

COVID-19 Health and Safety Summary of Updated Understandings, Policies and Procedures

Sources of Information & Knowledge

The John Crosland School is basing its preparations and guidelines for reopening and operating on the information and guidance currently available from the Centers for Disease Control¹ (CDC), The World Health Organization² (WHO), NC Dept. of Health and Human Services³ and other health experts. In addition, the School is in communication with the [National Association of Independent Schools](#) (NAIS), [The Southern Association of Independent Schools](#) (SAIS), international, national, and regional schools and districts.

The Board of Trustees has expanded and now two new Directors will also serve on our Safety subcommittee and the Return to School Task Force to advise and support the school's administrative team. This committee includes leaders from the following industries: • Safety and Security

- Finance
- Education
- Human Resources
- Technology
- Public Health

Current Understanding:

Based on the most current information available, the school is making plans based on the following:

- COVID-19 is an illness caused by a virus that can spread from person to person⁴ • COVID-19 is often spread from person to person through close contact and maintaining social distancing can greatly mitigate its spread⁵
- Until a vaccine is widely available, COVID-19 will be a concern for public health⁶

¹ "Schools - CDC." <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/index.html> Accessed 11 Nov. 2020.

² "Coronavirus disease 2019 - World Health" Accessed May 3, 2020. <https://www.who.int/emergencies/diseases/novel-coronavirus-2019>.

³ "Strong Schools NC" 4 December 2020, <https://files.nc.gov/covid/documents/guidance/Strong-Schools-NC-Public-Health-Toolkit.pdf>

⁴ "Coronavirus disease 2019 (COVID-19) Factsheet - CDC." Accessed May 3, 2020. <https://www.cdc.gov/coronavirus/2019-ncov/downloads/2019-ncov-factsheet.pdf>.⁵

"Social Distancing, Quarantine, and Isolation - CDC." Accessed May 3, 2020. <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/social-distancing.html>.⁶ "COVID-19 (coronavirus) vaccine: Get the facts - Mayo Clinic." Accessed May 3, 2020. <https://www.mayoclinic.org/diseases-conditions/coronavirus/in-depth/coronavirus-vaccine/art-20484859>.

Planning Assumptions:

The following are the high level assumptions the school is currently using to inform its planning for health and safety, teaching & learning, and operations. These assumptions are based on the best information to date⁷ and can and will be updated. Specifics on how these assumptions might look in application can be found in the school's [JCS 4 Phase Plan](#).

1. Social Distancing is necessary and appropriate to mitigate the risk of contracting and or spreading the virus and should be practiced whenever feasible.
2. Small, consistent, and controlled groups are necessary and appropriate to mitigate the risk of contracting and or spreading the virus - i.e., classes stay together and minimize their contact with other students and adults. It will also assist in contact tracing in the event a member of our community becomes infected with the virus.
3. Visitors and guests on campus will be highly limited and controlled.
4. Common spaces will be repurposed to limit student cross-over and interactions. 5. Sharing of physical materials, resources, supplies, etc. is highly discouraged whenever possible.
6. Health screenings of all employees and students will be necessary.
7. Masks for students, teachers, staff and guests are required when feasible. 8. Increased, frequent and campus wide cleaning and disinfecting practices and policies will be necessary along with education and enforcement of personal hygiene best practices.
9. Testing for COVID-19 is readily accessible and results from a CDC-approved lab are accepted as accurate.
10. Employees and students who test positive or presumed positive for COVID-19 will require a quarantine⁸ period and this may extend to employees and students who are symptomatic of COVID-19 or have exposure to someone who is positive or symptomatic for COVID-19.

Education on all of these assumptions and their corresponding policies and procedures will be required for all employees and will be shared with families.

⁷ "CDC Activities and Initiatives Supporting the COVID-19 ..." 14 May. 2020, https://www.cdc.gov/coronavirus/2019-ncov/downloads/php/CDC-Activities-Initiatives-for-COVID-19-Response.pdf?mod=article_inline. Accessed 21 May. 2020.

⁸ When and How to Quarantine 7 Oct 2020 <https://files.nc.gov/covid/documents/guidance/When-to-Quarantine-English.pdf>

Health Screenings

In line with NC Dept. of Education and Health and Human Resources⁹ and CDC guidelines¹⁰, the School will require a Health Screening of all students, employees and visitors prior to entering the building. This screening may include answering questions like the following:

- Have you or anyone in your household experienced any of the following symptoms in the last 48 hours: Fever, chills, shortness of breath or difficulty breathing, new cough or new loss of taste or smell?
- Have you or any member of your household been exposed to an individual with a known case of Coronavirus?
- Have you traveled outside of the US in the past 14 days?

In addition, student's staff and visitors will complete a temperature check before entering the building to confirm they do not have a fever of 100.4 degrees Fahrenheit or more.

For Student screening, we will not record any information unless it is notable. We will still record visitor info as they are guests on campus and employee information. Screenings will be conducted in a nondiscriminatory manner and results will remain confidential with only essential members of the administration knowing if any student or employee screens positive. Any information from screenings that will be kept, will be logged electronically.

In the event that an employee or student screens positive, they will report to a designated, controlled waiting area until arrangement can be made for the employee or student to leave the school.

Symptoms of Covid-19

The School subscribes to the CDC's list of COVID-19 symptoms.¹¹ The CDC states: Symptoms may appear 2-10 days after exposure to the virus. People with these symptoms may have COVID-19:

- Fever or chills
- Cough
- Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches
- Diarrhea
- Headache
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting

⁹ "Strong Schools NC" 4 December 2020, <https://files.nc.gov/covid/documents/guidance/Strong-Schools-NC-Public-Health-Toolkit.pdf>

¹⁰ "CDC Activities and Initiatives Supporting the COVID-19" 14 May. 2020, https://www.cdc.gov/coronavirus/2019-ncov/downloads/php/CDC-Activities-Initiatives-for-COVID-19-Response.pdf?mod=article_inline. Accessed 21 May. 2020.

¹¹ "Symptoms of Coronavirus | CDC." 13 May. 2020, <https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html>. Accessed 8 Jun. 2020.

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Updated 1/6/2021

Close Contact¹²

Definition

Someone who was within 6 feet of an infected person for a cumulative total of 15 minutes or more over a 24-hour period* starting from 2 days before illness onset (or, for asymptomatic patients, 2 days prior to test specimen collection) until the time the patient is isolated.

** Individual exposures added together over a 24-hour period (e.g., three 5-minute exposures for a total of 15 minutes). Data are limited, making it difficult to precisely define "close contact;" however, 15 cumulative minutes of exposure at a distance of 6 feet or less can be used as an operational definition for contact investigation. Factors to consider when defining close contact include proximity (closer distance likely increases exposure risk), the duration of exposure (longer exposure time likely increases exposure risk), whether the infected individual has symptoms (the period around onset of symptoms is associated with the highest levels of viral shedding), if the infected person was likely to generate respiratory aerosols (e.g., was coughing, singing, shouting), and other environmental factors (crowding, adequacy of ventilation, whether exposure was indoors or outdoors). Because the general public has not received training on proper selection and use of respiratory PPE, such as an N95, the determination of close contact should generally be made irrespective of whether the contact was wearing respiratory PPE. At this time, differential determination of close contact for those using fabric face coverings is not recommended.*

Testing for COVID-19

Types of Covid-19 Tests

There are two main types of viral tests that could be used to diagnose someone with COVID-19 (diagnostic tests):

- **Polymerase chain reaction (PCR)/molecular** tests detect the virus's genetic material. This test is the "gold standard" for detecting the virus that causes COVID-19 and typically requires a sample being sent to a laboratory. For this test, it is most common that samples are collected through a nasal or throat swab.
- **Rapid antigen** tests, which detect protein on the surface of the virus, are less sensitive

and less specific than the PCR/molecular test. This means they miss some infections that would be detected by a PCR/molecular test, and they may be positive in someone who does not actually have the infection. In addition, more is known about their accuracy in people with symptoms than in people without symptoms. However, they can be performed without having to send the sample to a laboratory and results come back quickly (e.g., approximately 15 minutes). For this test, a sample may be collected through a nasal swab.

- Rapid antigen tests are usually followed up and verified with PCR/molecular testing. For a diagram explaining more on the use, interpretation and expected response steps for COVID-19 antigen tests.¹³,

¹² "Public Health Guidance for Community-Related Exposure | CDC." 21 Oct. 2020, <https://www.cdc.gov/coronavirus/2019-ncov/php/public-health-recommendations.html>. Accessed 9 Jun. 2020.

¹³ <https://files.nc.gov/covid/documents/guidance/healthcare/NCDHHS-Antigen-Flowchart.pdf>

Returning to School from Isolation or Stay-At-Home Order

This summary chart is to help support and identify individuals returning from isolation or stay-at-home order also called exclusion. Note: A negative COVID-19 test is **not** required for an individual to return from exclusion.

Exclusion Category	Scenario	Criteria to Return to School
Diagnosis	Person has tested positive with an antigen test but does not have symptoms of COVID-19.	If the person takes a repeat PCR/molecular test performed at a laboratory within 24-48 hours of their positive antigen test, and that PCR/molecular test is negative: the positive antigen test can be considered a false positive and the person can immediately return to school; OR If the person does not take a repeat PCR/molecular test, or takes one within 24 hour-48 hours and it is positive: The person can return to school when they complete 10 days of isolation. Isolation should begin starting from the date of their first positive test.
Diagnosis	Person has tested positive with a PCR/molecular test but the person does not have symptoms.	Person can return to school when they complete 10 days of isolation. Isolation should begin starting from the date of their first positive test.
Symptoms	Person has symptoms of COVID-19 and has tested positive with an antigen test or PCR/molecular test .	Person can return to school when <ul style="list-style-type: none"> • The person completes 10 days of isolation. Isolation should begin starting from their first day of symptoms; AND • It has been at least 24 hours since the person had a fever (without using fever reducing medicine); AND • Other symptoms of COVID-19 are improving

Symptoms	Person has symptoms of COVID-19 but has not been tested for COVID-19 nor has visited a health care provider. Therefore, the person who has symptoms is presumed positive.	Person can return to school when <ul style="list-style-type: none"> • The person completes 10 days of isolation. Isolation should begin starting from their first day of symptoms; AND • It has been at least 24 hours since the person had a fever (without using fever reducing medicine): AND • Other symptoms of COVID-19 are improving
Symptoms	Person has symptoms of COVID-19 but has visited a health care provider and received an alternative diagnosis that would explain the symptoms of fever, chills, shortness of breath or difficulty breathing, new cough or new loss of taste or smell, and the health care provider has determined COVID-19 testing is not needed.	Person can return to school when <ul style="list-style-type: none"> • It has been at least 24 hours since the person had a fever (without using fever reducing medicine): AND • They have felt well for at least 24 hours. Note: The health care provider is not required to detail the specifics of the alternate diagnosis.
Exposure	Person has been in close contact with someone with a confirmed case of COVID-19.	Person can return to school after completing up to 14 days of quarantine. The 14 days of quarantine begin after the last known close contact with the COVID-19 positive individual. Alternatively, the person may complete a 10-day quarantine if the person is not presenting symptoms of COVID-19 (e.g. loss of taste and/or smell) after daily monitoring. If quarantine is discontinued before day 14, the individual must continue to monitor symptoms and strictly adhere to all non-pharmaceutical interventions (e.g. wear a mask, practice social distancing) through 14 days after the date of last exposure.

Household Member , Exposure	Person is a household member (e.g. a sibling) of someone with a confirmed case of COVID-19.	Person can return to school after completing 14 days of quarantine, 10 days of quarantine if no symptoms are present in daily symptom reporting. Quarantine begins at the end of a 10-day isolation of the person with COVID-19. If quarantine is discontinued before day 14, the individual must continue to monitor symptoms and strictly adhere to all non-pharmaceutical interventions (e.g. wear a mask, practice social distancing) through 14 days after the date of last exposure.
Household Member , Exposure	Person is a household member (e.g. a sibling) of someone who has symptoms of COVID-19 but who has not been tested for COVID-19, nor has visited a health care provider. Therefore, the person who has symptoms is presumed positive.	Person can return to school after completing 14 days of quarantine, 10 days of quarantine if no symptoms are present in daily symptom reporting. Since the presumption of COVID-19 is not ruled out through an alternative diagnosis, quarantine begins at the end of a 10-day isolation of the person with COVID-19 since that person may remain infectious for up to 10 days after symptom onset. If quarantine is discontinued before day 14, the individual must continue to monitor symptoms and strictly adhere to all non-pharmaceutical interventions (e.g. wear a mask, practice social distancing) through 14 days after the date of last exposure.

Household Member Exposure	Person is a household member (e.g. a sibling) of someone who has symptoms of COVID-19 but has visited a health care provider and received an alternative diagnosis that would explain the symptoms of fever, chills, shortness of breath or difficulty breathing, new cough or new loss of taste or smell, and the health care provider has determined COVID-19 testing is not needed.	Persons can return to school when household members receives their alternate diagnosis. Note: The health care provider is not required to detail the specifics of the alternate diagnosis.
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This reference guide was adopted and modified from the “Suspected, Presumptive, or Confirmed Cases of COVID-19 (K-12) Interim Guide.*
Published 6/8/2020; Updated 12/4/2020¹⁴

In addition to the requirements as stated above, any student or employee who is required to be off campus due to a COVID-19 related concern must consult and receive clearance from the designated school employee before being allowed back on campus.

Student or Employee becomes ill while on Campus

Evaluation and Care

In the event that a **student** becomes ill while on campus, the following steps should be taken while taking great care to ensure the confidentiality of the student’s suspected medical condition:

- If two teachers are present, one teacher should notify the designated employee via the School’s internal phone system and the other should escort the child to the isolation room.

¹⁴ Reference Guide for Suspected, Presumptive, or Confirmed Cases of Covid-19 (K-12) 5 Nov 2020
https://files.nc.gov/covid/PHT-ScreeningReferenceGuide_6.30.pdf

- If only one teacher is present, he or she should immediately phone their Director who will then escort the child to the isolation room. The adult escort should immediately wash their hands before returning to the classroom. If the Director is not available or does not answer, the teacher should call the front desk for assistance.
- If the student is found to be symptomatic for COVID-19, the front desk receptionist will contact the student’s emergency contact for immediate pick-up. While waiting the student will be monitored from a distance.
- The School will then implement Cleaning and Disinfecting and Communication and Contact Tracing guidelines in accordance with CDC guidelines and Mecklenburg County protocols.

In the event that an **employee** becomes ill while on campus, the following steps should be taken:

- If the employee is exhibiting symptoms of COVID-19 they should consult with their school Director using the school’s internal phone system.

- If the employee is symptomatic and if they are well enough, he or she follow protocol and leave campus. They are then encouraged to consult with their health care provider. The School will then implement Cleaning and Disinfecting and Communication and Contact Tracing guidelines in accordance with CDC guidelines and Mecklenburg County protocols.

Students and employees who become ill on campus with symptoms of COVID-19 must adhere to the **Returning to School from Isolation or Stay-At-Home Order** guidelines (see above) before returning to campus.

Disinfecting and Cleaning after Student or Employee becomes ill while on Campus If an employee or student becomes ill with COVID-19 symptoms while on campus, after he or she is separated from others and receiving appropriate medical attention, the School will do the following:

- If a student or teacher became ill, his or her class will immediately wash their hands and move to another appropriate learning space for the remainder of the school day. ● The School would then follow CDC guidelines for Cleaning and Disinfection of Community Facilities¹⁵.
- If a staff member became ill, his or her work space would be closed and the School would then follow CDC guidelines for Cleaning and Disinfection of Community Facilities.¹⁶

¹⁵ "Cleaning and Disinfection for Community Facilities - CDC." 27 May. 2020, <https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/cleaning-disinfection.html>. Accessed 9 Jun. 2020.

¹⁶ "Cleaning and Disinfection for Community Facilities - CDC." 27 May. 2020, <https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/cleaning-disinfection.html>. Accessed 9 Jun. 2020.

Communicating and Contact Tracing after Student or Employee becomes Ill while on Campus

After an employee or student is confirmed to have exhibited COVID-19 symptoms while on campus or tested positive while still coming to campus, the School will do the following: ● If a student or teacher tests positive, the School will inform the families that an unnamed individual in the school tested positive for COVID-19.

- In most cases, **you will only be notified if the contract tracers determined you were in close contact (more than 15 minutes of contact within 6-foot distance) with an individual who tested positive.** Simply working or being in the same building/classroom with someone who has symptoms or recently had an exposure or tested positive does not put you at higher risk for getting the virus.
- Parents and guardians can pick up their child at that time; the students and employee(s) will remain in a designated area away from other students until they can be picked up. If the School receives notification from a physician that the child's symptoms are not

indicative of COVID-19, the class will return to campus the following day as planned.

- If the School does not receive this verification, the class will follow **Returning to Campus for Students and Employees after Exposure to Suspected or Positive COVID-19 Diagnosed Person(s)** guidelines and begin Continuous Learning while Off Campus until the guidelines are satisfied or the School receives verification from a physician that the original symptoms are not indicative of COVID-19.
- If a staff member were symptomatic or tested positive, the School will identify any individuals they might have exposed and those individuals will immediately leave campus and follow the **Returning to Campus for Students and Employees after Exposure to Suspected or Positive COVID-19 Diagnosed Person(s)** guidelines until the guidelines are satisfied or the School receives verification from a physician that the original symptoms are not indicative of COVID-19.

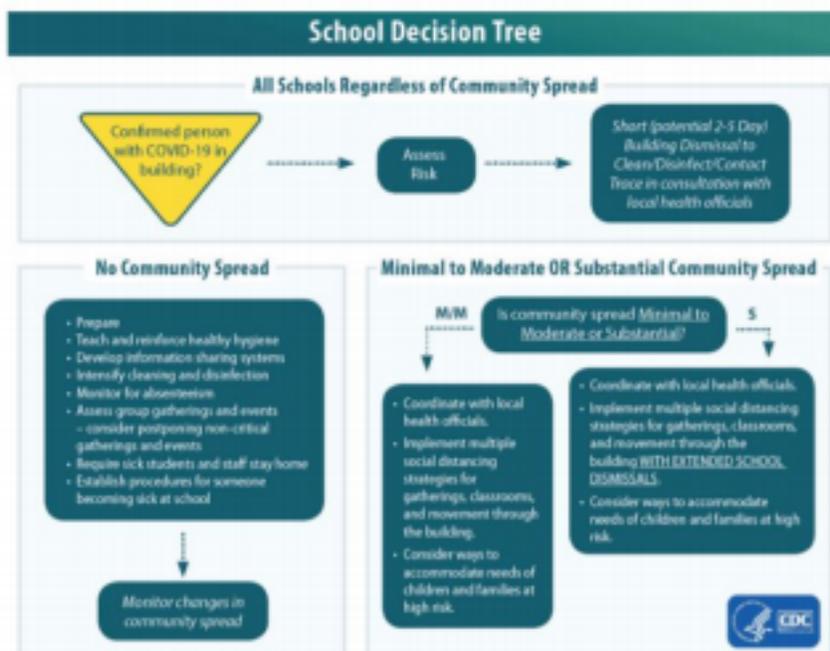
Communication of Confirmed Community Case COVID-19

The School will work closely with state and local health departments to inform all of our communications regarding confirmed and potential COVID-19 cases within our community. While adhering to privacy laws and standards, The School will err on the side of transparency and proactive communication.

Unless directed otherwise, the school will communicate in broad terms when there is a confirmed case of COVID-19. We will partner with public health to communicate additional details to any individuals who may have had exposure to the individual(s) with a positive diagnosis.

Closure of Physical Campus:

The school stands prepared to close its physical campus and transition into online learning and operations at any point. This may be mandated by federal, state or local officials, or the school may independently decide to make this decision based on its.



If a person diagnosed with COVID-19 is confirmed to have been in the building, the School will follow CDC guidelines for closure and disinfecting, which currently state “programs *may consider* closing for a short time (2-5 days) for cleaning and disinfection.”¹⁷ The length of the closure and its relation to weekends and planned school holidays will

determine whether Distance Learning plans are employed.

Hand Hygiene and Respiratory Etiquette:

In addition to precautionary and responsive policies and procedures, the school will also educate its community about, promote broadly, and require best practices in personal hygiene¹⁸ such as:

- Hand hygiene includes traditional hand washing (with soap and warm water, lathering for a minimum of 20 seconds) or the use of alcohol-based hand sanitizers (60% alcohol or greater) when soap and water are not available.¹⁹
- Educate and model appropriate behaviors and allow for hygiene opportunities before meals, after recess or physical education, and scheduled times throughout the day
- Respiratory hygiene/cough etiquette - the COVID-19 virus spreads from person to person in droplets produced by coughs and sneezes. It is important that students and staff cover their mouths or noses with a tissue when coughing or sneezing and dispose of the tissue appropriately. If no tissue is available, using the inside of the elbow (or shirt sleeve) to cover the mouth or nose is preferable to using the hands. Always perform hand hygiene after sneezing, coughing and handling dirty tissues or other soiled material.

¹⁷ "Interim Guidance for Child Care Programs and K-12 Schools" 19 Mar. 2020, <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/guidance-for-schools.html>. Accessed 9 Jun. 2020.

¹⁸ "How to Protect Yourself & Others | CDC." <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/prevention.html>. Accessed 9 Jun. 2020.

¹⁹ "When and How to Wash Your Hands" <https://www.cdc.gov/handwashing/when-how-handwashing.html>. Accessed 9 Jun. 2020.

Social Distancing:

Based on the CDC's recommendation that limiting face-to-face contact is the best way to limit the spread of COVID-19, the school will implement social distancing practices²⁰ whenever possible. Below are illustrative examples of some of the social distancing practices the school will educate its community about, promote broadly, and require whenever feasible:

- Maintaining 6ft distance between one another including when entering, exiting and walking through the campus and while in the classroom and office spaces
- Maintaining small, consistent groups of students and teachers
- Eliminating large groups and not using or repurposing common spaces such as the multipurpose room.
- Space seating/desks at least 6 feet apart and facing the same direction when feasible
- Turn desks to face in the same direction (rather than facing each other), or have students sit on only one side of tables, spaced apart

Masks and Facial Coverings:

Employees must wear a mask while interacting with others, moving throughout the building or in common areas. Students can only take their masks off only when instructed by their teacher. Masks should be a minimum of 2-ply cloth. Every student should bring a brown paper bag with 3 clean masks to keep on campus.

As outlined in Executive Order 180, beginning November 25, 2020, ensure that in all nonpublic schools covered by Article 39 of Chapter 115C of the General Statutes, all workers, teachers, guests, other adults and children five (5) years or older must wear face coverings both:

- When outdoors and within six (6) feet of another person, unless an exception applies;
- When indoors, at all times, unless an exception applies.

For any place outside the home, including but not limited to businesses, schools, and other establishments and spaces:

- Face Coverings must be worn indoors if anyone else is in that space who is not a member of the same household.
- Face Coverings must be worn outdoors if it is not possible to consistently be physically distant by more than six (6) feet from non-household members.

These requirements shall apply to all people at least five (5) years old, unless an exception applies. These requirements are recommended for all people over the age of two (2) years old.

Face coverings are not required to be worn by an individual who:

- Should not wear a face covering due to any medical or behavioral condition or disability (including, but not limited to, any person who has trouble breathing, or is unconscious or incapacitated, or is otherwise unable to put on or remove the face covering without assistance);
- Is under five (5) years of age;
- Is actively eating or drinking;

²⁰ "Social Distancing, Quarantine, and Isolation - CDC." <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/social-distancing.html>. Accessed 9 Jun. 2020.

- Is seeking to communicate with someone who is hearing-impaired in a way that requires the mouth to be visible;
- Is giving a speech for a broadcast or to an audience;
- Is working at home or is in a personal vehicle;
- Is temporarily removing his or her face covering to secure government or medical services or for identification purposes;
- Would be at risk from wearing a face covering at work, as determined by local, state, or federal regulations or workplace safety guidelines;
- Has found that his or her face covering is impeding visibility to operate equipment or a vehicle; or
- Is a child whose parent, guardian, or responsible person has been unable to place the face covering safely on the child's face.

Students 5 years and older and all caretakers must wear a face covering, if non-household

members are present. For example, if there is a blending of students from different households, face coverings are required.

Distance Learning while Off Campus:

During required periods away from campus, students will continue to have real-time access to their daily lessons and interactions with their classmates through distance learning as feasible. Students are only expected to participate if they are healthy enough to do so.

Distance Operations while Off Campus:

During required periods away from campus, employees are expected to continue to satisfy the expectations and responsibilities of their positions and adhere to the same operating hours as directed by the Head of School.

Arrival:

School hours begin at 8 a.m. for all students. The front doors are unlocked this year at **7:30am**. Students are to arrive for school between 7:30 - 8:00 a.m. Families are asked to stay in their cars while staff performs the student health check. Students will then divide into smaller groups until their day begins. Early drop off is from 7:00-7:30 by the side door.

Lower School (K-5)	Middle School (6-8)	Upper School (9-12)
7:30-7:50 - Music Room	7:30-7:50 - MPR	7:30-7:50 - Advisor’s Room

Lunch Policy:

Students will eat in small groups in their designated areas. Sanitizer or hand washing will take place before and after lunch. Use of any microwaves will not be allowed at this time.

Dismissal:

Families are asked to come within their child’s 10 min dismissal window. If you arrive early, we might ask you to park and wait or circle around. Families are asked to stay in the car during dismissal. We will call for each student via walkie-talkie to be sent out as cars advance to the

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front of the line. We will not have free care after dismissal on Wednesdays. We encourage all families to pick up children at dismissal times unless they are signing up for the Extended Day Program.

Lower School (K-5)	Middle School (6-8)	Upper School (9-12)
M, T, Th, F: 2:40	M, T, Th, F: 2:50	M, T, Th, F: 3:00
W: 1:40	W: 1:50	W: 2:00

Extended Day Program (EDP):

Our Extended Day Program will run from the time of dismissal until 6pm. We will begin EDP on Monday, August 31st. Parents must pre-register for EDP (forms & registration fee - \$30) by August 24th. We are discouraging drop-ins at this time.

Visitors:

No visitors, including parents, alumni and volunteers will be allowed beyond the lobby until further notice without an appointment. Those with an appointment must be screened. Parents needing to pick up a child early from school will check in at the lobby, and wait there for their child to be dismissed.

We continue to monitor up-to-date information from the CDC and will always make decisions based on what is best for our community. Thank you for helping keep our community healthy.

After reading, [please click on this link](#) to electronically let us know you have read this Handbook and agree with the statements below.

I have reviewed the JCS COVID-19 Handbook Addendum. I understand that the novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. I further understand that COVID-19 is extremely contagious and is believed to spread by person-to-person contact; and, as a result, federal and state health agencies recommend social distancing. I recognize that The John Crosland School created a task force and is closely monitoring this situation and have put in place reasonable preventative measures aimed to reduce the spread of COVID-19. I agree with their risk mitigation protocols and will abide by them.

I will be sensitive to the travels of my family and time spent in group settings. I will be extra cautious 10 days before school starts and continue to make informed decisions as school on campus continues.

If protocols are not followed, I understand there will be a written and spoken reminder. If reminders are not shaping the behavior, families will be contacted to use a team approach in creating a plan. If I have any concerns, I will share them with a JCS employee so they can be addressed.