

# Haycock ES

# Return to School

# Town Hall



# In-Person Instruction Models

ES Concurrent Instructional Schedule				
	Tuesday	Wednesday	Thursday	Friday
Group A	In-School	In-School	Online	Online
Group B	Online	Online	In-School	In-School
Group C (full time online)	Online	Online	Online	Online

The Concurrent model provides 4 days of teacher-supported instruction keeps Equity at the center of all that we say and do.

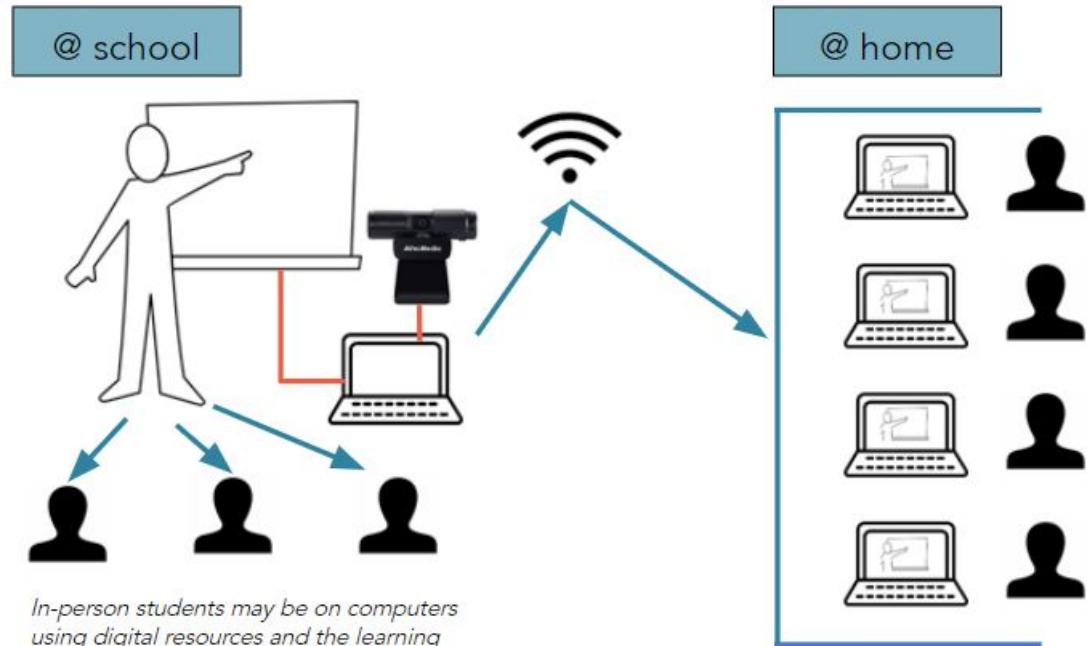
The Hybrid model provides for direct teacher access two days a week with some students.

	Monday
All Students	Asynchronous work
Teachers	collaboration and planning

ES Hybrid Instructional Schedule				
	Tuesday	Wednesday	Thursday	Friday
Group A	In-School	In-School	Asynchronous	Asynchronous
Group B	Asynchronous	Asynchronous	In-School	In-School
Group C (full time online)	Online	Online	Online	Online

# What Might Concurrent Look Like.....

- [Concurrent Model- 4th](#)
- [Concurrent Model- K](#)
- [Concurrent- Elementary](#)
- [Concurrent- Best Practices](#)



*In-person students may be on computers using digital resources and the learning management system, but will not be signed into BbCU or Meet.*

*External camera or teacher laptop camera may be used.*

# Groups 5 & 6

## Group 5 (Kindergarten)

- **Return: Tuesday, November 17**
- Asynchronous Planning, Room Set up and PD days:
  - November 9, 12 and 13 (Asynchronous work provided)
  - Attendance taken on these days

## Group 6 (First and Second Graders)

- **Return: Tuesday, December 1**
- Asynchronous Planning, Room Set up and PD Days:
  - November 16, 20, 23 and 24 (Asynchronous work planned)
  - Attendance taken on these days



What might it look like?

## Sample Schedule

Time	Activity	In Person/Concurrent Cohort	Full Time Online Cohort
9:10 - 9:20	Logging On	Unpack for the day, handwashing	Log on to Google Meet/BBCU
9:20 - 9:45	Morning Meeting	Community Building of In person and at home students	Community Building
9:45 - 11:20	Language Arts	Whole class focus lesson followed by small group instruction and independent activities.	
11:25 - 11:45	Recess	Recess	Screentime Break
11:50 - 12:25	Lunch	Transition/Handwashing/Lunch	Lunch
12:25 - 12:55	Student Choice	Student Choice Time	Student/Family Choice Activity
1:00 - 1:30	Specials	Participate in Art, Music, PE, or FLES	
1:30- 1:35	Break	Bathroom/Handwashing Break	Screentime Break
1:35 - 2:35	Math	Whole class focus lesson followed by small group instruction and independent activities.	
2:35 - 2:55	Recess	Recess/Handwashing	Screentime Break
2:55- 3:25	Science/Social Studies	Science/Social Studies	
3:25 - 3:45	Cougar Time/Choice Activities	Cougar Time/Choice Activities	Asynchronous Work Time
3:45 - 4:05	Pack Up/Dismissal	Pack Up for the Day/Dismissal	

# Schedule Changes

- ASYNCHRONOUS days for room set-up and planning
- Students will login into their homeroom for morning meeting
- Students will no longer have small groups on Mondays
- Related service providers may see students on Mondays
- Teachers may have IEPs or conference with parents on Mondays
- Tues./Wed..(A-L) Thurs./Fri. (M-Z)
  - • • •
  - • • •

## **Bell Schedule:**

- 9:20 AM - 4:05 PM
- This is subject to change when all students interested participate possibly in January, 2021

# What We Know

**Classroom A-** 20 in person/ 1 online

**Classroom B-** 7 in person/ 14 online

**Classroom C-** 4 in person/ 17 online

**Classroom D-** 18 in person/ 2 online

• To make an all virtual class work, it will entail some teacher switches.

• Possibly some creative ways to support students virtually - need further data to give specifics

• Additional updates will be remitted to parents

# Lunch / Recess

## Lunch:

- Lunch will be held in the classroom, outside and/or spread out in the cafeteria.
- Students will be provided breakfast and lunch or can bring lunch from home
- In person students should bring in a towel to sit on for outdoor activities/lunch

## Recess:

- Recess breaks outside during the day
- Unable to use the playground equipment
- Working with PE teachers to develop socially distanced activities.

# Safety Protocols

## COVID Avoidance

- Mask wearing
- Handwashing
- Touch point cleaning
- Limited physical contact
- Temperature Checks (<100.4)



## COVID Concern

- Isolation Room
- Predetermined/designated location
- Parents will be called
- Student will remain and be monitored in area until parent arrives
- Doctor's note required to return



# Details on Rooms and Hallways

**Room Setup** - 6 foot spacing, furniture removal (Begin with K; 1 / 2; 3-6)  
No rugs or cloth items (ex. bean bags)

**Room Filtration** - Room air is cycled to remove classroom air and bring in fresh air from outside at a rate that is higher than full capacity of room;  
Bathrooms, air moves straight outside building.

**Handwashing/Sanitization** - Frequent, will work to add more sanitization stations. Possibility of adding portable hand wash station to cafeteria.

**6 Foot separation in halls** - Markers in main areas to help support instruction and explicit instruction for students. One direction movement in hallways

# Room Setup

- Students must sit all facing one direction, 6 feet apart from middle of desk.
- Roughly 12 - 14 desks per classroom or combination of tables/desks
- No carpets or limited carpets
- No communal supplies
- Students keep supplies in backpack/gallon bag to take to and from school
- laptops to and from school-need to be fully charged for school
- Desks cleaned at end of each day



# Health Plan/Protocols

- Temperature Taken of All Students Prior to Boarding Bus
- Parents Accompany Students to Bus Stop
- Students with a Fever Do Not Board the Bus
- One per seat on the bus
- Temperature Checks throughout the day as needed
- Walkers/K&R - Temperature Check before entering

## During School Day

- If Temperature During School Day 100.4 or higher
- Isolation Room - Secured for Student Protection
- Parents Called and Requested to Immediately Pick Up
- Forms to Return to School Required

# SICK STUDENT NOTIFICATION

Student Name: \_\_\_\_\_

Date: \_\_\_\_\_

School: \_\_\_\_\_

Time: \_\_\_\_\_ AM/PM

## Parent/Guardian:

Your student presented to the health room today with the following new and unexplained symptoms:

Fever/chills       Cough       Shortness of breath       New Loss of taste/smell  
Temp: \_\_\_\_\_

Sore throat       Fatigue       Muscle aches       Runny nose/congestion  
 Stomachache       Diarrhea       Nausea/Vomiting       Headaches  
 Other \_\_\_\_\_

*Due to COVID-19 in the community, evaluation by a healthcare provider is recommended for all sick children. Please take this form to your healthcare provider.*

School Public Health Nurse/Aide Observation:

Comments: \_\_\_\_\_

Signature: \_\_\_\_\_ RN / Health Aide

## Follow the Return to School Policy if your child was sent home with any of the above symptoms:

### IF NO KNOWN EXPOSURE TO COVID-19 AND:

- No COVID-19 test or Positive COVID-19 test – Stay home until 10 days from onset of symptoms, no fever for 24 hours without fever-reducing medication AND symptoms are improving.
- COVID-19 Test is negative – Stay home until no fever for 24 hours without fever-reducing medication AND symptoms are improving.
- Alternate diagnosis by a healthcare provider that explains symptoms – stay home until no fever for 24 hours without fever-reducing medication AND symptoms are improving or longer per healthcare provider's instructions.

### IF KNOWN EXPOSURE TO COVID-19:

- No Covid-19 test or negative test: Stay home for 14 days from date of last exposure, no fever for 24 hours without fever-reducing medication AND symptoms are improving.
- COVID-19 test is positive: Stay home until 10 days from onset of symptoms, no fever for 24 hours without fever-reducing medication AND symptoms are improving.

## Permission to Return to School/Child Care

Patient Name: \_\_\_\_\_

Date of Visit: \_\_\_\_\_

Date of Most Recent Exposure (if applicable): \_\_\_\_\_

Date of Test (if applicable): \_\_\_\_\_

Date of First Symptoms (if applicable): \_\_\_\_\_

The following return-to-school guidance aligns with the recommendations of the Centers for Disease Control & Prevention and the Virginia Department of Health and reflects the best possible clinical assessment of a healthcare provider at the time of service and any applicable test results. This guidance is not a guarantee of any individual's current health status.

Check one:

- Patient tested POSITIVE for COVID-19 and experienced symptoms. Patient may return to school 10 days after symptoms started, as long as patient has been free of fever for at least 24 hours\* and symptoms have improved.
- Patient tested POSITIVE for COVID-19 and has NOT experienced symptoms. Patient can return to school 10 days after the test was taken.
- Patient was evaluated according to VDH guidelines for community incidence level of COVID-19. A non-COVID source of symptoms was identified so TESTING WAS NOT INDICATED. Patient can return to school when fever-free for 24 hours\* and symptoms have improved.
- Patient experienced symptoms that may be consistent with COVID-19, but was NOT TESTED. Patient may return to school 10 days after the start of symptoms as long as patient has been free of fever for at least 24 hours\* and symptoms have improved.
- Patient tested NEGATIVE or was NOT TESTED, but has been in close contact with a person known to have COVID-19. Patient may return to school 14 days after last contact with the person with COVID-19 as long as no symptoms develop.
- Patient tested NEGATIVE or was NOT TESTED but is a household contact of a person known to have COVID-19 and is unable to fully isolate from that person. Patient may return to school 14 days after the person with COVID-19 was able to end isolation.
- Patient experienced symptoms that could be related to COVID-19, but tested NEGATIVE and does not have any known exposures or ill contacts. Patient does not require quarantine. Patient may return to school when free of fever for 24 hours\* and symptoms have improved.

The patient/caregiver was notified of the test results and has been instructed to follow the guidelines above with regard to school attendance.

\* without using fever-reducing medication

The earliest date this patient may return to school is \_\_\_\_\_ . This statement is valid based on current relevant information but may change based on new symptoms, exposures, or results. The patient's family has been instructed to notify the office for any changes.

Signature: \_\_\_\_\_

MD/DO/NP/PA/RN/LPN

Phone #: \_\_\_\_\_

Name: \_\_\_\_\_

# Health



<https://www.fcps.edu/return-school/student-health-and-safety-guidance-document>

- Return to School Webpage:  
<https://www.fcps.edu/returntoschool>
- Return to School FAQs:  
<https://www.fcps.edu/return-school/return-school-questions-and-answers>
- [Student Health and Guidance Document](#)

Deadline for Preference Change:  
10/30 at 11:00pm

Parent Preference Change Request

## Follow Up Items

- Digital Consent - Parent Approval Requested
- ParentVue - Please go Paperless
- Join the PTA One and Done!
- Early release on Friday, 10/30 at 1:30
- For those returning to school- completion of the Parental Guardian Health Screening Commitment Form
- Playground closed to community Tuesday-Friday during school hours
- Book Character Dress Up Day - 10/30

