



Shrewsbury Public Schools COVID-19 Mitigation Protocols 2021-2022 School Year

Frequently Asked Questions

- **What is the overall approach to mitigating the risk of the transmission of the coronavirus in our schools?**
 - The School Committee recently unanimously approved a set of protocols for opening the school year. This document and the presentation of this information (video, slides) can be found [here](#). The overall goal is to provide the significant benefits of full-time, in-person school for all students while taking reasonable and pragmatic precautions to reduce the risk of a student or staff member who has the virus to transmit it in the school setting. All major national medical and public health groups concur that the social, emotional, mental health, and educational benefits of in-person school outweigh the limited risks of COVID-19 infections occurring in the school setting, and that these risks can be successfully mitigated through layers of sensible prevention methods.

- **Is Shrewsbury at an increased risk for the spread of the virus due to the Delta variant?**
 - It is well documented that the Delta variant of the virus that causes COVID-19 is more contagious. Case counts in the Shrewsbury community and in Central Massachusetts have increased over the course of the summer. It is also true that the likelihood of a possible in-school transmission increases when there are more cases in the community, because there will statistically be more cases of students or staff who are at school when unknowingly infected. It is important to note that compared to most other places across the country, COVID-19 risk is currently much lower in Massachusetts and Shrewsbury.
 - As of right now, Massachusetts has one of the lowest positivity rates in the entire U.S. (lowest or next to lowest in the nation over the past week as of August 27; see <https://coronavirus.jhu.edu/testing/testing-positivity>). As of the latest state report (August 26 as of this writing), Shrewsbury has a 2.19% positivity rate, lower than the state overall rate of 2.83%. The latest reported case rate in Shrewsbury is 12.3 per 100,000 people. For school-age students, across the state, the overall case numbers are much smaller than for the adult population, and hospitalization rates are dramatically lower: statewide 1.0 per 100,000 for ages 0-11, 1.2 per 100,000 for ages 12-17, and 2.0 per 100,000 for ages 18-19 (i.e., 0.001% to 0.002% – see the Massachusetts COVID-19 Daily Interactive Dashboard [here](#) for statistics).
 - Vaccination rates are also tied to the level of COVID-19 spread and the severity of effects in a community. The [vaccination rates in Shrewsbury](#) are relatively high compared to the rest of the state and much higher than many other parts of the country that are experiencing very high case and hospitalization rates.
 - For context, last school year among students and staff attending school in person we had 446 total cases of COVID-19, and only 9 of these (about 2%) were considered due to possible in-school transmission. The layering of prevention protocols worked well for our school district, including quarantining, as a number of the overall cases occurred in individuals who were already quarantined due to a close contact outside of school and were never in the school setting when infectious.
 - While the Delta variant is more contagious, medical and public health experts indicate that the risk of transmission in school when prevention

protocols are in place is such that in-school learning for all should be the priority, especially where community COVID-19 statistics are low.

- **What is the policy on masking inside schools?**

- The protocols unanimously approved by the Shrewsbury School Committee require universal masking regardless of vaccination status *indoors* in schools for the start of the school year. The following week after this policy was established, the state Board of Elementary & Secondary Education provided the state Commissioner of Elementary & Secondary Education with the authority to require a masking policy for all Massachusetts public schools, which he in turn issued this week. This state mandate is in effect at least through October 1; the district mandate will be reviewed at that time as well. While the state mandate applies to students age 5 and above, our district mandate applies to all students, including preschool students. Rare exceptions to the mask requirement may be made for documented medical reasons or due to a disability.

- **Do students need to mask when riding the bus?**

- Yes, it is a federal mandate that all who are riding buses must wear a mask.

- **Is masking required outdoors?**

- No. Based on medical and public health guidelines, masks are not required to be worn outdoors. Students and staff are not required to wear a mask when outside for recess, snack breaks, mask breaks, athletics, etc.

- **What prevention protocols will be followed for lunch periods?**

- Having all students in school requires our schools to use our cafeterias as we traditionally have, and having a more typical lunch experience will benefit our students socially. This is in line with [CDC recommendations for schools](#). As part of our layered prevention strategies, ventilation systems will be operating at full capacity and windows will be open. Students will sanitize their hands, wear their masks while entering the cafeteria and when getting food, remove masks when eating or drinking, and then replace masks when finished eating and drinking. Indoor eating time during the lunch period will be structured to minimize contact time

when eating. Per CDC guidance, meal service will also return to the normal cafeteria style vs. “grab and go” meals (all meals are at no cost to all students per ongoing federal program).

- **How far apart will students be when eating at lunch?**

- The distance between students eating will vary depending on the seating arrangement and number of students in a particular lunch period, and in many cases will be closer than three feet when seated and eating. Based on case and positivity rates in the Shrewsbury community overall and particularly among school-age children, it is important to note that the risk of transmission remains very low, although not as low as it would be with slightly greater distance. The layered prevention protocols noted above, along with an emphasis on staying home when sick, strict quarantining, and surveillance testing, are all intended to balance the risk of a potential transmission for the very short time students will be unmasked and eating lunch with the benefits of providing in-person school for all students and more normalized socialization. As was the case last year, the *total* number of students in the cafeteria is not a factor in what would be considered a “close contact.” For contact tracing purposes, lunch seating charts will be maintained at the elementary schools and the middle schools; at the high school, students will choose seats and will identify whom they sat with if and when tracing is necessary.

- **What happens when a student or staff person tests positive for COVID (quarantine and contact tracing)?**

- When a positive case is identified, the positive individual will be required to follow public health guidelines for isolation. School nurses will complete contact tracing to determine and notify any close contacts (anyone who was indoors within 6 feet of the positive individual for 15 minutes or more in 1 school day during their infectious period).
- The infectious period is 48 hours before the onset of symptoms or the positive test, whichever comes first.
- Per Department of Elementary and Secondary Education (DESE) and Massachusetts Department of Public Health (MDPH) protocols, the following **exemptions** from quarantine are permitted:
 - Individuals who are fully vaccinated and have no COVID symptoms

- Individuals in the classroom who are masked and 3 feet or more away from the positive case
 - Individuals who are masked and on the school bus with the windows open
 - Individuals who have tested positive for COVID within the past 90 days
- Individuals who are determined to be close contacts and do not meet one of the exemptions above, will have the following options:
 - Test and Stay - Individuals who are close contacts to a case at school can opt to have a nasal swab rapid antigen (BinaxNOW) test at school daily for 7 days from the date of exposure. Some of these days could be non-school days (i.e., weekends or holidays). Testing is only required on school days, unless the individual participates in school-sponsored sports or extracurricular activities that fall on a non-school day. If the 7th day falls over a non- school day, the individual must be tested on the morning of their return to school. On the 8th day, a student will exit the Test and Stay protocol, assuming all tests were negative, and they remain asymptomatic. *This program will begin when it is available through the state funded testing program, until that time quarantine protocols will be followed.*
 - Those who choose not to “test and stay” will follow MDPH guidelines for quarantine. (Return on day 8 if tested on/after day 5 and negative with no symptoms OR return on day 11 if not tested and no symptoms.)
 - Anyone (vaccinated or unvaccinated) who is identified as a close contact and has any COVID symptoms must follow MDPH guidelines and quarantine for 14 days from the date of exposure.
- **How will students who are home due to an illness or quarantine keep up with their schoolwork?**
 - As has always been the case when a student is experiencing any illness, once the student has recovered the student’s teacher(s) will work with them and their family to provide a plan to make up for missed academic work.

- If a student is home due to quarantine but not ill, teachers will work with the student and family to provide access to academic work to be completed at home in order to help the student keep up during the absence. Depending on the age of the student, this will take different forms and utilize different tools for access to assignments (such as SeeSaw at the elementary level or Schoology at the secondary level). When the student returns to school, the teacher(s) will provide a plan to make up any required work that was not able to be completed during the quarantine period.

- **Will the district be offering surveillance testing again this year?**
 - Yes. The district plans to again provide pooled surveillance testing for students and staff in order to identify asymptomatic infections and to help monitor the potential presence of COVID-19 among the school population. Last year this created peace of mind for many. Participation in this testing is optional in all cases but is encouraged, especially for non-vaccinated individuals. The district plans to utilize the free testing program being provided by DESE and is awaiting details from the state before proceeding.
 - Shrewsbury has been approved to participate in the [COVID-19 testing program](#) provided by the Department of Elementary and Secondary Education (DESE) and the Executive Office of Health and Human Services (EOHHS). Routine COVID safety checks and Test and Stay for close contacts are part of this program. More information will be provided when it is available. Consent to test will be required for participation.

- **Will the district be following cleaning protocols?**
 - The district is working with the Public Buildings Division to continue to ensure appropriate cleaning of school buildings. The district will follow CDC guidance for one routine daily cleaning. Cleaning supplies for additional cleaning will be available for classrooms, but multiple cleanings throughout the day is not necessary or recommended by CDC. If there is a positive case, spaces that the individual has occupied will undergo a thorough cleaning. Additional personnel will be assigned by the Public Buildings Department to ensure lunch tables are cleaned in between lunch seatings.

- **Will after school activities be allowed?**
 - The Extended School Care program in Grades K-6 will return.
 - Other after school activities sponsored by the schools, PTOs, etc. will be held with the same district mitigation protocols being followed; principals must give approval in advance for activities to be scheduled and will make determinations on a case-by-case basis.

- **Are visitors and volunteers allowed in buildings?**
 - Yes. All visitors and volunteers will be required to follow the same protocols and mitigation measures that students and staff are practicing. Visitors and volunteers will be required to sign in and will be included in contact tracing when necessary. All individuals should do a self-check for COVID-19 symptoms before arriving at a school building, and should not visit if experiencing any symptoms. Given that this is an unusual transition year, it is likely teachers will establish classroom routines before inviting classroom volunteers to come in – patience is appreciated.

- **When doing a daily self-check, what symptoms are now considered COVID-19 symptoms?**
 - COVID-19 symptoms list:
 - **Fever (100.0° Fahrenheit or higher), chills, or shaking chills**
 - **Difficulty breathing or shortness of breath**
 - **New loss of taste or smell**
 - **Muscle aches or body aches**
 - Cough (not due to other known cause, such as chronic cough)
 - Sore throat, *when in combination with other symptoms*
 - Nausea, vomiting, or diarrhea *when in combination with other symptoms*
 - Headache *when in combination with other symptoms*
 - Fatigue, *when in combination with other symptoms*
 - Nasal congestion or runny nose (not due to other known causes, such as allergies) *when in combination with other symptoms*

- The symptoms in **bold type** are considered significant on their own. Anyone experiencing these symptoms should stay home and contact their health care provider to request COVID-19 testing and follow up.
- Other symptoms are considered significant when in combination, for example a sore throat on its own is less worrisome than a sore throat combined with a headache or runny nose. Anyone experiencing a combination of 2 or more of these symptoms should stay home and contact their provider for testing and follow up. Anyone who develops these symptoms while in school will be seen by the school nurse for evaluation and next steps will be determined.