr/mm7004e3.htm>

⁵ <https://www.bmj.com/content/374/bmj.n2060>

The CDC recommends vaccination for eligible adults and children. We encourage families to consult with their health provider to determine what is best for their well-being. Great Oaks Academy does not require COVID-19 vaccination for students or staff, and will remain neutral as it is outside of our purview to influence families one way or the other.

Quarantine

Recently, the CDC reduced guidelines for personal quarantine to five days, given certain conditions such as lack of symptoms and masking. Great Oaks will follow the exposure decision tree provided below to determine if quarantine is necessary, and if so, for how long. In the event that a student needs to quarantine from school, they will be provided with a device to enable one-to-one learning when appropriate, teachers will coordinate with families to facilitate at-home learning, and extra support will be available to keep students on track during this time.

Our policy will prioritize individual quarantine. By prioritizing in-person learning, we will not utilize entire classroom closures as a common method of mitigation. Such quarantines have not proven effective at eliminating viral spread, and in fact, some data suggests that distance learning exacerbates community spread. Moreover, the disruption to learning and student well-being carries with it significant detriment to children, and therefore is not acceptable as a common strategy for mitigation.

2) If a student has had a positive COVID test in the last 90 days, they do not need to quarantine from household exposures, and they do not need to be tested.

Physical Distancing

The CDC and MDH recommend reasonable distancing, when possible, given educational context. Great Oaks Academy will not mandate limitations on room capacity or physical distancing within school buildings, as there is not significant evidence that such often cumbersome modifications affect transmission.⁶ Shared items and common surfaces will undergo cleaning and disinfecting as needed.

Whole Human Health

We also encourage a holistic approach that prioritizes elements of general health that are known to reduce disease and illness in general, such as maintaining balanced diets with good sources of real protein, vegetables, and fruits, and to avoid diets high in starches or sugar. Students should receive plenty of sunlight, and consider vitamin supplements, especially vitamins C, D, and zinc. Regular sleep is also essential to the body's ability to fight disease, as well as for access to full mental cognition; 7-8

⁶ <https://www.medrxiv.org/content/10.1101/2021.03.16.21253761v1>

hours for adults and 10-12 hours for children. Daily activity is key for developing not only the physical well-being of children, but their emotional and cognitive health; 4-5 hours of active play, preferably outdoors, is the ideal recommendation.

DISTANCE LEARNING

At this time, Great Oaks Academy will not consider distance learning a viable option for COVID mitigation. However, the Director will have the discretionary ability to pivot to distance learning in the event that it is no longer feasible to keep a classroom open in the event of a staffing shortage, or as a final resort if serious infections are over 35% in a given week.

MASKING POLICY

Mask mandates are a contentious issue, and Great Oaks acknowledges that this has become politicized to the detriment of following what the data indicates. Data pre-pandemic indicated the general ineffectiveness of universal masking as a primary means of prevention. During the pandemic, public health officials' recommendations have changed in this regard. However, the social, emotional, and educational impact of universal masking in children has not been a significant part of this discussion. Several doctors have begun to raise questions about the long term impact of universal masking, especially, given their low risk of serious disease, whether the trade-offs are in the best interest of students' development. The potential for long term psychological, emotional, and educational harm is an unknown risk, and as such, one that should be taken just as seriously as children's relative risk from COVID-19.⁷

Recent recommendations from public health officials indicate the general inefficacy of cloth masks in preventing viral spread, particularly of recent strains of COVID-19. The updated recommendation for N95 masks is predicated upon proper mask hygiene and maintaining a consistent seal. There are no studies of N95 masks on children, and in fact, there are no childrens masks federally approved with the N95 rating.

Given the low risk to children as documented above, given that schools do not appear to be significant loci of spread, and given the paucity of data on the efficacy of masking *in adults* both pre-pandemic and during, as well as the lack of data about masking in children, combined with the dearth of any long term studies investigating possible negative impacts from masking, Great Oaks Academy maintains a family choice masking policy.

Great Oaks respects the autonomy of families to determine what best suits their individual needs regarding masking, or declining to mask. We are committed to providing an environment that wisely considers safety across the spectrum of risks children are susceptible to, and which welcomes students and families who value things differently. Thus, we are committed to respecting the choice of families in this matter, and will not place ourselves in the dubious ethical position of attempting to influence children one way or the other.

⁷ <https://www.ncbi.nlm.nih.gov/labs/pmc/articles/PMC8608397/>

MITIGATION NURSE

Great Oaks has a registered nurse on staff to support student health issues as they arise each day at school. The part-time nurse, when present at school, will handle all students with any symptoms possibly related to Covid. The nurse will follow the COVID Protocol for Symptoms of Illness as detailed above. The nurse will offer parents the *option* to have their child tested at the school for Covid. If the student is negative, then this allows us to keep them at school without interruption to their educational day. If the parents decline this testing, the same procedures from the Protocol apply. No student at Great Oaks Academy will be tested for Covid without express parental permission. The available testing is a tool to allow students to remain in school. Great Oaks respects and will always advocate for parent choice.

Screening and Reporting

Great Oaks Academy asks families and staff to perform daily self screenings before arriving at school/work. Families should report illness to the school's attendance line, including covid-like symptoms, positive tests, exposure, etc. In such an event, or in the event of any uncertainty about how to deal with symptoms or exposure, families are instructed to contact our COVID Mitigation nurse who can provide specific guidance.

Students and staff are encouraged to utilize regular hand washing and respiratory etiquette when in school. Students and staff are encouraged to stay home when sick, especially when symptomatic. In the case that a student or staff member receives a positive COVID test or is exposed to someone who has, Great Oaks will follow the exposure decision tree provided below.

Testing

Great Oaks provides the option of free COVID-19 testing to all students and staff, which may enable them to avoid unnecessary or longer quarantine in some cases. Tests are free and available to students and staff via the COVID Mitigation Nurse. Testing will not be performed on students without parental consent.

Notification of Cases

Our goal is to minimize contagion spread through mitigation measures of self-screening at home, and early identification of symptoms. We understand that by prioritizing in-person learning, there will be some community spread, though our aim is to minimize it as much as possible. Great Oaks will notify classrooms of positive cases and exposures each week.

1) When positive cases in a grade reach 10% in a 10 day window of time, Mr. McGlynn will be notified. When positive cases in a grade reach 20% in a 10 day window, parents will be notified. When positive

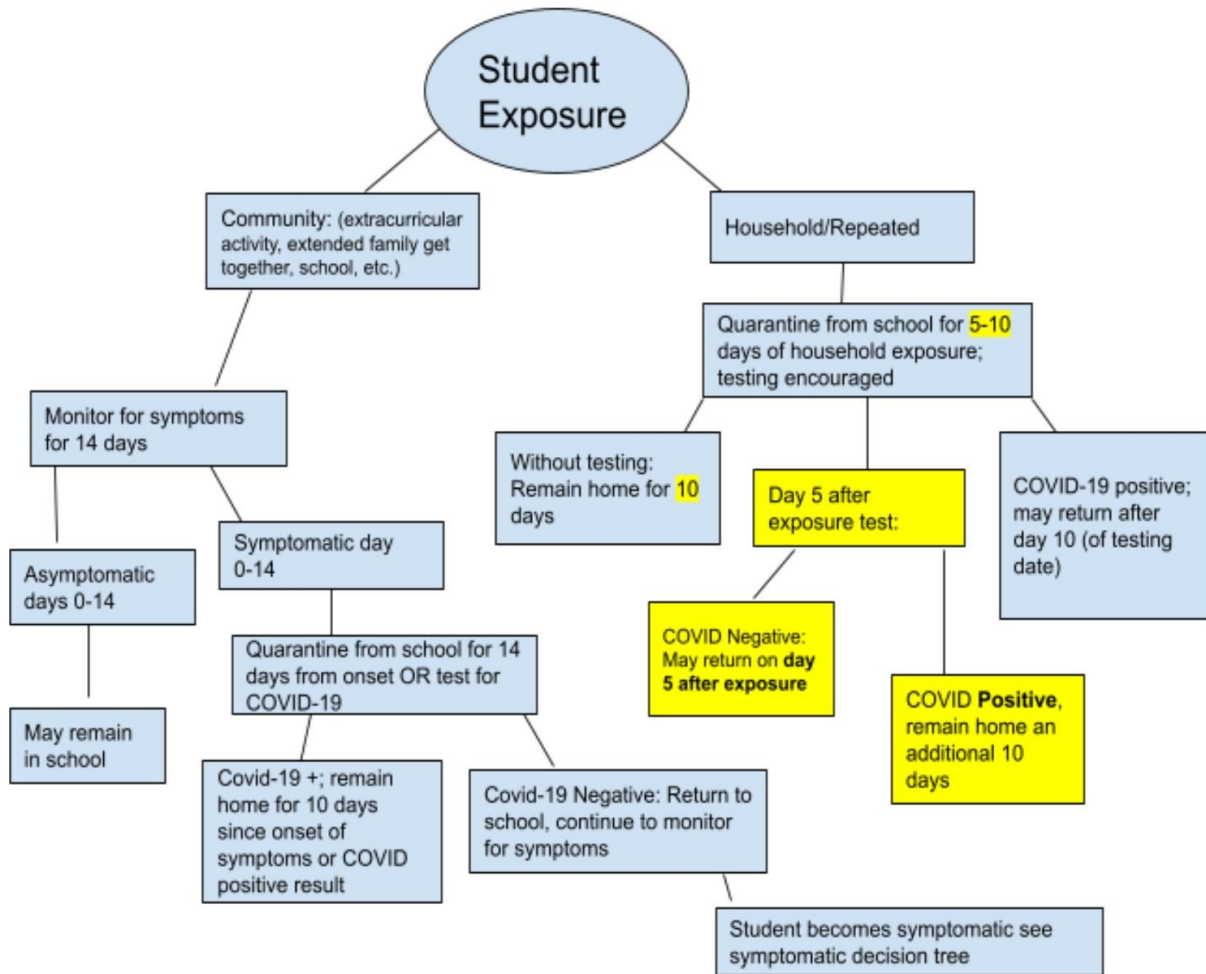
cases in a grade reach 30% in a 10 day window, Mr. McGlynn will discuss with the appropriate people whether distance learning is necessary.

*This policy is subject to change, depending on case-rates and updated guidance and/or State or Federal mandates from MDH, MDE, or etc.

COVID MITIGATION PROTOCOL

I. COVID Protocol for Symptoms of Illness in School

- A. If a student exhibits a symptom or symptoms of a physical illness in the classroom or school community- i.e., coughing, fever, vomiting, loss of taste and or smell, body aches, etc.
 - 1. The student is sent to school nursing staff or the front office
 - 2. Parents will be called to inform them of their child's symptoms and will be requested to come to pick them up as soon as possible
 - 3. The student will wait in the nurses' office or a front seat by the school office
 - 4. The school will request that parents have their child tested for Covid/Variant (parents may choose not to test)
 - 5. If a student tests negative for Covid/Variant i.The student may return to school the following day with proof of a negative COVID test
 - 6. If a student is not tested for the COVID/Variant
 - a) The student will remain absent from school until 24 hours symptom-free
 - 7. If student tests positive for Covid/Variant
 - i.The student will need to quarantine for 10 days from the onset of symptoms



The decision tree was guided in creation with CDC guidelines, the decision tree is subject to change, for extenuating circumstances please reach out to the GOA Nurses and Paul McGlynn for further guidance.

<p>Common COVID-19 Symptoms:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Fever of $\geq 100.4^{\circ}\text{F}$ <input type="checkbox"/> New or worsening Cough <input type="checkbox"/> Difficulty Breathing <input type="checkbox"/> Loss of taste/smell 	<p>Less Common COVID-19 Symptoms:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Sore Throat <input type="checkbox"/> Nausea/Vomiting <input type="checkbox"/> Diarrhea <input type="checkbox"/> Chills <input type="checkbox"/> Muscle Pain/Aches <input type="checkbox"/> Extreme Fatigue <input type="checkbox"/> Severe Headache <input type="checkbox"/> New onset of nasal congestion/runny nose
---	--

*MDH states the following, if a student exhibits one "less common" symptom, and is well enough to continue with school, the child can remain in the classroom. If more than one less common symptom, evaluate further

Sources

- Guidance for COVID-19 Prevention in K-12 Schools
<https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/k-12-guidance.html>
- Health Resources for Schools <https://education.mn.gov/MDE/dse/health/covid19/health/>
- <https://www.medrxiv.org/content/10.1101/2021.11.30.21267048v1>
- <https://arxiv.org/abs/2112.01296>
- <https://www.eurosurveillance.org/content/10.2807/1560-7917.ES.2020.26.1.2002011>
- <https://www.mcri.edu.au/sites/default/files/media/documents/covid-19-and-child-and-adolescent-health-140921.pdf>
- <https://www.ncbi.nlm.nih.gov/labs/pmc/articles/PMC8608397/>
- <https://www.cdc.gov/mmwr/volumes/70/wr/mm7004e3.htm>
- <https://www.medrxiv.org/content/10.1101/2021.03.16.21253761v1>
- <https://docs.house.gov/meetings/IF/IF02/20210922/114054/HHRG-117-IF02-Wstate-BethHegT-20210922.pdf>
- <https://www.hhrjournal.org/2021/10/ensuring-rights-while-protecting-health-the-importance-of-using-a-human-rights-approach-in-implementing-public-health-responses-to-covid-19/>