



FAMILY COVID-19
INFORMATION PACKET

West York Area School District
Every Student Every Day



West York Area School District

Administrative Offices
1891 Loucks Road, Suite 100
York, PA 17408
717.792.2796

Dear Parents/Guardians,

The following pages contain information regarding some of the District's procedures and resources for COVID-19. This packet includes standardized procedures we will follow and sample letters that would be sent home, if your child exhibits symptoms of COVID-19 or has been in contact with a person who has tested positive. This will allow you to know what the procedures and communications will be ahead of time.

As a parent/guardian of a West York student, you play a critical role in mitigating the spread of COVID-19 within our schools. We ask you to carefully review the Parent/Student Expectations, and to review them with your child(ren).

Additionally, should your child(ren) be exposed to anyone outside of school who tests positive for COVID-19, please contact your school's nurse. Their numbers can be found on page 8.

We are confident that by working together, we can create a school environment where students feel safe and supported during this pandemic. Know that our school nurses are happy to answer your questions. Their contact information can be found on the Resource Page (page 8) for either telephone calls or, if you prefer, texts. Please be sure to include your full name and your child/ren's full name(s) when texting with our nurses.

Please feel free to contact us if you have any questions or concerns.

Sincerely,

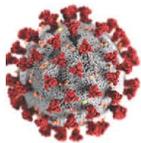
Traci L. Stauffer
Director of Special Education and Pupil Services

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COVID-19 FACT SHEET

What you should know about COVID-19 to protect yourself and others



Know about COVID-19

- Coronavirus (COVID-19) is an illness caused by a virus that can spread from person to person.
- The virus that causes COVID-19 is a new coronavirus that has spread throughout the world.
- COVID-19 symptoms can range from mild (or no symptoms) to severe illness.



Know how COVID-19 is spread

- You can become infected by coming into close contact (about 6 feet or two arm lengths) with a person who has COVID-19. COVID-19 is primarily spread from person to person.
- You can become infected from respiratory droplets when an infected person coughs, sneezes, or talks.
- You may also be able to get it by touching a surface or object that has the virus on it, and then by touching your mouth, nose, or eyes.



Protect yourself and others from COVID-19

- There is currently no vaccine to protect against COVID-19. The best way to protect yourself is to avoid being exposed to the virus that causes COVID-19.
- Stay home as much as possible and avoid close contact with others.
- Wear a cloth face covering that covers your nose and mouth in public settings.
- Clean and disinfect frequently touched surfaces.
- Wash your hands often with soap and water for at least 20 seconds, or use an alcohol-based hand sanitizer that contains at least 60% alcohol.



Practice social distancing

- Buy groceries and medicine, go to the doctor, and complete banking activities online when possible.
- If you must go in person, stay at least 6 feet away from others and disinfect items you must touch.
- Get deliveries and takeout, and limit in-person contact as much as possible.



Prevent the spread of COVID-19 if you are sick

- Stay home if you are sick, except to get medical care.
- Avoid public transportation, ride-sharing, or taxis.
- Separate yourself from other people and pets in your home.
- There is no specific treatment for COVID-19, but you can seek medical care to help relieve your symptoms.
- If you need medical attention, call ahead.



Know your risk for severe illness

- Everyone is at risk of getting COVID-19.
- Older adults and people of any age who have serious underlying medical conditions may be at higher risk for more severe illness.



CS 314937A 06/01/2020

cdc.gov/coronavirus

Parents/Students Expectations

Expectations for Parents/Guardians:

1. **Check your child before they get on the bus** to come to school for signs or symptoms that could potentially be from COVID-19. They are:
 - Fever or chills
 - Temperature of 100 or higher
 - Cough
 - Shortness of breath or difficulty breathing
 - Fatigue
 - Muscle or body aches
 - New loss of taste or smell
 - Secondary symptoms
 - Headache
 - Sore throat
 - Congestion or runny nose not due to allergies
 - Nausea, vomiting, diarrhea

If your child has any of the signs or symptoms above, **DO NOT SEND THEM TO SCHOOL**. Notify the school nurse or school office and call your family doctor.

2. **Be available during the school day for contact from your child's school.**

If your child exhibits symptoms while in school, the nurse will contact you. It is very important that you have alternate phone numbers/family members/caregivers available that we can reach. If you are not readily available for phone calls, please be sure to periodically check for any voice messages from the school throughout the day. Now more than ever, it is extremely important to update all changes, including: phone numbers, addresses, special situations and Emergency Contacts for your child.

If we are unable to contact you or anyone on your Emergency Contact list to pick your child up from school, there may be a referral made to **York County Children and Youth Services**. Additionally, your child may be sent to the hospital at parent/guardian expense. If either of these occur, then there would need to be a follow-up meeting with you, the nurse and an administrator to revise/update your contact information and emergency contacts.

3. **Follow the Governor's directives** on safety measures related to the spread of COVID-19.
4. **Review Student Expectations** (below) with your child.

Student Expectations:

1. **Self-report** any of the signs and symptoms. They are:
 - Fever or chills
 - Temperature of 100 or higher
 - Cough
 - Shortness of breath or difficulty breathing
 - Fatigue
 - Muscle or body aches
 - New loss of taste or smell
 - Secondary symptoms
 - Headache
 - Sore throat
 - Congestion or runny nose not due to allergies
 - Nausea, vomiting, diarrhea

2. **Follow all school and District safety precautions** outlined in our Health and Safety Plan.
 - A. Hand Washing - For 20 seconds or how long it takes to sing the “Happy Birthday” song twice
 - a. Should be done before and after eating
 - b. After using the restroom
 - c. Any time the student has dirty hands
 - B. Wear a Mask
 - a. On the bus
 - b. In all public areas
 - c. When social distancing is not possible
 - C. Social Distance
 - a. Must be 6 feet away from others
 - D. Follow Teacher/Staff Instructions
 - a. Procedure to safely share classroom materials
 - b. Requirement by some teachers to wear a mask in class even if social distancing
 - c. Procedure for movement in the halls
 - d. Procedure for eating lunch

Daily Morning Check-In and Screening Procedure Conducted by Teachers with Class

Staff, please notify the school nurse immediately if during the day you experience any of the symptoms on the screening form.

Within the first 15 minutes of the day, the teacher conducts a check-in and a Student COVID-19 Screening for each student. Elementary (K-5) forms will be completed by teachers and Secondary (6-12) will be completed by students. If any responses are “YES”, the student is to be sent to the school nurse with their individual form. The nurse will follow up with the Protocol for Nurses and upon the nurse’s assessment, the student will either return to class or be sent home. If the student returns to class, the nurse will note the outcome on the student’s Student COVID-19 Screening form for the teacher.

Any student arriving to school after the normal beginning of school will be screened by a designated person, prior to entering the school building.

Check-In:

The 15-minute morning teacher check-in is a time that the teacher devotes to emphasizing precautionary measures to avoid getting sick. It is also a time to check in on the emotional wellbeing of the students in regards to the pandemic. If teachers are in need of resources, they should reach out to the nurses, counselors and/or the social worker

Student COVID-19 Screening Form (attached) with symptoms below:

- Fever or chills
- Cough
- Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches
- New loss of taste or smell
 - Secondary symptoms if continue after redirection
 - Headache
 - Sore throat
 - Congestion or runny nose not due to allergies
 - Nausea, vomiting, diarrhea



Student COVID-19 Screening Form

Date: _____

Student's Name: _____

For the column "Close Contact" the answer should reflect the following question:

Within the past 14 days, have you had close contact with someone who is currently sick with suspected or confirmed COVID-19?

(Note: Close contact is defined as within 6 feet for more than 10 consecutive minutes, without PPE equipment).

Elementary (K-5) forms will be completed by teachers and Secondary (6-12) will be completed by students. If any responses are "YES", the student should be sent to the school nurse with their individual form. The nurse will follow up with the Protocol for Nurses and upon the nurse's assessment, the student will either return to class or be sent home. If the student returns to class, the nurse will note the outcome on this form for the teacher.

Fever/ Chills	Cough	Short- ness of Breath	Fatigue	Body Aches	Loss of Taste/ Smell	Headache	Sore Throat	Congestion/ Runny Nose	Nausea, Vomiting, Diarrhea	Close Contact

Nurse's Outcome:

Sample Letter for Student Sent Home with Symptoms of COVID-19

Dear Parents/Guardians,

We are concerned for the health and safety of your child. As a result of the school nurse COVID-19 assessment and evaluation, your child was sent home from school and will need to see a doctor for further evaluation. Your child will not be able to return to school until they have a note from the doctor clearing them to return to school. If your doctor recommends a COVID-19 test, please let us know and follow up with the results.

If your child returns to school without a doctor's note clearing them to return, your child will need to wait in the isolation area of the Health Suite and you will be contacted immediately to pick him/her up from school.

If you don't have a family doctor, here are two options for you:

- Schedule a [WellSpan Online Urgent Care](#) appointment
 - Use coupon code COVID19 for a free visit
- Go to [CVS online](#) to schedule an appointment at their Drive-Up Coronavirus Test Site
 - 820 Edgewood Road York, PA 17403 (Only for ages 18+)

If you have any other questions or concerns, please reach out to your child's school nurse. If texting one of our school nurses, **please be sure to include your full name and your child's full name.**

High School	Jenn Ferber	717-792-2796 ext. 2011	Cell 717-659-3409
Middle School	Cindy Rose Samantha Foltz	717-792-2796 ext. 3011	Cell 717-793-0399 Cell 717-887-3185
Trimmer	Linda Green	717-792-2796 ext. 5011	Cell 717-887-3154
Lincolnway	Melissa Franklin	717-792-2796 ext. 4011	Cell 717-779-5642
Wallace	Vicki Combs	717-792-2796 ext. 6011	Cell 717-887-3187

We appreciate that this is a difficult and worrisome time, and we would like to thank you for your continued support.

Sincerely,

(Building Principal or Designee)

Sample Letter: Student Had Possible Contact with Someone Experiencing Symptoms

Dear Parents/Guardians,

We are writing to let you know that, as a District, we have a level of concern for the health and safety of your student due to possible contact with a member(s) of the school community experiencing the symptoms of COVID-19. Only those parents/guardians of students who had possible contact are receiving this letter. We wanted to reassure you about the additional steps we are now taking to make sure our community remains safe.

Due to the significance of the situation, we are requiring that you keep your child home for a minimum of 3 days, pending guidance from the PA Department of Health, which could become a possible 14-day quarantine. This would include any afterschool activities. The District will communicate with you during this time the requirements for reentry.

These absences will be excused. Your teacher/school will follow up with you regarding your student's assignments for these days.

As a reminder: if you, your child or anyone you live with has the following symptoms, contact your doctor and school nurse immediately.

Group A 1 or more symptoms	Group B 2 or more symptoms
<ul style="list-style-type: none"> • Fever (100 or higher) • Cough • Shortness of breath • Difficulty breathing 	<ul style="list-style-type: none"> • Sore throat • Runny nose/congestion • Chills • New lack of smell or taste • Muscle pain • Nausea or Vomiting • Headache • Diarrhea

If you have any other questions or concerns, please get in touch with the school nurse. If texting one of our school nurses, **please be sure to include your full name and your child's full name.**

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We appreciate that this is a difficult and worrisome time, and we would like to thank everyone for their continued support.

Sincerely,

(Building Principal or Designee)

Sample Letter: Student Had Possible Contact with Confirmed Case of COVID-19

Dear Parents/Guardians,

We have been notified by the Pennsylvania Department of Health of a confirmed case of COVID-19. We are notifying you to let you know that your child has potentially been in direct or indirect contact with an individual that has been diagnosed with COVID-19.

We have been directed by the PA Department of Health to:

Possible scenarios

- Conduct deep cleaning and stay open and monitor.
- Temporarily close.
 - We will be closed for the duration of ____ days, reopening on _____
 - Which school functions are continuing and which are not (e.g. school trips, meetings, events, breakfast and after-school clubs, athletic activities, school meals, etc.)
 - Where parents and pupils can find work set for them, such as in a resource pack/website
 - Student expectations for attendance and completing work remotely
 - How parents and pupils will be able to contact the school and their teacher(s)

PA Dept. of Health will do contact tracing and will be in touch with anyone who has had close contact with the confirmed case to let them know what their next steps are.

As a reminder: if you, your child or anyone you live with has the following symptoms contact your doctor and notify the school nurse.

Group A 1 or more symptoms	Group B 2 or more symptoms
<ul style="list-style-type: none">• Fever (100 or higher)• Cough• Shortness of breath• Difficulty breathing	<ul style="list-style-type: none">• Sore throat• Runny nose/congestion• Chills• New lack of smell or taste• Muscle pain• Nausea or Vomiting• Headache• Diarrhea

If your child is sick, or someone in your household is sick, please report this to us by calling your school nurse or the school office.

If you have any other questions, please get in touch with the school. We appreciate that this is a difficult and worrisome time, and we would like to thank everyone for their continued support. We'll continue to keep you updated as the situation evolves.

Sincerely,

(Building Principal or Designee)

Resource Page/Nurse Phone Numbers

If you don't have a family doctor, you can schedule a [WellSpan Online Urgent Care](http://www.wellspan.org/wellspan-online-urgent-care/) appointment through their website (www.wellspan.org/wellspan-online-urgent-care/). Use coupon code COVID19 for a free visit.

OR

Go to [CVS online](http://www.cvs.com/minuteclinic/covid-19-testing) (www.cvs.com/minuteclinic/covid-19-testing) to schedule an appointment at their Drive-Up Coronavirus Test Site at 820 Edgewood Road York, PA 17403. (Only for ages 18+)

Nurse Phone Numbers

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