

School Plan for Safe Reopening

School Information

School Name	School Administrator	Plan Date	Closure Date	Planned Reopening Date
Clear Creek Elementary School	Carolyn Cramer	7/27/20	3/16/20	8/17/20

Introduction

The following School Plan for Safe Reopening is based on the California Department of Education's (CDE) guidance publication, *Stronger Together: A Guidebook for the Safe Reopening of California's Public Schools*.

Per CDE, this guidance was created through the statewide reopening schools task force that fostered a collaborative process for our educators and stakeholders to lend their important voices. Also informed by the technical assistance and advice of many health and safety organizations including the Centers for Disease Control, California Department of Public Health, California Division of Occupational Safety and Health, the intent of this document is to be a guide for the local discussion on safely reopening schools.

Stronger Together: A Guidebook for the Safe Reopening of California's Public Schools, as well as additional guidance can be downloaded at <https://www.cde.ca.gov/ls/he/hn/strongertogether.asp>.

The following checklist provides information regarding Clear Creek Elementary School's plan for safe reopening and covers the following main categories:

Main Categories
Local Conditions to Guide Reopening Decisions
Plan to Address Positive COVID-19 Cases or Community Surges
Injury and Illness Prevention Plan
Campus Access
Protective Equipment
Physical Distancing
Cleaning/Disinfecting
Employee Issues
Communication with Students, Parents, Employees, Public Health Officials, and the Community

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Local Conditions to Guide Reopening Decisions

Flexibility or Lifting of State Stay-Home Order

Condition Met	Condition Assessed
Yes	The state has lifted or relaxed the stay-home order to allow schools to physically reopen.

According to the Governor's orders on July 17, 2020, if a school is located in a county that is not currently on or has been on the monitoring list for the last 14 days, school may open to in person instruction as long as current health department guidelines are followed. As new school guidance documents have come out in August, November and January we update the plans based on any new information provided.

Flexibility or Lifting of County Stay-Home Order

Condition Met	Condition Assessed
Yes	The county has lifted or relaxed the stay-home or shelter-in-place order to allow schools to physically reopen.

The District meets weekly with the Nevada County Superintendent of Schools as well as the Nevada County Public Health Director to receive current updates on our status. Taskforce meetings with School Superintendents, school nurses, and Health Department now occur every other week until further notice.

Local Public Health Clearance

Condition Met	Condition Assessed
Yes	Local public health officials have made determinations, including, but not limited to, the following: i. Testing Availability. Consult with local public health officials to ensure adequate tests and tracking/tracing resources are available for schools to reopen. Employees have access to COVID-19 testing at regular and ongoing intervals. ii. Sufficient duration of decline or stability of confirmed cases, hospitalizations, and deaths. iii. Sufficient surge capacity exists in local hospitals.

i. Testing is available to staff members as essential workers and is recommended to occur before the school year begins and periodically throughout the year, but is not mandatory. All staff are reminded regularly the updated asymptomatic testing cadence. As our county moves through the color tiers and CDPH and our local Health Department update testing cadences, we provide that information to our school community.
ii. & iii. Nevada County is not currently on the state's monitoring list. Our Public health Department will keep schools advised and updated if that status changes. Our county moved into purple, but since we were previously open prior, we may remain open.

Equipment Availability

Condition Met	Condition Assessed
Yes	i. Have sufficient protective equipment to comply with California Department of Public Health (CDPH) guidance for students and staff appropriate for each classification or duty, as well as relevant California Division of Occupational Safety and Health Administration (Cal/OSHA) requirements. ii. Have a plan for an ongoing supply of protective equipment. iii. Purchase a sufficient number of no-touch thermal scan thermometers for symptom screenings.

	<ul style="list-style-type: none"> iv. Consider the differing requirements of PPE/EPG for the differing populations of students with disabilities (i.e., for those requiring medical procedures, toileting, lifting and mobility assistance).
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- i. The state provided some PPE, masks, shields, hand sanitizer, and no touch thermometers. The District has also purchased 2 electrostatic sprayers to be used for sanitizing classrooms, 1 outdoor sprayer for outdoor equipment, additional disposable masks, gloves, face shields, hand sanitizer and refills, soap, paper towels and all of the usual school cleaning supplies.
- ii. We will monitor our supply and reorder as necessary. The NCSOS office is also contacting the state to see if additional PPE can be sent to our districts.
- iii. We have 15 No touch thermometers on campus.

Cleaning Supply Availability

Condition Met	Condition Assessed
Yes	<ul style="list-style-type: none"> i. Have enough school-appropriate cleaning supplies to continuously disinfect the school site in accordance with CDPH guidance. ii. Ensure sufficient supplies of hand sanitizers, soap, handwashing stations, tissues, no-touch trash cans, and paper towels.

- i. The District has also purchased 2 electrostatic sprayers to be used for sanitizing classrooms between groups, 2 outdoor portable hand washing stations, 1 outdoor sprayer for outdoor equipment as well as all of the usual school cleaning supplies we have on hand every day.
- ii. We have a good supply on campus presently of hand sanitizer and refills, soap, paper towels, tissues. We will monitor stock regularly and reorder as needed.

Plan to Address Positive COVID-19 Cases or Community Surges

Plan for Repeated Closure

Condition Met	Condition Assessed
Yes	Establish a plan to close schools again for physical attendance of students, if necessary, based on public health guidance and in coordination with local public health officials.

The District has plans and schedules if we need to move back to full Distance Learning/Learn@Home program if directed by our County Public Health Department based on their guidelines and the Governor's orders.

Response to Positive Tests

Condition Met	Condition Assessed
Yes	<p>In accordance with CDPH guidance, when a student, teacher, or staff member or a member of their household tests positive for COVID-19 and has exposed others at the school implement the following steps:</p> <ol style="list-style-type: none">i. In consultation with the local public health officials, the appropriate school official may consider whether school closure is warranted and length of time based on the risk level within the specific community as determined by the local public health officer.ii. In accordance with standard guidance for isolation at home after close contact, the classroom or office where the COVID-19-positive individual was based will typically need to close temporarily as students or staff isolate.iii. Additional close contacts at school outside of a classroom should also isolate at home.iv. Additional areas of the school visited by the COVID-19-positive individual may also need to be closed temporarily for cleaning and disinfection.v. Develop a plan for continuity of education, medical and social services, and meal programs and establish alternate mechanisms for these to continue.

- i. Our school nurse has trained our office staff on how to identify and isolate anyone displaying symptoms. We will coordinate and follow Public Health recommendations and follow the COVID-19 Exposure Guide for Schools provided by Nevada County Public Health. We also have template letters ready to address the various scenarios outlined on the Exposure Guide for Schools.
- ii. & iii. Our school will follow the directions of Public Health if a positive case is in the classroom or office.
- iv. All areas of the school potentially visited will be cleaned and sanitized.
- v. We can provide Distance Learning, lunches and refer staff or students accordingly.

Injury and Illness Prevention Program (IIPP)

Plan for Repeated Closure

Condition Met	Condition Assessed
Yes	Update the IIPP to address unique circumstances during the COVID-19 crisis and make updates accessible to employees and parents.

We have updated our IIPP with a COVID-19 addendum as well as adopted new Board policy with COVID-19 policies and procedures included.

Campus Access

Develop a plan to minimize access to campus, and limit nonessential visitors, facility use permits, and volunteers.

People Showing Symptoms of COVID-19

Condition Met	Condition Assessed
Yes	Exclude any student, parent, caregiver, visitor, or staff showing symptoms of COVID-19 (reference CDC and CDPH guidelines for COVID-19 symptoms). Staff should discuss with the parent or caregiver and refer to the student's health history form or emergency card to identify whether the student has a history of allergies, which would not be a reason to exclude.

The school nurse has trained office staff in symptom screening. Parents will note documented history of allergies on emergency card. All staff and students will complete a symptom and temperature check each day before attending work or school. If staff member or student is exhibiting any symptom on the list, they should not attend work or school. We have posted signs in public areas of the signs and symptoms of COVID and remind them not to enter the school if there are any symptoms present.

Monitoring Staff

Condition Met	Condition Assessed
Yes	Monitor staff and students throughout the day for signs of illness. Determine any special or unique needs for students with disabilities related to planned district or schoolwide procedures.

Office staff has been trained by the school nurse on how to recognize and monitor symptoms. The school nurse will provide a guidance document for office staff to follow. Staff are provided PPE for when they are in contact with someone who may be ill. We will have an isolation area if needed until student or staff member can go home. We will work and communicate with parents on an individual basis to best serve their child's needs.

Students Entering Campuses

Condition Met	Condition Assessed
Yes	<ul style="list-style-type: none"> i. Passive Screening. Instruct parents to screen students before leaving for school (check temperature to ensure temperatures below 100.4 degrees Fahrenheit, observe for symptoms outlined by public health officials) and to keep students at home if they have symptoms consistent with COVID-19 or if they have had close contact with a person diagnosed with COVID-19. ii. Active Screening. Engage in symptom screening as students enter campus and buses, consistent with public health guidance, which includes visual wellness checks and temperature checks with no-touch thermometers (check temperature to ensure temperatures below 100.4 degrees Fahrenheit), and ask all students about COVID-19 symptoms within the last 24 hours and whether anyone in their home has had COVID-19 symptoms or a positive test. <ul style="list-style-type: none"> 1. If a thermometer requiring a touch method (under the tongue or arm, forehead, etc.) is the only type available, it should only be used when a fever is suspected and caution is taken by temperature screeners, such as by wearing gloves, eye protection, and a mask. 2. Thermometers must be properly cleaned and disinfected after each use. iii. All students must wash or sanitize hands as they enter campuses and buses. iv. Provide supervised, sufficient points of access to avoid larger gatherings. v. Use privacy boards or clear screens when practicable. vi. If a student is symptomatic while entering campus or during the school day: <ul style="list-style-type: none"> 1. Students who develop symptoms of illness while at school should be separated from others right away, preferably isolated in an area through which others do not enter or pass. If more than one student is in an isolation area, ensure physical distancing. 2. Any students or staff exhibiting symptoms should be required to immediately wear a face covering and wait in an isolation area until they can be transported home or to a health care facility. 3. Students should remain in isolation with continued supervision and care until picked up by an authorized adult. 4. Follow established guidelines for triaging students in the health office, recognizing not all symptoms are COVID-19 related. 5. Advise parents of sick students that students are not to return until they have met CDC criteria to discontinue home isolation. vii. Develop a plan for if students are symptomatic when boarding the bus.

- i. All students and staff will complete a screening each day. The school will provide the screening tool for all staff and students. A staff member can also conduct the screening if a parent is unable to do so before school.
- ii. Office staff will be trained by our school nurse along with using Health Department guidelines to monitor staff and students throughout the day. We will only use No Touch Thermometers to take temperatures.
- iii. Proper hand washing techniques and frequent reminders will be a part of classroom instruction. Additional hand washing stations will be set up outside for easier access while staff and students are out doors. All classrooms have sinks, soap, and paper towels, as well each student and staff restroom.
- iv. We will request that parents participate in a staggered drop-off and pick-up area to limit the number of students in one location at the same time..
- v. We will have a clear plexiglass barrier installed at the front desk in the main office to protect office staff and visitors.
- vi. We will have an isolation area for students or staff that exhibits symptoms while on campus. Students and staff will maintain 6 feet distance and wear face coverings while on campus.
- vii. We do not have buses. NA

Staff Entering Campuses

Condition Met	Condition Assessed
Yes	<ul style="list-style-type: none"> i. Passive Screening. Instruct staff to self-screen before leaving for work (check temperature to ensure temperatures below 100.4 degrees Fahrenheit, check for symptoms outlined by public health officials) and to stay home if they have symptoms consistent with COVID-19 or if they have had close contact with a person diagnosed with COVID-19. ii. Active Screening. Engage in symptom screening as staff enter worksites, consistent with public health guidance, which includes visual wellness checks and temperature checks with no-touch thermometers (check temperature to ensure temperatures below 100.4 degrees Fahrenheit), and ask all staff about COVID-19 symptoms within the last 24 hours and whether anyone in their home has had COVID-19 symptoms or a positive test. <ul style="list-style-type: none"> 1. If a thermometer requiring a touch method (under the tongue or arm, forehead, etc.) is the only type available, it should only be used when a fever is suspected. 2. Thermometers must be properly cleaned and disinfected after each use. iii. All staff must wash or sanitize hands as they enter worksites. iv. Exclude employees who are exhibiting symptoms from the workplace. <ul style="list-style-type: none"> 1. Staff members who develop symptoms of illness should be sent to medical care. Have emergency substitute plans in place. 2. Create a procedure for reporting the reasons for the exclusions. 3. Advise sick staff members not to return until they have met CDC criteria to discontinue home isolation.

- i. & ii. Staff will complete a symptom check and screening each day. If they are exhibiting symptoms, they should not attend work and notify the school and plan for a substitute teacher. We will use No Touch thermometers.
- iii. Staff will be instructed at the beginning of the year on cleaning protocol and will be reminded periodically at regular staff meetings.
- iv. If a staff member becomes ill, they will be sent home and asked to follow up with their doctor and not return until symptoms are gone according to health department guidelines and protocol.

Outside Visitors and Groups

Condition Met	Condition Assessed
Yes	<ul style="list-style-type: none"> i. Limit access to campus for parents and other visitors. ii. Evaluate whether and to what extent external community organizations can safely utilize the site and campus resources. Ensure external community organizations that use the facilities also follow the school's health and safety plans and CDPH guidance. iii. Review facility use agreements and establish common facility protocols for all users of the facility. iv. Establish protocol for accepting deliveries safely. v. Charter School Co-locations Update facility use agreements to address unique circumstances during the COVID-19 crisis, ensuring that organizations that are using the same facility have agreed to the same understandings about how to reopen in a healthy and safe way. Establish a protocol for responding to site concerns regarding health and safety issues that arise during the pandemic that is collaborative and meets the needs of all stakeholders.

i. Campus visitors will be limited and parent volunteers will not be allowed during this time. After school clubs and organizations (PTC) will not meet on campus during this time or until the health department recommends that restrictions can be loosened.

ii. & iii. We will not be opening our facilities up to external organizations at this time.

iv. Deliveries will be designated to either the shop or front office and proper handling will be followed during the exchange.

v. NA

Hygiene

Plan to address hygiene practices to ensure personal health and safety in school facilities and vehicles.

Handwashing

Condition Met	Condition Assessed
Yes	<p>In accordance with CDPH and Cal/OSHA guidance and in consultation with local public health officials, develop a plan for handwashing that includes:</p> <ol style="list-style-type: none">Providing opportunities for students and staff to meet handwashing frequency guidance.Ensuring sufficient access to handwashing and sanitizer stations. Consider portable handwashing stations throughout a site and near classrooms to minimize movement and congregations in bathrooms to the extent possible.Ensuring fragrance-free hand sanitizer (with a minimum of 60 percent alcohol) is available and supervised at or near all workstations and on buses. Children under age nine should use hand sanitizer under adult supervision. Call Poison Control if consumed: 1-800-222-1222. Note: frequent handwashing is more effective than the use of hand sanitizers.

- Staff and students will be encouraged and taught to wash hands frequently when on campus. Teachers will instruct students on proper hand washing and will provide frequent opportunities for students to wash while in class.
- . Each classroom, restroom, and staff room has a sink and will be fully stocked with proper hand washing supplies. Two additional hand washing stations will be set up out side on blacktop. One student will be allowed in the bathroom at a time and we will have floor stickers to remind students to maintain proper physical distance while waiting.
- Each room on campus will have hand sanitizer available for use. We have also ordered and installed no touch sanitizer dispensers for the office, work room, library and our meeting room 2.

Training of Proper Handwashing Techniques and PPE/EPG Use

Condition Met	Condition Assessed
Yes	<p>Train staff and students on proper handwashing techniques and PPE/EPG use, including the following:</p> <ol style="list-style-type: none">Scrub with soap for at least 20 seconds or use hand sanitizer if soap and water are not accessible. Staff and students should use paper towels (or single use cloth towels) to dry hands thoroughly.Wash hands when: arriving and leaving home; arriving at and leaving school; after playing outside; after having close contact with others; after using shared surfaces or tools; before and after using restroom; after blowing nose, coughing, and sneezing; and before and after eating and preparing foods.CDC guidance on proper PPE use.

- & ii. Staff and students will be taught and reminded of proper hand washing protocol. We have signs with directions posted in bathrooms and near sinks in classrooms.
- The staff will participate in in-person training with our school nurse at the beginning of the year and they will complete an online training via Public School Works.

Training for Face and Nose Covering

Condition Met	Condition Assessed
Yes	Teach staff and students to:

- | | |
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| | <ul style="list-style-type: none">i. Use tissue to wipe the nose and cough and sneeze inside the tissue.ii. Not touch the face or face covering. |
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i & ii. School nurse will train staff and the staff will provide ongoing instruction and reminders to students in the classroom. All staff members will also complete an online training course on How to protect themselves and others via Public School Works.

Protective Equipment

Plan to address protective equipment needs to ensure personal health and safety in school facilities and vehicles.

PPE Training

Condition Met	Condition Assessed
Yes	<p>According to CDC guidance:</p> <ul style="list-style-type: none"> i. Training and information should be provided to staff and students on proper use, removal, and washing of cloth face coverings. ii. Face coverings are not recommended for anyone who has trouble breathing or is unconscious, incapacitated, or otherwise unable to remove the covering without assistance. LEAs should make reasonable accommodations such as a face shield with a cloth drape for those who are unable to wear face coverings for medical reasons. Per Cal/OSHA, considerations for face shields should include a cloth drape attached across the bottom and tucked into shirt. iii. Cloth face coverings are meant to protect other people in case the wearer is unknowingly infected (many people carry COVID-19 but do not have symptoms). Cloth face coverings are not surgical masks, respirators, or personal protective equipment.

- i. Staff training will be provided by our school nurse and an online course via Public School Works.
- ii & iii. Public Health Department guidelines require all students grades 3rd and up and all staff to wear face coverings while on campus. Students in TK/K are strongly encouraged, but not required to wear a mask. While TK-2nd grade students will be allowed to take a mask break in class when settled and physically distanced, they will be asked to wear a mask when arriving and leaving campus and also when walking in public areas of the school. We have face shields available if an individual has a medical or behavioral inability to wear a mask.

Staff Protective Equipment

Condition Met	Condition Assessed
Yes	<ul style="list-style-type: none"> i. As recommended by the CDC, all staff should wear face coverings. Per CDPH guidance, teachers could use face shields, which enable students to see their faces and to avoid potential barriers to phonological instruction. ii. Provide masks if the employee does not have a clean face covering. iii. Provide other protective equipment, as appropriate for work assignments. <ul style="list-style-type: none"> 1. For employees engaging in symptom screening, provide surgical masks, face shields, and disposable gloves. 2. For front office and food service employees, provide face coverings and disposable gloves. 3. For custodial staff, provide equipment and PPE for cleaning and disinfecting, including: <ul style="list-style-type: none"> A. For regular surface cleaning, provide gloves appropriate for all cleaning and disinfecting. B. Classified staff engaged in deep cleaning and disinfecting should be equipped with proper PPE for COVID-19 disinfection (disposable gown, gloves, eye protection, and mask or respirator) in addition to PPE as required by product instructions. All products must be kept out of children's reach and stored in a space with restricted access. C. Cal/OSHA requires that PPE be provided and worn to effectively protect employees from the hazards of the cleaning products used and training be provided to staff on the hazards of chemicals.

- i. Clear Creek will follow state and local health department guidelines on face coverings. All staff and students will wear masks while on campus except when eating or drinking.
- ii. All staff have access to appropriate PPE.
- iii. Custodial and maintenance staff will also complete an online course on proper cleaning and sanitizing methods via Public School Works as well as have access to appropriate PPE.

Student Protective Equipment

Condition Met	Condition Assessed
Yes	<ul style="list-style-type: none"> i. Students should use cloth face coverings, especially in circumstances when physical distancing cannot be maintained. If an LEA requires students to wear face coverings, then the LEA must provide face coverings to be used. Consider how the LEA will address students with disabilities who refuse or are not able to wear masks. At a minimum, face coverings should be worn: <ol style="list-style-type: none"> 1. While waiting to enter the school campus. 2. While on school grounds (except when eating or drinking). 3. While leaving school. 4. While on a school bus. <p style="margin-left: 40px;">Driver has access to surplus masks to provide to students who are symptomatic on the bus.</p>

- i. Each student will receive 2 cloth face coverings and a bottle of hand sanitizer to keep with them. Students may and will be encouraged to bring their own face covering each day. Masks will be provided to any student or staff member without one. All staff and students will wear face coverings while on campus.

Physical Distancing

Plan to meet physical distancing standards in school facilities and vehicles. Clearly define how staff can honor physical distancing recommendations, yet meet student medical, personal, or support needs. Determine how adequate space and facilities will be utilized to maintain health and safety of students and staff, especially when tending to individual student medical or personal needs.

Plan to Limit the Number of Persons in Campus Spaces

Condition Met	Condition Assessed
Yes	Plan to limit the number of people in all campus spaces to the number that can be reasonably accommodated while maintaining a minimum of 6 feet of distance between individuals. (6 feet is the current minimum recommendation for physical distancing from the CDC, but it is important to pay attention to future modifications in public health recommendations.)

Drop-off and Pick-up times will be staggered alphabetically in order to avoid large groups in a single location. All classroom will be set up with 6 feet of distance between desks.

Creating Smaller Student/Educator Cohorts & Minimizing Movement

Condition Met	Condition Assessed
Yes	To the extent possible, and as recommended by the CDC, attempt to create smaller student/ educator cohorts to minimize the mixing of student groups throughout the day. Minimize movement of students, educators, and staff as much as possible.

Each class will be self-contained and will have one teacher. Teachers may take students outside for a movement break as long as they maintain physical distance avoid mixing of student groups.

Alternative to Physical Distancing

Condition Met	Condition Assessed
Yes	In a circumstance where sufficient physical distancing is difficult or impossible, such as when students enter or exit a school bus in proximity to the bus driver, all individuals, including staff and students, should wear face coverings that cover the mouth and nose consistent with public health guidance. To be clear, face coverings are not a replacement for physical distancing, but they should be used to mitigate virus spread when physical distancing is not feasible.

At this time, Health Department guidelines say all students and staff must wear masks while on campus unless there is a medical or behavioral contraindication. Clear Creek does not provide bus transportation.

Student Physical Distancing

Condition Met	Condition Assessed
Yes	LEAs should plan to: i. Limit number of students physically reporting to school, if needed to maintain physical distancing. 1. Determine student and staff capacity of each school meeting 6-foot physical distancing objectives. 2. Consider various strategies outlined in the Instructional Program Models in the guidance document, such as early/late start times and blended learning models. ii. The CDC recommends virtual activities in lieu of field trips and intergroup events. iii. Post signage and install barriers to direct traffic around campus.

iv. Buses

1. Determine maximum capacity for students of each vehicle while meeting 6-foot physical distancing objectives.
2. Create a plan for seating based on maximum capacity determined above, and develop a plan for bus routes that accommodates the capacity limitations. Mark or block seats that must be left vacant. Sample seating options:
 - A. Option 1: Seat one student to a bench on both sides of the bus, skipping every other row.
 - B. Option 2: Seat one student to a bench, alternating rows on each side to create a zigzag pattern on the bus.
3. Instruct students and parents to maintain 6-foot distancing at bus stops and while loading and unloading.
4. Seat students from the rear of the bus forward to prevent students from walking past each other. To prevent students from walking past one another, afternoon runs should be boarded based on the order in which students will be dropped off. (Students who get off first should board last and sit in the front.)
5. Students and staff should wear face coverings at bus stops and on buses.

v. Playgrounds/Outside Spaces/Athletics

1. Increase supervision to ensure physical distancing.
2. Physical education (PE) and intramural/interscholastic athletics should be limited to activities that do not involve physical contact with other students or equipment until advised otherwise by state/local public health officials.

vi. Classrooms

1. Determine maximum capacity for students of each classroom while meeting 6-foot physical distancing objectives.
2. In accordance with CDC and CDPH guidance, ensure desks are a minimum of 6 feet apart and arrange desks in a way that minimizes face-to-face contact.
3. If necessary, utilize other campus spaces for instructional activities (e.g., lecture halls, gyms, auditoriums, cafeterias, outdoors).
4. If necessary, broadcast to other classrooms and students distance learning at home.
5. Increase staffing to ensure physical distancing for younger students and students with special needs.
6. Arrange developmentally appropriate activities for smaller group activities and rearrange furniture and play spaces to maintain separation, when possible.
7. Address physical distancing objectives as students move between classrooms.
8. Address potential issues from physical distancing rules that could result in unintended segregation of students with disabilities on campuses away from peers without disabilities.

vii. Food Service

1. Consider strategies to limit physical interaction during meal preparation and meal service (e.g., serving meals in classrooms, increasing meal service access points, staggering cafeteria use).
2. Suspend use of share tables and self-service buffets for food and condiments.
3. Install physical barriers, such as sneeze guards and partitions, at point of sale and other areas where maintaining physical distance of 6 feet is difficult.
4. With an approved National School Lunch Program waiver, offer meal delivery for students quarantined or in a home-based cohort.
5. If providing meal service in classrooms, plan for cleaning and trash removal.

- i. We have developed an AM Hybrid schedule with small numbers of students in each group to accommodate 6 foot distancing within the classrooms.
- ii. At this time, we will not participate in off campus field trips until it is safe to do so.
- iii. We will have floor stickers reminding staff and students to maintain appropriate physical distance.
- iv. Bus transportation is not an option at Clear Creek. NA
- v. Classroom cohorts will not mix with others.
- vi. We have implemented a hybrid schedule that reduces the number of students in each class so that students may remain 6 feet apart. Teachers may take class outdoors for instruction as long as they notify the office of their location and have a Walkie-Talkie for communication. We have a DL option for those families who choose not to return to on campus instruction. .
- vii. Students will be given a lunch to take home. Initially. we will not provide child care for students.

Staff Physical Distancing

Condition Met	Condition Assessed
Yes	<ul style="list-style-type: none"> i. Develop a plan that ensures physical distancing among staff in their work environment to reduce spread of the virus that includes: <ul style="list-style-type: none"> 1. Avoiding staff congregation in work environments, break rooms, staff rooms, and bathrooms. 2. Avoiding grouping staff together for training or staff development. Consider conducting the training virtually or, if in-person, ensure distancing is maintained. ii. Adjust staff schedules (through negotiations) to accommodate new student schedules and physical distancing strategies. iii. In accordance with Cal/OSHA regulations and guidance, evaluate all workspaces to ensure that employees can maintain physical distancing to the extent possible. <ul style="list-style-type: none"> 1. Where possible, rearrange workspaces to incorporate a minimum of 6 feet between employees and students. 2. If physical distancing between workspaces or between employees and students and visitors is not possible, add physical barriers that cannot be moved to separate workspaces.

i.ii. iii. Schedules have been created to include breaks and lunch periods at staggered times to avoid congregating in one area. Staff will be instructed to maintain proper distance and use their classroom or alternate rooms such as the gym when needing to collaborate in larger groups.

Cleaning and Disinfecting

Plan to meet cleanliness and disinfecting standards in school facilities and vehicles.

Overall Cleanliness Standards

Condition Met	Condition Assessed
Yes	Schools must meet high cleanliness standards prior to reopening and maintain a high level during the school year.

We have one full time maintenance person and one part time custodial person. The school will be cleaned each day. The classrooms will be vacuumed each morning and surfaces will be sanitized each morning and at mid day between student groups. The bathrooms will also be cleaned in the morning and sanitized at mid day. Other rooms will be sanitized as needed throughout the day depending on usage. A schedule will be created for periodic cleaning of drinking fountains and other frequently touched surfaces around campus.

Sharing Avoidance

Condition Met	Condition Assessed
Yes	In accordance with CDC guidance, avoid sharing of electronic devices, toys, books, and other games or learning aids.

Students will be assigned computers by number and they will be wiped down between uses. Students will use hand sanitizer upon entering the library and upon leaving. Returned books will be placed in a bin and wiped down before being returned to the shelf. Teachers will limit the use of community supplies and learning aids. Outdoor equipment will be limited in favor of activities that require less contact with surfaces. Any shared equipment will be cleaned between uses.

Items Difficult to Clean and Sanitize

Condition Met	Condition Assessed
Yes	Limit stuffed animals and any other toys that are difficult to clean and sanitize.

Teachers have been advised to remove or limit the amount of soft surface furniture or items in their classrooms. Students should not bring toys or other items from home.

Safe Use of Disinfectants

Condition Met	Condition Assessed
Yes	<p>In accordance with CDC and California Department of Pesticide Regulation (CDPR) guidance, and in consultation with local public health officials, develop a plan that includes:</p> <ol style="list-style-type: none">i. A safe and correct application of disinfectants using personal protective equipment and ventilation recommended for cleaning.ii. Disinfecting surfaces between uses, such as:<ol style="list-style-type: none">1. Desks and tables2. Chairs3. Seats on bus4. Keyboards, phones, headsets, copy machinesiii. Disinfecting frequently—at least daily—high-touch surfaces, such as:<ol style="list-style-type: none">1. Door handles2. Handrails

	<ol style="list-style-type: none"> 3. Drinking fountains 4. Sink handles 5. Restroom surfaces 6. Toys, games, art supplies, instructional materials 7. Playground equipment <ol style="list-style-type: none"> iv. When choosing disinfecting products, using those approved for use against COVID-19 on the Environmental Protection Agency (EPA) List N: Disinfectants for Use Against SARS-CoV-2 and follow product instructions. <ol style="list-style-type: none"> 1. To reduce the risk of asthma related to disinfecting, programs should aim to select disinfectant products on the EPA List N with asthma-safer ingredients (hydrogen peroxide, citric acid, or lactic acid). 2. Avoid products that mix these ingredients with peroxyacetic acid, sodium hypochlorite (bleach), or quaternary ammonium compounds, which can cause asthma. 3. Use disinfectants labeled to be effective against emerging viral pathogens, following label directions for appropriate dilution rates and contact times. v. When cleaning, airing out the space before children arrive. Plan to do thorough cleaning when children are not present. vi. Closing off areas used by any sick person and not using before cleaning and disinfection. To reduce risk of exposure, wait 24 hours before cleaning and disinfecting. If it is not possible to wait 24 hours, wait as long as possible.
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- i. Maintenance and custodial staff will complete an online training on proper cleaning protocol at the beginning of the year. They will have adequate access to PPE.
- ii. & iii. Teachers, Maintenance and custodial staff will all be advised on the importance of regular cleaning of frequently touched surfaces.
- iv. Cleaning products used are on the EPA approved list.
- v. Cleaning will be done before school and between student groups.
- vi. Staff will complete an online course on How to Protect Yourself and Others at the beginning of the year.

Plan for Adequate Outdoor Air Circulation

Condition Met	Condition Assessed
Yes	In accordance with CDC guidance, ensure that ventilation systems and fans operate properly and increase circulation of outdoor air as much as possible by opening windows and doors and other methods. Do not open windows and doors if doing so poses a safety or health risk to children using the facility (for example, allowing pollen in or exacerbating asthma symptoms). Maximize central air filtration for heating, ventilation, and air conditioning (HVAC) systems (targeted filter rating of at least MERV 13).

Each room has central air and heating. The filters (MERV-13) are inspected and changed regularly by our maintenance person.

Safe Water Systems and Features

Condition Met	Condition Assessed
Yes	Take steps to ensure that all water systems and features (e.g., drinking fountains, decorative fountains) are safe to use after a prolonged facility shutdown to minimize the risk of Legionnaires’ disease and other diseases associated with water.

Students and staff are encouraged to bring their own drinking water and containers. Our well water is tested monthly. Drinking fountains are closed. Disposable cups will be available in each classroom for students that have forgotten their own water container.

Handling Student Belongings

Condition Met	Condition Assessed
Yes	Keep each child's belongings separated and in an individually labeled storage container, cubby, or area. Send belongings home each day to be cleaned.

Students will keep their belongings in individual cubbies or in their own backpack that is hung on a hook or lined up outside of the classroom.

Employee Issues

Engage employees on COVID-19 plans and provide necessary training and accommodations.

Revisit existing bargaining agreement.

Condition Met	Condition Assessed
Yes	<ul style="list-style-type: none"> i. Engage the exclusive representatives of labor groups and work collaboratively in tailoring bargaining agreements to address the relevant employee issues in this checklist. Ideally, these are matters that would be resolved as part of the reopening planning process and prior to school starting so as to provide clarity for reopening. ii. Create a plan for future bargaining that may be necessary as additional issues arise.

i & ii. All staff will be consulted and protected according to their employee contract and Board policy.

Staffing Ratios

Condition Met	Condition Assessed
Yes	<ul style="list-style-type: none"> i. Ensure staffing levels are sufficient to meet unique facility cleanliness, physical distancing, student learning, and health and safety needs to address COVID-19. ii. Consider rolling staff cohorts to meet needs and avoid overwork.

i. & ii. We believe we have enough people and effective tools to maintain a clean learning environment. We will continually review and make any changes necessary to keep out students, staff and families safe.

Staff Training

Condition Met	Condition Assessed
Yes	<p>Develop and provide staff training or utilize state-provided training on:</p> <ul style="list-style-type: none"> i. Disinfecting frequency and tools and chemicals used in accordance with the Healthy Schools Act, CDPR guidance, and Cal/OSHA regulations. For staff who use hazardous chemicals for cleaning, specialized training is required. ii. Physical distancing of staff and students. iii. Symptom screening, including temperature checks. iv. Updates to the Injury and Illness Prevention Program (IIPP). v. State and local health standards and recommendations, including, but not limited to, the following: <ol style="list-style-type: none"> 1. Proper use of protective equipment, including information on limitations of some face coverings that do not protect the wearer and are not PPE but can help protect people near the wearer. Face coverings do not replace the need for physical distancing and frequent handwashing. Cloth face coverings are most essential when physical distancing is not possible. Also include training on removal and washing of cloth face coverings. 2. Cough and sneeze etiquette. 3. Keeping one's hands away from one's face. 4. Frequent handwashing and proper technique. 5. Confidentiality around health recording and reporting. vi. Training for school health staff on clinical manifestations of COVID-19, pediatric presentations, and CDC transmission-based precautions. vii. Training on trauma-informed practices and suicide prevention.

- i. Online training will be provided.
- ii. We will maintain physical distance while on campus.
- iii. We will receive a symptom check/screening tool from our school nurse and implement it daily.
- iv. We will update the plan as needed.
- v. We will follow Public Health Department guidelines.
- vi. The school nurse will instruct staff at the beginning of the year on a variety of health and safety topics as well the proper use of face coverings. All staff will also complete online training via Public School Works.
- vii. Staff complete annual training on Suicide Prevention via Public School Works.

Staff Liaison

Condition Met	Condition Assessed
Yes	Designate a staff liaison or liaisons to be responsible for responding to COVID-19 concerns. Employees should know who they are and how to contact them.

Carolyn Cramer is the staff contact. Kindell Tygart may be used as an alternate.

Reasonable Accommodations

Condition Met	Condition Assessed
Yes	<ul style="list-style-type: none"> i. Protect and support staff who are at higher risk for severe illness (medical conditions that the CDC says may have increased risks) or who cannot safely distance from household contacts at higher risk by providing options such as telework or negotiated change in classification or duties. ii. If reasonable accommodations are not practicable, the LEA should work with the employee to develop a flexible leave plan that endeavors to avoid exhausting the employee’s earned leave.

i & ii. Clear Creek School will diligently work to provide all staff with a safe, healthy environment. We will work to provide any needed accommodations as reasonable while on campus.

Communication

Stakeholder Engagement

Condition Met	Condition Assessed
Yes	School leaders should engage stakeholders, including families, staff, and labor partners in the school community, to formulate and implement the plans in this checklist.

Staff, Families and Board have received updates throughout the summer and updates will continue on a regular basis as new information becomes available. Parents had the opportunity to participate in three surveys to collect input and information on connectivity, Distance Learning satisfaction, and Hybrid schedule preferences. Prior to posting, this plan will be sent to all staff, the school Site Council, and Board members for review and input. It will also be sent to the Health Department for review and input. We continue to write and maintain plans as CDPH and the state develop new requirements.

Communicating COVID-19-related Protocols

Condition Met	Condition Assessed
Yes	Communicate to staff, students, and parents about new, COVID-19-related protocols, including: <ul style="list-style-type: none">i. Proper use of PPE/EPG.ii. Cleanliness and disinfection.iii. Transmission prevention.iv. Guidelines for families about when to keep students home from school.v. Systems for self-reporting symptoms.vi. Criteria and plan to close schools again for physical attendance of students.

Health and safety resources have been sent out to families periodically and continue to be posted on our website. The Public Health Guided Return to Site-Based Classroom Instruction, the COVID-19 Exposure Guide for Schools, and symptom check/screening have been sent out to all community members as well as being posted on our website. Staff and student training will be provided as previously stated in earlier sections of this plan.

Communication for Vulnerable Members of the School Community

Condition Met	Condition Assessed
Yes	Target communication for vulnerable members of the school community.

Communication Plan for Positive COVID-19 Case

Condition Met	Condition Assessed
Yes	Create a communications plan for if a school has a positive COVID-19 case. <ul style="list-style-type: none">i. Address the school's role in documenting, reporting, tracking, and tracing infections in coordination with public health officials.ii. Notify staff and families immediately of any possible cases of COVID-19. Review legal responsibilities and privacy rights for communicating about cases of the virus.iii. Provide guidance to parents, teachers, and staff reminding them of the importance of community physical distancing measures while a school is closed, including discouraging students or staff from gathering elsewhere.

	<ul style="list-style-type: none">iv. Provide information to parents regarding labor laws, Disability Insurance, Paid Family Leave, and Unemployment Insurance.v. Advise sick staff members and children not to return until they have met CDC criteria to discontinue home isolation.vi. Inform those who have had close contact with a person diagnosed with COVID-19 to stay home and self-monitor for symptoms and to follow CDC guidance if symptoms develop. If a person does not have symptoms follow appropriate CDC guidance for home isolation.
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The school has received template letters for various scenarios from the Public Health Department. They will be attached to this plan. We will also continue to collaborate with our school nurse and the Public Health Department for guidance if any other situations should arise.

Dear [Staff Member Name]:

Thank you for the information and we hope that your [friend or family member] is OK. For the time being, until [s/he] receives test results, please continue to follow all health and safety protocols, monitor your health, stay home if you are feeling sick, wash your hands frequently, practice physical distancing, and continue to wear your face covering. Contact your healthcare provider if you have additional concerns or call 211 to be advised of testing locations locally.

If your [friend or family member] tests positive for COVID-19 please contact Carolyn right away. Protocols are in place that will guide next steps.

Please let us know if you have any questions. Most importantly, please know how much we appreciate your bringing this forward. It truly shows your care and concern for your colleagues.

Sincerely,

Carolyn Cramer
Principal / Superintendent

COVID-19 Exposure Guide for Schools



NEVADA COUNTY
Public Health

Nevada County Public Health protocols for school classroom/cohort settings on:

- Onset of COVID-19 symptoms
- Potential exposure to and/or close contact with an individual who tests positive for COVID-19

	SCENARIO	ACTION	COMMUNICATION
1	A student or staff member either exhibits COVID-19 symptoms , answers "yes" to a health screening question or has a temp of 100.4 degrees or above.	<ul style="list-style-type: none"> • Student or staff: Stay home or be sent home • Contact healthcare provider/OptumServe for testing • Cohort OPEN 	No action needed.
2	A family member or someone in close contact with a student or staff member tests positive for COVID-19.	<ul style="list-style-type: none"> • Student or staff: report information to administrator, sent home, quarantine • Contact healthcare provider/OptumServe for testing • Cohort OPEN 	Letter to all students' families and staff
3	A student or staff person tests positive for COVID-19	<ul style="list-style-type: none"> • Student or staff: report information to administrator • Families of student or staff: quarantine, contact healthcare provider/OptumServe for testing • Cohort CLOSED for 14 days from last exposure 	To all students' families and staff: <ul style="list-style-type: none"> • Phone call and • Letter
4	A student or staff person tests negative for COVID-19 after any of the reasons in Scenarios 1 or 2	<ul style="list-style-type: none"> • Student or staff: May return three days after symptoms resolve, however must continue quarantine if in contact with C19+ family member • Cohort OPEN 	Letter to all students' families and school staff

For more information on COVID-19, visit mynevadacounty.com/coronavirus

Prepared in partnership between Nevada County Public Health and Nevada County Superintendent of Schools

Letter Template Scenario Four in a School or Cohort Setting
Follow-Up Letter to Letters One, Two, or Three
English & Spanish Versions

To be utilized when a student or staff member who has quarantined or isolated for any of the reasons in scenarios one, two or three and is tested - and tests negative.

Actions and Communications

- The cohort remains open.
- Even though the student or staff member has tested negative, if the student or staff member has had close contact with an individual who has tested positive for COVID-19, they must remain in quarantine or isolation for 14 days from last known contact with the individual.
- All families of students and staff of the cohort should be notified that the student or staff member tested negative.
- **Nevada County Public Health encourages community members to call 211 to connect about COVID 19**

- Other Resources:

- [May 20, 2020 Public Health Emergency Isolation Order](#)
- [May 20, 2020 Public Health Emergency Quarantine Order](#)
- [New Testing Guidelines](#)
- [COVID-19 Guidance: At Home Quarantine and Isolation Safety](#)
- [CDC Appendices- Glossary of Terms](#)
- [CDC Exposure Risk](#)
- [CDC Symptoms](#)
- [Marin HHS - Risk levels of knowing someone who tested positive for COVID-19](#)

- Otros recursos

- [20/05/20: Orden de aislamiento de emergencia de salud pública](#)
- [20/05/20: Orden de cuarentena de emergencia de salud pública](#)
- [Nuevas Pautas de Prueba](#)
- [Orientación sobre el COVID-19 Cuarentena en Casa y Seguridad de Aislamiento](#)
- [Apéndices Glosario de términos](#)
- [Orientación de salud pública para la exposición relacionada con la comunidad \(CDC\)](#)
- [Síntomas de la enfermedad del coronavirus \(CDC\)](#)
- [Alguien que conozco dio positivo por COVID-19. ¿Estoy en riesgo?](#)

Date, 2020

Dear [XXX School/Classroom] Parents and Guardians:

The health and safety of our students and staff are our top priority. This letter is to inform you that the student or staff member who had [exhibited symptoms and/or been in close contact with an individual who tested positive for COVID-19] has tested negative.

In accordance with Public Health guidance, the classroom cohort will continue to operate. We will update you with any additional pertinent information. Please let us know if you have any questions and contact your healthcare provider if you have any additional questions or concerns.

Sincerely,

Carolyn Cramer
Principal / Superintendent

Fecha, 2020

Estimados padres o tutores de [XXX School/Classroom]:

La salud y la seguridad de nuestros estudiantes y personal son nuestra principal prioridad. Esta carta es para informarle que el estudiante o miembro del personal que [exhibió síntomas y/o estuvo en contacto cercano con un individuo que dio positivo por COVID-19] ha resultado negativo.

De acuerdo con la guía de Salud Pública, el cohorte del aula continuará operando. Le actualizaremos con cualquier información adicional pertinente. Infórmenos si tiene alguna pregunta y comuníquese con su proveedor de atención médica si tiene preguntas o inquietudes adicionales.

Atentamente,

Carolyn Cramer
Principal / Superintendent

Letter Template Scenario Three in an Office Setting

To be utilized when a staff member in an office **tests positive** for COVID-19.

Note: Every scenario is unique, and this template is only provided as a guide. The template will be updated as public health guidance changes, and should be customized to meet the unique needs of your school/district.

WORKING DRAFT as of 06/08/20

<p>A staff member in an office tests positive for COVID-19.</p>	<ul style="list-style-type: none">● The office remains open unless otherwise directed by Public Health● The staff member is required to immediately notify their supervisor or the personnel department as well as Public Health.● The staff member is required to work with Public Health to assess potential worksite exposure, any recommended additional testing or steps, including quarantine or isolation instructions.● The staff member will quarantine, work remotely if possible, monitor symptoms, and seek guidance from their healthcare provider.● Nevada County Public Health encourages community members to call 211 to connect about COVID 19● Template Communication to Staff about COVID+ in Office● Doctor's letter may be required for return to work.
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Dear [Office] Staff:

A member of our SAEL Office Team has tested positive for COVID-19 and is now in quarantine/isolation. Public Health is working closely with the individual to assess and determine any potential worksite exposure and close contact they may have had with any other members of our team. You will be contacted by a Public Health representative if you may have had close contact.

The office remains open unless otherwise directed by Public Health. Please continue to follow all health and safety protocols, monitor your health, stay home if you are feeling sick, wash your hands frequently, practice physical distancing, and continue to wear your face covering. Please contact your healthcare provider or Public Health if you have further questions or concerns.

Thank you for all that you do to support the learning and success of students in Marin County and the health and wellbeing of our team.

Please find additional resources provided below.

Sincerely,

Erica Crane
Principal / Superintendent

Public Health and CDC Resources:

- [May 20, 2020 Public Health Emergency Isolation Order](#)
- [May 20, 2020 Public Health Order Household Members](#)
- [New Testing Guidelines](#)
- [COVID-19 Guidance: At Home Quarantine and Isolation Safety](#)

- [At Home Quarantine and Isolation Safety Spanish](#)
- [CDC Appendices- Glossary of Terms](#)
- [CDC Exposure Risk](#)
- [CDC Symptoms](#)
- [Marin HHS - Risk levels of knowing someone who tested positive for COVID-19](#)
- Marin Public Health: (415) 473-7191

Letter Template Scenario Two in a School or Office Setting

English & Spanish Versions

To be utilized when a student or staff member **lives with** a person or has been in **close contact with** a person who has **tested positive** for COVID-19.

Actions and Communications

- The cohort remains open.
- The student or staff member is expected to report this to the site administrator immediately, is excluded from the cohort, and they and all household members should quarantine, monitor symptoms, and contact their health providers and/or Public Health for additional steps and to schedule testing.
- The site administrator should gather any additional information regarding details of known contact and forward this information to Public Health.
- Public Health will advise of any additional next steps including support of expedited testing.
- If the student or staff member has siblings, family or household members at other school sites with possible exposure they should be excused from school and Public Health contacted to assess exposure risk and determine disposition (eg. exclude from cohort). *Public Health infectious disease exposure notice letter has been requested.*
- All families of students and staff members of the cohort should be notified that a student or staff member has a household member that has tested positive for COVID-19.
- **Nevada County Public Health encourages community members to call 211 to connect about COVID 19**

- Other Resources:
 - [May 20, 2020 Public Health Emergency Isolation Order](#)
 - [May 20, 2020 Public Health Emergency Quarantine Order](#)
 - [New Testing Guidelines](#)
 - [COVID-19 Guidance: At Home Quarantine and Isolation Safety](#)
 - [CDC Appendices- Glossary of Terms](#)
 - [CDC Exposure Risk](#)
 - [CDC Symptoms](#)
 - [Marin HHS - Risk levels of knowing someone who tested positive for COVID-19](#)
- Otros recursos
 - [20/05/20: Orden de aislamiento de emergencia de salud pública](#)
 - [20/05/20: Orden de cuarentena de emergencia de salud pública](#)
 - [Nuevas Pautas de Prueba](#)
 - [Orientación sobre el COVID-19 Cuarentena en Casa y Seguridad de Aislamiento](#)
 - [Apéndices Glosario de términos](#)
 - [Orientación de salud pública para la exposición relacionada con la comunidad \(CDC\)](#)
 - [Síntomas de la enfermedad del coronavirus \(CDC\)](#)
 - [Alguien que conozco dio positivo por COVID-19. ¿Estoy en riesgo?](#)

Date, 2020

Dear [XXX School/Classroom] Parents/Guardians and Staff:

The health and safety of our students and staff are our top priority. This letter is to inform you that a student or staff member in your child's cohort [lives with/has been in close contact with] a person who has tested positive for COVID-19.

Public Health has been notified and is taking further steps. **In accordance with Public Health guidance, the classroom cohort will continue to operate.** The individual and their immediate family/household members have been quarantined, are monitoring symptoms, and are working with their healthcare providers for additional steps, including testing if advised.

We will update you with any additional pertinent information when we receive it. Please continue to monitor [yourself/your student] for symptoms and stay home if you are experiencing influenza-like illness. Please contact your healthcare provider if you have any additional questions or concerns.

Sincerely,

Carolyn Cramer
Principal / Superintendent

Fecha, 2020

Estimados padres o tutores y personal de: [XXX School/Classroom]

La salud y la seguridad de nuestros estudiantes y personal son nuestra principal prioridad. Esta carta es para informarle que un estudiante o miembro del personal del cohorte de su hijo/a [vive con / ha estado en contacto cercano con] una persona que dio positivo por COVID-19.

Salud Pública ha sido notificada y está tomando medidas adicionales. **De acuerdo con la guía de Salud Pública, el cohorte del aula continuará operando.** El individuo y sus familiares inmediatos / miembros del hogar han sido puestos en cuarentena, están monitoreando los síntomas y están trabajando con sus proveedores de atención médica para pasos adicionales, incluidas las pruebas si se les recomienda.

Le actualizaremos con cualquier información adicional pertinente cuando la recibamos. Por favor continúe monitoreando [se/a su estudiante] por síntomas y quédese en casa si tiene una enfermedad similar a la influenza. Comuníquese con su proveedor de atención médica si tiene preguntas o inquietudes adicionales.

Atentamente,

Carolyn Cramer
Principal / Superintendent

Letter Template Scenario Two in a School or Office Setting

English & Spanish Versions

To be utilized when a student or staff member **lives with** a person or has been in **close contact with** a person who has **tested positive** for COVID-19.

Actions and Communications

- The cohort remains open.
- The student or staff member is expected to report this to the site administrator immediately, is excluded from the cohort, and they and all household members should quarantine, monitor symptoms, and contact their health providers and/or Public Health for additional steps and to schedule testing.
- The site administrator should gather any additional information regarding details of known contact and forward this information to Public Health.
- Public Health will advise of any additional next steps including support of expedited testing.
- If the student or staff member has siblings, family or household members at other school sites with possible exposure they should be excused from school and Public Health contacted to assess exposure risk and determine disposition (eg. exclude from cohort). *Public Health infectious disease exposure notice letter has been requested.*
- All families of students and staff members of the cohort should be notified that a student or staff member has a household member that has tested positive for COVID-19.
- **Nevada County Public Health encourages community members to call 211 to connect about COVID 19**

- Other Resources:
 - [May 20, 2020 Public Health Emergency Isolation Order](#)
 - [May 20, 2020 Public Health Emergency Quarantine Order](#)
 - [New Testing Guidelines](#)
 - [COVID-19 Guidance: At Home Quarantine and Isolation Safety](#)
 - [CDC Appendices- Glossary of Terms](#)
 - [CDC Exposure Risk](#)
 - [CDC Symptoms](#)
 - [Marin HHS - Risk levels of knowing someone who tested positive for COVID-19](#)

Recursos de Salud Pública, CDC y la Oficina de Educación del Condado de Marin:

- Otros recursos
 - [20/05/20: Orden de aislamiento de emergencia de salud pública](#)
 - [20/05/20: Orden de cuarentena de emergencia de salud pública](#)
 - [Nuevas Pautas de Prueba](#)
 - [Orientación sobre el COVID-19 Cuarentena en Casa y Seguridad de Aislamiento](#)
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 - [Síntomas de la enfermedad del coronavirus \(CDC\)](#)
 - [Alguien que conozco dio positivo por COVID-19. ¿Estoy en riesgo?](#)

Date, 2020

Dear [XXX School/Classroom] Parents/Guardians and Staff:

The health and safety of our students and staff are our top priority. This letter is to inform you that a student or staff member in your child's class [lives with/has been in close contact with] a person who has tested positive for COVID-19.

Public Health has been notified and is taking further steps. **In accordance with Public Health guidance, the classroom will continue to operate.** The individual and their immediate family/household members have been quarantined, are monitoring symptoms, and are working with their healthcare providers for additional steps, including testing if advised.

We will update you with any additional pertinent information when we receive it. Please continue to monitor [yourself/your student] for symptoms and stay home if you are experiencing influenza-like illness. Please contact your healthcare provider if you have any additional questions or concerns.

Sincerely,

Carolyn Cramer
Principal / Superintendent

Fecha, 2020

Estimados padres o tutores y personal de: [XXX School/Classroom]

La salud y la seguridad de nuestros estudiantes y personal son nuestra principal prioridad. Esta carta es para informarle que un estudiante o miembro del personal del cohorte de su hijo/a [vive con / ha estado en contacto cercano con] una persona que dio positivo por COVID-19.

Salud Pública ha sido notificada y está tomando medidas adicionales. **De acuerdo con la guía de Salud Pública, el cohorte del aula continuará operando.** El individuo y sus familiares inmediatos / miembros del hogar han sido puestos en cuarentena, están monitoreando los síntomas y están trabajando con sus proveedores de atención médica para pasos adicionales, incluidas las pruebas si se les recomienda.

Le actualizaremos con cualquier información adicional pertinente cuando la recibamos. Por favor continúe monitoreando [se/a su estudiante] por síntomas y quédese en casa si tiene una enfermedad similar a la influenza. Comuníquese con su proveedor de atención médica si tiene preguntas o inquietudes adicionales.

Atentamente,
Carolyn Cramer
Principal / Superintendent

Checklist: Planning for In-Person Classes

Actions to take and points to consider	Notes
<p>Check in with your child each morning for signs of illness. If your child has a temperature of 100.4 degrees or higher, they should not go to school.</p> <p>Make sure your child does not have a sore throat or other signs of illness, like a cough, diarrhea, severe headache, vomiting, or body aches.</p> <p>If your child has had close contact to a COVID-19 case, they should not go to school. Follow guidance on what to do when someone has known exposure.</p>	
<p>Identify your school point person(s) to contact if your child gets sick.</p>	<p><i>Name of school point person(s):</i></p> <p><i>Contact information:</i></p>
<p>Be familiar with local COVID-19 testing sites in the event you or your child develops symptoms. These may include sites with free testing available.</p>	<p><i>My local testing options:</i></p>
<p>Make sure your child is up-to-date with all recommended vaccines, including for flu. All school-aged children should get an influenza flu vaccine every season, with rare exceptions. This is especially important this year because we do not yet know if being sick with COVID-19 at the same time as the flu will result in more severe illness.</p>	<p><i>Date of flu vaccination:</i></p>
<p>Review and practice proper hand washing techniques at home, especially before and after eating, sneezing, coughing, and adjusting a face cover. Make hand washing fun and explain to your child why it's important.</p>	
<p>Be familiar with how your school will make water available during the day. Consider packing a water bottle.</p>	
<p>Develop daily routines before and after school—for example, things to pack for school in the morning (like hand sanitizer and an additional (back up) cloth face covering) and things to do when you return home (like washing hands immediately and washing worn cloth face coverings).</p>	



cdc.gov/coronavirus

<p>Talk to your child about precautions to take at school. Children may be advised to:</p> <ul style="list-style-type: none"> ◦ Wash and sanitize their hands more often. ◦ Keep physical distance from other students. ◦ Wear a cloth face covering. ◦ Avoid sharing objects with other students, including water bottles, devices, writing instruments, and books. ◦ Use hand sanitizer (that contains at least 60% alcohol.) Make sure you're using a safe product. FDA recalled products that contain toxic methanol. Monitor how they feel and tell an adult if they are not feeling well. 	
<p>Develop a plan as a family to protect household members who are at increased risk for severe illness.</p>	
<p>Make sure your information is current at school, including emergency contacts and individuals authorized to pick up your child(ren) from school. If that list includes anyone who is at increased risk for severe illness from COVID-19, consider identifying an alternate person.</p>	
<p>Be familiar with your school's plan for how they will communicate with families when a positive case or exposure to someone with COVID-19 is identified and ensure student privacy is upheld.</p>	
<p>Plan for possible school closures or periods of quarantine. If transmission is increasing in your community or if multiple children or staff test positive for COVID-19, the school building might close. Similarly, if a close contact of your child (within or outside of school) tests positive for COVID-19, your child may need to stay home for a 2-week quarantine period. You may need to consider the feasibility of teleworking, taking leave from work, or identifying someone who can supervise your child in the event of school building closures or quarantine.</p>	
<p>Plan for transportation:</p> <ul style="list-style-type: none"> ◦ If your child rides a bus, plan for your child to wear a cloth face covering on the bus and talk to your child about the importance of following bus rules and any spaced seating rules. ◦ If carpooling, plan on every child in the carpool and the driver wearing cloth face coverings for the entire trip. If your school uses the cohort model, consider finding families within your child's group/cohort at school to be part of the carpool. 	
<p>If your child has an Individualized Education Program (IEP) or 504 Plan or receives other learning support (e.g., tutoring), ask your school how these services will continue.</p>	
<p>If your child receives speech, occupational or physical therapy or other related services from the school, ask your school how these services will continue.</p>	
<p>If your child receives mental health or behavioral services (e.g., social skills training, counseling), ask your school how these services will continue.</p>	

If your school uses a cohorting model, consider limiting your child's in-person out-of-school interactions to children in the same cohort or to activities where physical distancing can be maintained.	
Reinforce the concept of physical distancing with your child.	
Talk to your school administrators and teachers about their plans for physical education and physical activity (e.g., recess). <i>Safer options include being outdoors when possible, reducing the number of people in an indoor space, and encouraging students to stay at least 6 ft apart.</i>	
Ask how your school plans to help ensure that students are following practices to reduce the spread of COVID-19.	

Cloth Face Coverings

If your school is requiring or encouraging cloth face coverings

Actions to take and points to consider	Notes
Have multiple cloth face coverings, so you can wash them daily and have back-ups ready. Choose cloth face coverings that <ul style="list-style-type: none"> ◦ Fit snugly but comfortably against the side of the face ◦ Completely cover the nose and mouth ◦ Are secured with ties or ear loops ◦ Include multiple layers of fabric ◦ Allow for breathing without restriction ◦ Can be washed and machine dried without damage or change to shape 	
Label your child's cloth face coverings clearly in a permanent marker so that they are not confused with those of other children.	
Practice with your child putting on and taking off cloth face coverings without touching the cloth.	
Explain the importance of wearing a cloth face covering and how it protects other people from getting sick.	
Consider talking to your child about other people who may not be able to wear cloth face coverings for medical reasons (e.g., asthma).	
As a family, model wearing cloth face coverings, especially when you are in situations where physical distancing is difficult to maintain or impossible.	
If you have a young child, help build their comfort wearing a cloth face covering and become comfortable seeing others in face covers. <ul style="list-style-type: none"> ◦ Praise your child for wearing a cloth face covering correctly. ◦ Put a cloth face covering on stuffed animals. ◦ Draw a cloth face covering on a favorite book character. ◦ Show images of other children wearing cloth face coverings. ◦ Allow your child to choose their cloth face covering that meets any dress requirements your school may have. ◦ Suggestions from the American Academy of Pediatrics 	

Consider providing your child with a container (e.g., labeled resealable bag) to bring to school to store their cloth face coverings when not wearing it (e.g., when eating).

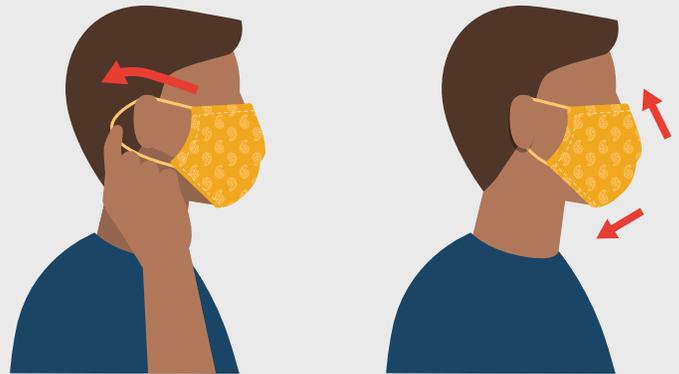
Mental Health & Social-Emotional Wellbeing Considerations

Actions to take and points to consider	Notes
Talk with your child about how school will look different (e.g., desks far apart from each other, teachers maintaining physical distance, possibility of staying in the classroom for lunch).	
Talk with your child about how school is going and about interactions with classmates and teachers. Find out how your child is feeling and communicate that what they may be feeling is normal.	
Anticipate behavior changes in your child. Watch for changes like excessive crying or irritation, excessive worry or sadness, unhealthy eating or sleeping habits, difficulty concentrating, which may be signs of your child struggling with stress and anxiety .	
Try to attend school activities and meetings. Schools may offer more of these virtually. As a parent, staying informed and connected may reduce your feelings of anxiety and provide a way for you to express any concerns you may have about your child's school.	
Ask your school about any plans to reduce potential stigma related to having or being suspected of having COVID-19.	
Check if your school has any systems in place to identify and provide mental health services to students in need of support. If so, identify a point of contact for these services at your school.	<p><i>Name of school point person:</i></p> <p><i>Contact information:</i></p>
Check if your school has a plan to help students adjust to being back in school. Students might need help adjusting to how COVID-19 has disrupted their daily life. Support may include school counseling and psychological services (including grief counseling), social-emotional learning (SEL)-focused programs and curricula, and peer/social support groups.	
Check if your school will provide training for students in mindfulness, incorporating SEL into classroom curriculum (either virtually or in-person), or support a child's ability to cope with stress and anxiety. If not, consider asking about ways to add this to your child's at-home learning.	
<p>You can be a role model for your child by practicing self-care:</p> <ul style="list-style-type: none"> ◦ Take breaks ◦ Get plenty of sleep ◦ Exercise ◦ Eat well ◦ Stay socially connected 	

How to wear cloth face coverings

WEAR YOUR FACE COVERING CORRECTLY

- Wash your hands before putting on your face covering
- Put it over your nose and mouth and secure it under your chin
- Try to fit it snugly against the sides of your face
- Make sure you can breathe easily



WEAR A FACE COVERING TO PROTECT OTHERS

- Wear a face covering that covers your nose and mouth to help protect others in case you're infected with COVID-19 but don't have symptoms
- Wear a face covering in public settings when around people who don't live in your household, especially when it may be difficult for you to stay six feet apart
- Wear a face covering correctly for maximum protection
- Don't put the face covering around your neck or up on your forehead
- Don't touch the face covering, and, if you do, wash your hands or use hand sanitizer to disinfect

Injury & Illness Prevention Program (IIPP)

Clear Creek Elementary School District



*Adapted from Cal/OSHA Workplace Injury & Illness Prevention
Model Program for Non-High Hazard Employers, Publications Unit
Rev. November 2020*

INTRODUCTION

The Clear Creek Elementary School District is committed to providing a safe and healthful workplace for all employees and to providing a safe and healthful facility for employees and visitors. To achieve this goal, the Clear Creek Elementary School District office has implemented this Injury and Illness Prevention Program (IIPP). The program is designed to comply with the requirements contained in Title 8 of the California Code of Regulations, Section 3203 (T8 CCR 3203) and consists of the following eight elements:

- Responsibility
- Compliance
- Communication
- Hazard Assessment
- Accident/Exposure Investigation
- Hazard Correction
- Training and Instruction
- Recordkeeping

The intent of this program is to prevent and/or minimize the probability of injuries and illness to employees, workers, visitors, and to comply with all applicable state, federal and local health and safety codes.

This plan has been adapted from the Cal/OSHA Workplace Injury & Illness Prevention Model Program for Non-High Hazard Employers, Publications Unit Rev. April 2018.

https://www.dir.ca.gov/dosh/dosh_publications/IIPP-Model-nonhigh-hazard.pdf

RESPONSIBILITY

The Injury and Illness Prevention Program (IIPP) administrator, Superintendent, and Business Official have the authority and the responsibility for implementing and maintaining this IIPP for Clear Creek Elementary School District employees and facilities.

The person(s) with overall responsibility and authority for implementing the Injury and Illness Prevention Program are listed below:

Name: Kindell Tygart

Title: Business Official

Phone Number: (530) 273-3664 ext. 202

Name: Carolyn Cramer

Title: Superintendent

Phone Number: (530) 273-3664 ext. 203

Managers and supervisors are responsible for implementing and maintaining the IIPP in their work areas and for answering workers questions about the IIPP. A copy of this IIPP is available at the District/School Office.

COMPLIANCE

All workers, including managers and supervisors, are responsible for complying with safe and healthful work practices. Our system of ensuring that all workers comply with these practices includes the following practices:

- Informing workers of the provisions of our IIPP
- Providing training to workers whose safety performance is deficient

COMMUNICATION

All managers and supervisors are responsible for communicating with all workers about occupational safety and health in a form readily understandable by all workers. Our communication system encourages all workers to inform their managers and supervisors about workplace hazards without fear of reprisal.

Our communication system includes the following items:

- New worker orientation including a discussion of safety and health policies and procedures
- Review of our IIPP
- Training programs
- Regularly scheduled safety meetings
- Posted or distributed safety information
- A system for workers to anonymously inform management about workplace hazards

HAZARD ASSESSMENT

Inspections to identify and evaluate workplace hazards shall be performed by a competent observer.

Inspections are performed annually and, in addition, when the following occurs:

1. Establishment of our IIPP
2. New substances, processes, procedures, or equipment which present potential new hazards are introduced into our workplace
3. New, previously unidentified hazards are recognized
4. Occupational injuries and illnesses
5. Workplace conditions warrant an inspection.

ACCIDENT/EXPOSURE INVESTIGATIONS

Procedures for investigating workplace accidents and hazardous substance exposures include:

1. Interviewing injured workers and witnesses
2. Examining the workplace for factors associated with the accident/exposure
3. Determining the cause of the accident/exposure
4. Taking corrective action to prevent the accident/exposure from reoccurring
5. Recording the findings and actions taken

HAZARD CORRECTION

Unsafe or unhealthy work conditions, practices or procedures shall be corrected in a timely manner based on the severity of the hazards. Hazards shall be corrected according to the following procedures:

1. When observed or discovered
2. When an imminent hazard exists which cannot be immediately abated without endangering employee(s) and/or property, all exposed workers will be removed from the area except those necessary to correct the existing conditions. Workers who are required to correct the hazardous condition shall be provided with the necessary protection.

TRAINING AND INSTRUCTION

All workers, including managers and supervisors, shall have training and instruction on general and job-specific safety and health practices. Training and instruction is provided:

1. When the IIPP is first established
2. To all new workers
3. To all workers given new job assignments for which training has not been previously provided
4. Whenever new substances, processes, procedures, or equipment are introduced to the workplace and represent a new hazard
5. Whenever the employer is made aware of a new or previously unrecognized hazard
6. To supervisors to familiarize them with the safety and health hazards to which workers under their immediate direction and control may be exposed
7. To all workers with respect to hazards specific to each employee's job assignment

General workplace safety and health practices include, but are not limited to, the following:

1. Implementation and maintenance of the IIPP.
2. Emergency action and fire prevention plan.
3. Provisions for medical services and first aid including emergency procedures.
4. Prevention of musculoskeletal disorders, including proper lifting techniques.
5. Proper housekeeping, such as keeping stairways and aisles clear, work areas neat and orderly, and promptly cleaning up spills.
6. Prohibiting horseplay, scuffling, or other acts that adversely influence safety.
7. Proper storage to prevent stacking goods in an unstable manner and storing goods against doors, exits, fire extinguishing equipment, and electrical panels.
8. Proper reporting of hazards and accidents to supervisors.
9. Hazard communication, including worker awareness of potential chemical hazards, and proper labeling of containers.
10. Proper storage and handling of toxic and hazardous substances including prohibiting eating or storing food and beverages in areas where they can become contaminated.

RECORDKEEPING

We are a local governmental entity (county, city, district, or/and any public or quasi-public corporation or public agency), and we are not required to keep written records of the steps taken to implement and maintain our IIPP. While written records are not required, we will endeavor to maintain the following records:

1. Records of hazard assessment inspections
2. Documentation of safety and health training

REPORT OF UNSAFE CONDITION OR HAZARD

EMPLOYEE REPORT: Employees may submit this form anonymously to the Superintendent or the Business Official. No employee will be disciplined or discharged for reporting any workplace hazard or unsafe condition.

Location of condition believed to be unsafe or hazardous: _____

Date and time condition or hazard observed: _____

Description of unsafe condition or hazard: _____

What changes would you recommend to correct the condition or hazard?

Person to whom this report is being sent: _____

Date report was sent: _____

How was report delivered to responsible person: _____

If employee desires a response from the supervisor, the report must be signed.

Signature of Employee

Date

EMPLOYER RESPONSE:

Date report received: _____ How received: _____

Name of Person Investigating Report: _____

Results of Investigation (what was found/was condition unsafe or hazardous?). Attach additional pages if necessary: _____

Action taken to correct hazard or unsafe condition, if appropriate, or information provided as to why condition was not unsafe or hazardous. Attach additional pages if necessary:

Signature of Person Investigating _____ Date _____

HAZARD ASSESSMENT AND CORRECTION RECORD

Date of Inspection: _____ Person Conducting Inspection: _____

Unsafe Condition or Work Practice: _____

Corrective Action Taken: _____

Date of Inspection: _____ Person Conducting Inspection: _____

Unsafe Condition or Work Practice: _____

Corrective Action Taken: _____

Date of Inspection: _____ Person Conducting Inspection: _____

Unsafe Condition or Work Practice: _____

Corrective Action Taken: _____

INJURY ASSESSMENT AND CORRECTION RECORD

(First section to be filled out by Safety Administrator and then sent to injured employee's supervisor)

Employee Name: _____ Position: _____

Type of Injury: _____ Date of Injury: _____

Location of Injury: _____

Explain How Injury Happened: _____

Date of Inspection:

Person Conducting Inspection:

Unsafe Condition or Work Practice:

Corrective Action Taken:

Signature: _____ Date: _____

Injury and Illness Prevention Program COVID-19 Addendum

Employee Training

Provide regular training for employees on the following topics using interactive methods that are easy to understand including verbal, visual, audiovisual and picture-centered handouts and other resources:

- What is COVID-19 and how is it spread from person to person and on surfaces and high touch areas
- Signs and symptoms of COVID-19
- When to seek medical attention if not feeling well or experiencing symptoms of COVID-19
- Prevention of the spread of COVID-19 if you are sick or have had exposure to any individual who tests positive
- Physical distancing guidelines
- Importance of washing hands with soap and water for at least 20 seconds or use of hand sanitizer if soap and water are not readily available
 - Hand washing should occur before and after using the toilet, eating, coming and going to work, after interactions with others, after contacting shared surfaces or tools, before and after wearing masks or gloves, and after blowing nose or sneezing
- Methods to avoid touching eyes, nose and mouth. Particularly after touching surfaces and before washing or using hand sanitizer
- Coughing and sneezing etiquette
- Safely using cleansers and disinfectants
 - Reading labels, wearing proper personal protective equipment (PPE), hazard review and steps to minimize harm to employees using those products.

Procedures to Help Prevent the Spread of COVID-19

- Employees will take temperatures and screen for symptoms on a daily basis. Monthly logs will be turned in to the business official and kept confidential. If an employee has a fever of 100.4 degrees Fahrenheit or greater, the employee will be sent home. If they have a cough, fever, shortness of breath or have been exposed to anyone with a positive diagnosis, they will also be sent home.
- If an employee is not feeling well and is exhibiting symptoms that may be attributed to COVID-19, such as acute respiratory symptoms, persistent cough, chills or a fever, Clear Creek School will do the following:
 - Provide resources including how to seek medical care information.
 - An employee will be sent home to until
 - A) 10 days have passed
 - B) A doctor's note of explanation is received and they are cleared to come back to work
 - C) A negative COVID test is received
- If informed that an employee tests positive for COVID-19, Clear Creek will provide notice to health officials in the county/city in which they are working to thus provide Clear Creek with further guidance. Information includes but is not limited to:
 - The employee's work location, work hours, general and specific work duties, if the employee has traveled to multiple worksites recently with timing, and the last day the employee was at work. Identify who has been in contact with the employee. The

- employee's name will not be disclosed unless asked for by the health officials.
- All employees are obligated to report immediately if they know or learn that they have been directly exposed to anyone that has tested positive for COVID-19.
- Employees who are out with fever or acute respiratory symptoms are prohibited from reporting to work until both of the following occur:
 1. They are free of all symptoms for at least 72 hours, without the use of fever reducing or other symptom altering medicines. (e.g. cough suppressants, Tylenol, or other prescribed or over the counter remedies.)
 2. At least 10 days have passed since the symptoms first appeared.
- Clear Creek will establish routine schedule to clean and disinfect common surface and objects in the workplace.
- This includes but is not limited to:
 - Tools, machinery, containers, desktops, counters, tables, chairs, benches, door handles, knobs, doorbells, drinking fountains, appliances such as coffee pot or microwave, refrigerators, vending machines, portable restroom and bathroom surfaces, automobiles – inside and out, and trash cans.
- The process of disinfecting includes providing disinfecting products, any PPE required for their safe use along with review of manufacturer instructions or protocols for proper use.

Procedures to Increase Physical Distancing and Consistently Enforce Physical Distancing Protocols

Physical distancing is an effective method that can help stop or slow the spread of an infectious disease by limiting the contact between people. For COVID-19, the recommended distance is at least 6 feet.

Employees will be asked to practice distancing including, but not limited to the following:

- When working indoors or outdoor areas
- Coming and going from vehicles
- Limit or restrict riding in the same vehicle
- Entering, working and exiting physical buildings or other structures
- During breaks and lunch periods
- When other work activities including using various tools and shared equipment
- When using a shared restroom

Good Sanitation Practices

- Check restroom facilities frequently and make sure they are clean and sanitary
- Assign an employee to check restrooms, open doors, re-stock toilet paper, clean and sanitize as necessary
- Make sure handwashing areas have plenty of soap, paper towels and that someone is cleaning and sanitizing
- Make sure handwashing supplies are re-stocked regularly
- Assign an employee to oversee appropriate PPE including but not limited to gloves and facial coverings.
- Sanitize frequently

Limit Non-Essential Visits and Travel

- Transition into on-line meetings.
- Limit unnecessary travel, this includes personal employee vehicles and district provided vehicles, with multiple passengers.
- Discourage or eliminate all non-essential and non-related services, such as entertainment activities.

Work Related Injuries and Illnesses

If an employee feels he/she has contracted COVID at work, the employee should report it to their supervisor and AMC CallConnect, who will triage for appropriate care including referral for treatment.

AMC CallConnect phone number: (844) 691-4111



COVID-19 INDUSTRY GUIDANCE: Schools and School- Based Programs

Release date: **July 17, 2020**

All guidance should be implemented only with county health officer approval following their review of local epidemiological data including cases per 100,000 population, rate of test positivity, and local preparedness to support a health care surge, vulnerable populations, contact tracing, and testing.



OVERVIEW

Communities across the state are preparing for the forthcoming school year. To assist with that planning process, the following guidelines and considerations are intended to help school and community leaders plan and prepare to resume in-person instruction.

This guidance is interim and subject to updates. These guidelines and considerations are based on the best available public health data at this time, international best practices currently employed, and the practical realities of managing school operations; as new data and practices emerge. Additionally, the guidelines and considerations do not reflect the full scope of issues that school communities will need to address, which range from day-to-day site-based logistics to the social and emotional well-being of students and staff.

California public schools (traditional and charter), private schools (including nonpublic nonsectarian schools), school districts, and county offices of education, herein referred to as schools, will determine the most appropriate instructional model, taking into account the needs of their students and staff, and their available infrastructure. This guidance is not intended to prevent a school from adopting a distance learning, hybrid, or mixed-delivery instructional model to ensure safety. Schools are not required to seek out or receive approval from a state or local public health officer prior to adopting a distance-learning model.

Implementation of this guidance will depend on local public health conditions, including those listed [here](#). Communities meeting those criteria, such as lower incidence of COVID-19 and adequate preparedness, may implement the guidance described below as part of a phased reopening. All decisions about following this guidance should be made in collaboration with local health officials and other authorities.

Implementation of this guidance should be tailored for each setting, including adequate consideration of instructional programs operating at each school site and the needs of students and families. School leaders should engage relevant stakeholders—including families, staff and labor partners in the school community—to formulate and implement plans that consider the following:

- **Student, Family and Staff Population:** Who are the student, family and staff populations who will be impacted by or can serve as partners in implementing any of the following measures?
- **Ability to Implement or Adhere to Measures:** Do staff, students and families have the tools, information, resources and ability to successfully adhere to or implement the new measures?
- **Negative or Unintended Consequences:** Are there any negative or unintended consequences to staff, students or families of implementing the measures and how can those consequences be mitigated?

This guidance is not intended to revoke or repeal any worker rights, either statutory, regulatory or collectively bargained, and is not exhaustive, as it does not include county health orders, nor is it a substitute for any existing safety and health-related regulatory requirements such as those of Cal/OSHA. Stay current on changes to public health guidance and state/local orders, as the COVID-19 situation continues.



1. General Measures

- Establish and continue communication with local and State authorities to determine current disease levels and control measures in your community. For example:
 - Review and refer to, if applicable, the relevant county variance documentation. Documentation can be found [here](#).
 - Consult with your county health officer, or designated staff, who are best positioned to monitor and provide advice on local conditions. A directory can be found [here](#).
 - Collaborate with other schools and school partners in your region, including the county office of education.
 - Regularly review updated guidance from state agencies, including the [California Department of Public Health](#) and [California Department of Education](#).
- Establish a written, worksite-specific COVID-19 prevention plan at every facility, perform a comprehensive risk assessment of all work areas and work tasks, and designate a person at each school to implement the plan.
 - Identify contact information for the local health department where the school is located for communicating information about COVID-19 outbreaks among students or staff.
 - Incorporate the [CDPH Guidance](#) for the Use of Face Coverings, into the School Site Specific Plan that includes a policy for handling exemptions.
 - Train and communicate with workers and worker representatives on the plan. Make the written plan available and accessible to workers and worker representatives.
 - Regularly evaluate the workplace for compliance with the plan and document and correct deficiencies identified.
 - Investigate any COVID-19 illness and determine if any work-related factors could have contributed to risk of infection. Update the plan as needed to prevent further cases.
 - Implement the necessary processes and protocols when a workplace has an outbreak, in accordance with [CDPH guidelines](#).
 - Identify individuals who have been in close contact (within six feet for

15 minutes or more) of an infected person and take steps to isolate COVID-19 positive person(s) and close contacts. See Section 10 for more detail.

- Adhere to these guidelines. Failure to do so could result in workplace illnesses that may cause classrooms or the entire school to be temporarily closed or limited.
- Evaluate whether and to what extent external community organizations can safely utilize the site and campus resources. Ensure external community organizations that use the facilities also follow this guidance.
- Develop a plan for the possibility of repeated closures of classes, groups or entire facilities when persons associated with the facility or in the community become ill with COVID-19. See Section 10 below.
- Develop a plan to further support students with access and functional needs who may be at increased risk of becoming infected or having unrecognized illness due to COVID-19. For example, review existing student health plans to identify students who may need additional accommodations, develop a process for engaging families for potentially unknown concerns that may need to be accommodated or identify additional preparations for classroom and non-classroom environments as needed. Groups who might be at increased risk of becoming infected or having unrecognized illness include the following:
 - Individuals who have limited mobility or require prolonged and close contact with others, such as direct support providers and family members;
 - Individuals who have trouble understanding information or practicing preventive measures, such as hand washing and physical distancing; and
 - Individuals who may not be able to communicate symptoms of illness.
- Schools should review the [CDPH Guidance for the Use of Face Coverings](#) and any applicable local health department guidance and incorporate face-covering use for students and workers into their COVID-19 prevention plan. Some flexibility may be needed for younger children consistent with child development recommendations. See Section 3 for more information.



2. Promote Healthy Hygiene Practices

- Teach and reinforce [washing hands](#), avoiding [contact with one's eyes, nose, and mouth](#), and [covering coughs and sneezes](#) among students and staff.
 - Teach students and remind staff to use tissue to wipe their nose and to cough/sneeze inside a tissue or their elbow.
 - Students and staff should wash their hands frequently throughout the day, including before and after eating; after coughing or sneezing; after classes where they handle shared items, such as outside recreation, art, or shop; and before and after using the restroom.
 - Students and staff should wash their hands for 20 seconds with soap, rubbing thoroughly after application. Soap products marketed as “antimicrobial” are not necessary or recommended.
 - Staff should model and practice handwashing. For example, for lower grade levels, use bathroom time as an opportunity to reinforce healthy habits and monitor proper handwashing.
 - Students and staff should use fragrance-free hand sanitizer when handwashing is not practicable. Sanitizer must be rubbed into hands until completely dry. Note: frequent handwashing is more effective than the use of hand sanitizers.
 - Ethyl alcohol-based hand sanitizers are preferred and should be used when there is the potential of unsupervised use by children.
 - Isopropyl hand sanitizers are more toxic when ingested or absorbed in skin.
 - Do not use hand sanitizers that may [contain methanol](#) which can be hazardous when ingested or absorbed.
 - Children under age 9 should only use hand sanitizer under adult supervision. Call Poison Control if consumed: 1-800-222-1222.
- Consider portable handwashing stations throughout a site and near classrooms to minimize movement and congregations in bathrooms to the extent practicable.
- Develop routines enabling students and staff to regularly wash their hands at staggered intervals.
- Ensure adequate supplies to support healthy hygiene behaviors, including soap, tissues, no-touch trashcans, face coverings, and hand sanitizers with at least 60 percent ethyl alcohol for staff and children who can safely use hand sanitizer.

- Information contained in the [CDPH Guidance](#) for the Use of Face Coverings should be provided to staff and families, which discusses the circumstances in which face coverings must be worn and the exemptions, as well as any policies, work rules, and practices the employer has adopted to ensure the use of face coverings.
- Employers must provide and ensure staff use face coverings in accordance with CDPH guidelines and all required protective equipment.
- The California Governor's Office of Emergency Services (CalOES) and the Department of Public Health (CDPH) are and will be working to support procurement and distribution of face coverings and personal protective equipment. Additional information can be found [here](#).
- Strongly recommend that all students and staff be immunized each autumn against influenza unless contraindicated by personal medical conditions, to help:
 - Protect the school community
 - Reduce demands on health care facilities
 - Decrease illnesses that cannot be readily distinguished from COVID-19 and would therefore trigger extensive measures from the school and public health authorities.
- Nothing in this guidance should be interpreted as restricting access to appropriate educational services.



3. Face Coverings

Face coverings must be used in accordance with [CDPH guidelines](#) unless a person is exempt as explained in the guidelines, particularly in indoor environments, on school buses, and areas where physical distancing alone is not sufficient to prevent disease transmission.

- Teach and reinforce use of [face coverings](#), or in limited instances, face shields.
- Students and staff should be frequently reminded not to touch the face covering and to [wash their hands](#) frequently.
- Information should be provided to all staff and families in the school community on [proper use, removal, and washing of cloth face coverings](#).
- Training should also include policies on how people who are exempted from wearing a face covering will be addressed.

STUDENTS

Age	Face Covering Requirement
Under 2 years old	No
2 years old – 2 nd grade	Strongly encouraged**
3 rd grade – High School	Yes, unless exempt

**Face coverings are strongly encouraged for young children between two years old and second grade, if they can be worn properly. A face shield is an acceptable alternative for children in this cohort who cannot wear them properly.

- Persons younger than two years old, anyone who has trouble breathing, anyone who is unconscious or incapacitated, and anyone who is otherwise unable to remove the face covering without assistance are exempt from wearing a face covering.
- A cloth face covering or face shield should be removed for meals, snacks, naptime, or outdoor recreation, or when it needs to be replaced. When a cloth face covering is temporarily removed, it should be placed in a clean paper bag (marked with the student's name and date) until it needs to be put on again.
- In order to comply with this guidance, schools must exclude students from campus if they are not exempt from wearing a face covering under CDPH guidelines and refuse to wear one provided by the school. Schools should develop protocols to provide a face covering to students who inadvertently fail to bring a face covering to school to prevent unnecessary exclusions. Schools should offer alternative educational opportunities for students who are excluded from campus.

STAFF

- All staff must use face coverings in accordance with [CDPH guidelines](#) unless Cal/OSHA standards require respiratory protection.
- In limited situations where a face coverings cannot be used for pedagogical or developmental reasons, (i.e. communicating or assisting young children or those with special needs) a face shield can be used instead of a cloth face covering while in the classroom as long as the wearer maintains physical distance from others, to the extent practicable. Staff must return to wearing a face covering outside of the classroom.

- Workers or other persons handling or serving food must use gloves in addition to face coverings. Employers should consider where disposable glove use may be helpful to supplement frequent handwashing or use of hand sanitizer; examples are for workers who are screening others for symptoms or handling commonly touched items.



4. Ensure Teacher and Staff Safety

- Ensuring staff maintain physical distancing from each other is critical to reducing transmission between adults.
- Ensure that all staff use face coverings in accordance with CDPH guidelines and Cal/OSHA standards.
- Support staff who are at higher risk for severe illness or who cannot safely distance from household contacts at higher risk, by providing options such as telework, where appropriate, or teaching in a virtual learning or independent study context.
- Conduct all staff meetings, professional development training and education, and other activities involving staff with physical distancing measures in place, or virtually, where physical distancing is a challenge.
- Minimize the use of and congregation of adults in staff rooms, break rooms, and other settings.
- Implement procedures for daily symptom monitoring for staff.



5. Intensify Cleaning, Disinfection, and Ventilation

- Consider suspending or modifying use of site resources that necessitate sharing or touching items. For example, consider suspending use of drinking fountains and instead encourage the use of reusable water bottles.
- Staff should [clean and disinfect](#) frequently-touched surfaces at school and on school buses at least daily and, as practicable, these surfaces should be cleaned and disinfected frequently throughout the day by trained custodial staff.
- Buses should be thoroughly cleaned and disinfected daily and after transporting any individual who is exhibiting symptoms of COVID-19. Drivers should be provided disinfectant wipes and disposable gloves to

support disinfection of frequently touched surfaces during the day.

- Frequently touched surfaces in the school include, but are not limited to:
 - Door handles
 - Light switches
 - Sink handles
 - Bathroom surfaces
 - Tables
 - Student Desks
 - Chairs
- Limit use and sharing of objects and equipment, such as toys, games, art supplies and playground equipment to the extent practicable. When shared use is allowed, clean and disinfect between uses.
- When choosing disinfecting products, use those approved for use against COVID-19 on the [Environmental Protection Agency \(EPA\)-approved list "N"](#) and follow product instructions.
 - To [reduce the risk of asthma](#) and other health effects related to disinfecting, programs should select disinfectant products on list N with asthma-safer ingredients (hydrogen peroxide, citric acid or lactic acid) as recommended by the US EPA Design for Environment program.
 - Avoid products that contain peroxyacetic (peracetic) acid, sodium hypochlorite (bleach) or quaternary ammonium compounds, which can cause asthma.
 - Follow label directions for appropriate dilution rates and contact times. Provide workers training on the chemical hazards, manufacturer's directions, Cal/OSHA requirements for safe use, and as applicable and as required by the Healthy Schools Act.
 - Custodial staff and any other workers who clean and disinfect the school site must be equipped with proper protective equipment, including gloves, eye protection, respiratory protection, and other appropriate protective equipment as required by the product instructions. All products must be kept out of children's reach and stored in a space with restricted access.
 - Establish a cleaning and disinfecting schedule in order to avoid both under- and over-use of cleaning products.

- Ensure safe and correct application of disinfectant and keep products away from students.
- Ensure proper ventilation during cleaning and disinfecting. Introduce fresh outdoor air as much as possible, for example, by opening windows where practicable. When cleaning, air out the space before children arrive; plan to do thorough cleaning when children are not present. If using air conditioning, use the setting that brings in outside air. Replace and check air filters and filtration systems to ensure optimal air quality.
 - If opening windows poses a safety or health risk (e.g., by allowing pollen in or exacerbating asthma symptoms) to persons using the facility, consider alternatives. For example, maximize central air filtration for HVAC systems (targeted filter rating of at least MERV 13).
- Consider installing portable high-efficiency air cleaners, upgrading the building's air filters to the highest efficiency possible, and making other modifications to increase the quantity of outside air and ventilation in classrooms, offices and other spaces.
- [Take steps](#) to ensure that all water systems and features (for example, drinking fountains and decorative fountains) are safe to use after a prolonged facility shutdown to minimize the risk of [Legionnaires' disease](#) and other diseases associated with water.



6. Implementing Distancing Inside and Outside the Classroom

Arrival and Departure

- Maximize space between students and between students and the driver on school buses and open windows to the greatest extent practicable.
- Minimize contact at school between students, staff, families and the community at the beginning and end of the school day. Prioritize minimizing contact between adults at all times.
- Stagger arrival and drop off-times and locations as consistently as practicable as to minimize scheduling challenges for families.
- Designate routes for entry and exit, using as many entrances as feasible. Put in place other protocols to limit direct contact with others as much as practicable.
- Implement health screenings of students and staff upon arrival at school (see Section 9).

- Ensure each bus is equipped with extra unused face coverings on school buses for students who may have inadvertently failed to bring one.

Classroom Space

- To reduce possibilities for infection, students must remain in the same space and in cohorts as small and consistent as practicable, including for recess and lunch. Keep the same students and teacher or staff with each group, to the greatest extent practicable.
- Prioritize the use and maximization of outdoor space for activities where practicable.
- Minimize movement of students and teachers or staff as much as practicable. For example, consider ways to keep teachers with one group of students for the whole day. In secondary schools or in situations where students have individualized schedules, plan for ways to reduce mixing among cohorts and to minimize contact.
- Maximize space between seating and desks. Distance teacher and other staff desks at least six feet away from student desks. Consider ways to establish separation of students through other means if practicable, such as, six feet between desks, where practicable, partitions between desks, markings on classroom floors to promote distancing or arranging desks in a way that minimizes face-to-face contact.
- Consider redesigning activities for smaller groups and rearranging furniture and play spaces to maintain separation.
- Staff should develop instructions for maximizing spacing and ways to minimize movement in both indoor and outdoor spaces that are easy for students to understand and are developmentally appropriate.
- Activities where there is increased likelihood for transmission from contaminated exhaled droplets such as band and choir practice and performances are not permitted.
- Activities that involve singing must only take place outdoors.
- Implement procedures for turning in assignments to minimize contact.
- Consider using privacy boards or clear screens to increase and enforce separation between staff and students.

Non-Classroom Spaces

- Limit nonessential visitors, volunteers and activities involving other groups at the same time.
- Limit communal activities where practicable. Alternatively, stagger use, properly space occupants and disinfect in between uses.
- Consider use of non-classroom space for instruction, including regular use of outdoor space, weather permitting. For example, consider part-day instruction outside.
- Minimize congregate movement through hallways as much as practicable. For example, establish more ways to enter and exit a campus, create staggered passing times when necessary or when students cannot stay in one room and create guidelines on the floor that students can follow to enable physical distancing while passing. In addition, schools can consider eliminating the use of lockers and moving to block scheduling, which supports the creation of cohort groups and reduces changes of classrooms.
- Serve meals outdoors or in classrooms instead of cafeterias or group dining rooms where practicable. Where cafeterias or group dining rooms must be used, keep students together in their cohort groups, ensure physical distancing, and consider assigned seating. Serve individually plated or bagged meals. Avoid sharing of foods and utensils and buffet or family-style meals.
- Consider holding recess activities in separated areas designated by class.



7. Limit Sharing

- Keep each child's belongings separated and in individually labeled storage containers, cubbies or areas. Ensure belongings are taken home each day to be cleaned.
- Ensure adequate supplies to minimize sharing of high-touch materials (art supplies, equipment, etc.) to the extent practicable or limit use of supplies and equipment to one group of children at a time and clean and disinfect between uses.
- Avoid sharing electronic devices, clothing, toys, books and other games or learning aids as much as practicable. Where sharing occurs, clean and disinfect between uses.



8. Train All Staff and Educate Families

- Train all staff and provide educational materials to families in the following safety actions:
 - Enhanced sanitation practices
 - Physical distancing guidelines and their importance
 - [Proper use, removal, and washing of face coverings](#)
 - Screening practices
 - How COVID-19 is spread
 - COVID-19 specific [symptom](#) identification
 - Preventing the spread of COVID-19 if you are sick, including the importance of not coming to work if staff members have symptoms, or if they or someone they live with has been diagnosed with COVID-19.
 - For workers, COVID-19 specific [symptom](#) identification and when to seek medical attention
 - The employer's plan and procedures to follow when children or adults become sick at school.
 - The employer's plan and procedures to protect workers from COVID-19 illness.
- Consider conducting the training and education virtually, or, if in-person, ensure a minimum of six-foot distancing is maintained.



9. Check for Signs and Symptoms

- Prevent discrimination against students who (or whose families) were or are diagnosed with COVID-19 or who are perceived to be a COVID-19 risk.
- Actively encourage staff and students who are sick or who have recently had [close contact](#) with a person with COVID-19 to stay home. Develop policies that encourage sick staff and students to stay at home without fear of reprisal, and ensure staff, students and students' families are aware of these policies.
- Implement screening and other procedures for all staff and students entering the facility.

- Conduct visual wellness checks of all students or establish procedures for parents to monitor at home. If checking temperatures, use a no-touch thermometer.
- Ask all individuals if they or anyone in their home is exhibiting [COVID-19 symptoms](#).
- Make available and encourage use of hand-washing stations or hand sanitizer.
- Document/track incidents of possible exposure and notify local health officials, staff and families immediately of any exposure to a positive case of COVID-19 at school while maintaining confidentiality, as required under FERPA and state law related to privacy of educational records. Additional guidance can be found [here](#). As noted in Section 11 below, the staff liaison can serve a coordinating role to ensure prompt and responsible notification.
- If a student is exhibiting symptoms of COVID-19, staff should communicate with the parent/caregiver and refer to the student's health history form and/or emergency card.
- Monitor staff and students throughout the day for signs of illness; send home students and staff with a fever of 100.4 degrees or higher, cough or other [COVID-19 symptoms](#).
- Policies should not penalize students and families for missing class.



10. Plan for When a Staff Member, Child or Visitor Becomes Sick

- Work with school administrators, nurses and other healthcare providers to identify an isolation room or area to separate anyone who exhibits symptoms of COVID-19.
- Any students or staff exhibiting symptoms should immediately be required to wear a face covering and be required to wait in an isolation area until they can be transported home or to a healthcare facility, as soon as practicable.
- Establish procedures to arrange for safe transport home or to a healthcare facility, as appropriate, when an individual is exhibiting COVID-19 symptoms:
 - Fever
 - Cough

- Shortness of breath or difficulty breathing
 - Chills
 - Repeated shaking with chills
 - Fatigue
 - Muscle pain
 - Headache
 - Sore throat
 - Congestion or runny nose
 - Nausea or vomiting
 - Diarrhea
 - New loss of taste or smell
- For serious injury or illness, call 9-1-1 without delay. Seek medical attention if COVID-19 symptoms become severe, including persistent pain or pressure in the chest, confusion, or bluish lips or face. Updates and further details are available on [CDC's webpage](#).
 - Notify local health officials immediately of any positive case of COVID-19, and exposed staff and families as relevant while maintaining confidentiality as required by state and federal laws. Additional guidance can be found [here](#).
 - Close off areas used by any individual suspected of being infected with the virus that causes COVID-19 and do not use before cleaning and disinfection. To reduce risk of exposure, wait 24 hours before you [clean and disinfect](#). If it is not possible to wait 24 hours, wait as long as practicable. Ensure a [safe and correct application](#) of disinfectants using personal protective equipment and ventilation recommended for cleaning. Keep disinfectant products away from students.
 - Advise sick staff members and students not to return until they have met CDC criteria to discontinue [home isolation](#), including at least 3 days with no fever, symptoms have improved and at least 10 days since symptoms first appeared.
 - Ensure that students, including students with disabilities, have access to instruction when out of class, as required by federal and state law.
 - Schools should offer distance learning based on the unique circumstances of each student who would be put at-risk by an in-person instructional model. For example, students with a health condition,

students with family members with a health condition, students who cohabitate or regularly interact with high-risk individuals, or are otherwise identified as “at-risk” by the parents or guardian, are students whose circumstances merit conferring distances learning.

- Implement the necessary processes and protocols when a school has an outbreak, in accordance with [CDPH guidelines](#).
- Investigate the COVID-19 illness and exposures and determine if any work-related factors could have contributed to risk of infection. Update protocols as needed to prevent further cases.
- Update protocols as needed to prevent further cases. See the CDPH guidelines, [Responding to COVID-19 in the Workplace](#), which are incorporated into this guidance and contain detailed recommendations for establishing a plan to identify cases, communicating with workers and other exposed persons, and conducting and assisting with contact tracing.



11. Maintain Healthy Operations

- Monitor staff absenteeism and have a roster of trained back-up staff where available.
- Monitor the types of illnesses and symptoms among your students and staff to help isolate them promptly as needed.
- Designate a staff liaison or liaisons to be responsible for responding to COVID-19 concerns. Workers should know who they are and how to contact them. The liaison should be trained to coordinate the documentation and tracking of possible exposure, in order to notify local health officials, staff and families in a prompt and responsible manner.
- Maintain communication systems that allow staff and families to self-report symptoms and receive prompt notifications of exposures and closures, while maintaining confidentiality, as required by FERPA and state law related to privacy of educational records. Additional guidance can be found [here](#).
- Consult with local health departments if routine testing is being considered by a local educational agency. The role of providing routine systematic testing of staff or students for COVID-19 (e.g., PCR swab testing for acute infection, or presence of antibodies in serum after infection) is currently unclear.
- Support students who are at higher risk for severe illness or who cannot safely distance from household contacts at higher risk, by providing options such as virtual learning or independent stud



12. Considerations for Reopening and Partial or Total Closures

California schools have been closed for in-person instruction since mid-March 2020 due to the COVID-19 pandemic. School closures to in-person instruction were part of a broader set of recommendations intended to reduce transmission of SARS-CoV-2, the virus that causes COVID-19. For more detailed direction on measures to be taken when a student, teacher, or staff member has symptoms or is diagnosed with COVID-19, please see the [COVID-19 and Reopening Framework for K-12 Schools in California](#).

- Check State and local orders and health department notices daily about transmission in the area or closures and adjust operations accordingly.
- When a student, teacher or staff member tests positive for COVID-19 and had exposed others at the school, refer to the [CDPH Framework for K-12 Schools](#), and implement the following steps:
 - In consultation with the local public health department, the appropriate school official may decide whether school closure versus cleaning and quarantine of exposed persons or other intervention is warranted, including the length of time necessary, based on the risk level within the specific community as determined by the local public health officer.
 - Close off the classroom or office where the patient was based and do not use these areas until after cleaning and disinfection. Wait at least 24 hours before cleaning and disinfecting. If 24 hours is not feasible, wait as long as possible.
 - Additional areas of the school visited by the COVID-19 positive individual may also need to be closed temporarily for cleaning and disinfection.
 - Implement communication plans for exposure at school and potential school closures to include outreach to students, parents, teachers, staff and the community.
 - Include information for staff regarding labor laws, information regarding Disability Insurance, Paid Family Leave and Unemployment Insurance, as applicable to schools. See additional [information on government programs supporting sick leave and worker's compensation for COVID-19](#), including worker's sick leave rights under [the Families First Coronavirus Response Act](#) and employee's rights to workers' compensation benefits and

presumption of the work-relatedness of COVID-19 pursuant to the [Governor's Executive Order N-62-20](#), while that Order is in effect.

- Provide guidance to parents, teachers and staff reminding them of the importance of community physical distancing measures while a school is closed, including discouraging students or staff from gathering elsewhere.
- Develop a plan for continuity of education. Consider in that plan how to also continue nutrition and other services provided in the regular school setting to establish alternate mechanisms for these services to continue.
- Maintain regular communications with the local public health department.



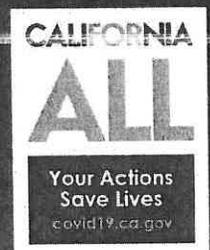


COVID-19 INDUSTRY GUIDANCE:

Schools and School- Based Programs

Updated: **August 3, 2020**

All guidance should be implemented only with local health officer approval following their review of local epidemiological data including cases per 100,000 population, rate of test positivity, and local preparedness to support a health care surge, vulnerable populations, contact tracing, and testing.



OVERVIEW

Communities across the state are preparing for the forthcoming school year. To assist with that planning process, the following guidelines and considerations are intended to help school and community leaders plan and prepare to resume in-person instruction.

This guidance is interim and subject to updates. These guidelines and considerations are based on the best available public health data at this time, international best practices currently employed, and the practical realities of managing school operations; as new data and practices emerge. Additionally, the guidelines and considerations do not reflect the full scope of issues that school communities will need to address, which range from day-to-day site-based logistics to the social and emotional well-being of students and staff.

California public schools (traditional and charter), private schools (including nonpublic nonsectarian schools), school districts, and county offices of education, herein referred to as schools, will determine the most appropriate instructional model, taking into account the needs of their students and staff, and their available infrastructure. This guidance is not intended to prevent a school from adopting a distance learning, hybrid, or mixed-delivery instructional model to ensure safety. Schools are not required to seek out or receive approval from a state or local public health officer prior to adopting a distance-learning model.

Implementation of this guidance will depend on local public health conditions, including those listed [here](#). Communities meeting those criteria, such as lower incidence of COVID-19 and adequate preparedness, may implement the guidance described below as part of a phased reopening. All decisions about following this guidance should be made in collaboration with local health officials and other authorities.

Implementation of this guidance should be tailored for each setting, including adequate consideration of instructional programs operating at each school site and the needs of students and families. School leaders should engage relevant stakeholders—including families, staff and labor partners in the school community—to formulate and implement plans that consider the following:

- **Student, Family and Staff Population:** Who are the student, family and staff populations who will be impacted by or can serve as partners in implementing any of the following measures?
- **Ability to Implement or Adhere to Measures:** Do staff, students and families have the tools, information, resources and ability to successfully adhere to or implement the new measures?
- **Negative or Unintended Consequences:** Are there any negative or unintended consequences to staff, students or families of implementing the measures and how can those consequences be mitigated?

This guidance is not intended to revoke or repeal any worker rights, either statutory, regulatory or collectively bargained, and is not exhaustive, as it does not include county health orders, nor is it a substitute for any existing safety and health-related regulatory requirements such as those of Cal/OSHA. Stay current on changes to public health guidance and state/local orders, as the COVID-19 situation continues.



1. General Measures

- Establish and continue communication with local and State authorities to determine current disease levels and control measures in your community. For example:
 - Review and refer to, if applicable, the relevant county variance documentation. Documentation can be found [here](#).
 - Consult with your county health officer, or designated staff, who are best positioned to monitor and provide advice on local conditions. A directory can be found [here](#).
 - Collaborate with other schools and school partners in your region, including the county office of education.
 - Regularly review updated guidance from state agencies, including the [California Department of Public Health](#) and [California Department of Education](#).
- Establish a written, worksite-specific COVID-19 prevention plan at every facility, perform a comprehensive risk assessment of all work areas and work tasks, and designate a person at each school to implement the plan.
 - Identify contact information for the local health department where the school is located for communicating information about COVID-19 outbreaks among students or staff.
 - Incorporate the [CDPH Guidance for the Use of Face Coverings](#), into the School Site Specific Plan that includes a policy for handling exemptions.
 - Train and communicate with workers and worker representatives on the plan. Make the written plan available and accessible to workers and worker representatives.
 - Regularly evaluate the workplace for compliance with the plan and document and correct deficiencies identified.
 - Investigate any COVID-19 illness and determine if any work-related factors could have contributed to risk of infection. Update the plan as needed to prevent further cases.
 - Implement the necessary processes and protocols when a workplace has an outbreak, in accordance with [CDPH guidelines](#).
 - Identify individuals who have been in close contact (within six feet for 15 minutes or more) of an infected person and take steps to isolate

COVID-19 positive person(s) and close contacts. See Section 10 for more detail.

- Adhere to these guidelines. Failure to do so could result in workplace illnesses that may cause classrooms or the entire school to be temporarily closed or limited.
- Evaluate whether and to what extent external community organizations can safely utilize the site and campus resources. Ensure external community organizations that use the facilities also follow this guidance.
- Develop a plan for the possibility of repeated closures of classes, groups or entire facilities when persons associated with the facility or in the community become ill with COVID-19. See Section 10 below.
- Develop a plan to further support students with access and functional needs who may be at increased risk of becoming infected or having unrecognized illness due to COVID-19. For example, review existing student health plans to identify students who may need additional accommodations, develop a process for engaging families for potentially unknown concerns that may need to be accommodated or identify additional preparations for classroom and non-classroom environments as needed. Groups who might be at increased risk of becoming infected or having unrecognized illness include the following:
 - Individuals who have limited mobility or require prolonged and close contact with others, such as direct support providers and family members;
 - Individuals who have trouble understanding information or practicing preventive measures, such as hand washing and physical distancing; and
 - Individuals who may not be able to communicate symptoms of illness.
- Schools should review the [CDPH Guidance for the Use of Face Coverings](#) and any applicable local health department guidance and incorporate face-covering use for students and workers into their COVID-19 prevention plan. Some flexibility may be needed for younger children consistent with child development recommendations. See Section 3 for more information.



2. Promote Healthy Hygiene Practices

- Teach and reinforce washing hands, avoiding contact with one's eyes, nose, and mouth, and covering coughs and sneezes among students and staff.
 - Teach students and remind staff to use tissue to wipe their nose and to cough/sneeze inside a tissue or their elbow.
 - Students and staff should wash their hands frequently throughout the day, including before and after eating; after coughing or sneezing; after classes where they handle shared items, such as outside recreation, art, or shop; and before and after using the restroom.
 - Students and staff should wash their hands for 20 seconds with soap, rubbing thoroughly after application. Soap products marketed as "antimicrobial" are not necessary or recommended.
 - Staff should model and practice handwashing. For example, for lower grade levels, use bathroom time as an opportunity to reinforce healthy habits and monitor proper handwashing.
 - Students and staff should use fragrance-free hand sanitizer when handwashing is not practicable. Sanitizer must be rubbed into hands until completely dry. Note: frequent handwashing is more effective than the use of hand sanitizers.
 - Ethyl alcohol-based hand sanitizers are preferred and should be used when there is the potential of unsupervised use by children.
 - Isopropyl hand sanitizers are more toxic when ingested or absorbed in skin.
 - Do not use hand sanitizers that may contain methanol which can be hazardous when ingested or absorbed.
 - Children under age 9 should only use hand sanitizer under adult supervision. Call Poison Control if consumed: 1-800-222-1222.
- Consider portable handwashing stations throughout a site and near classrooms to minimize movement and congregations in bathrooms to the extent practicable.
- Develop routines enabling students and staff to regularly wash their hands at staggered intervals.
- Ensure adequate supplies to support healthy hygiene behaviors, including soap, tissues, no-touch trashcans, face coverings, and hand sanitizers with at least 60 percent ethyl alcohol for staff and children who can safely use hand sanitizer.

- Information contained in the CDPH Guidance for the Use of Face Coverings should be provided to staff and families, which discusses the circumstances in which face coverings must be worn and the exemptions, as well as any policies, work rules, and practices the employer has adopted to ensure the use of face coverings.
- Employers must provide and ensure staff use face coverings in accordance with CDPH guidelines and all required protective equipment.
- The California Governor's Office of Emergency Services (CalOES) and the Department of Public Health (CDPH) are and will be working to support procurement and distribution of face coverings and personal protective equipment. Additional information can be found here.
- Strongly recommend that all students and staff be immunized each autumn against influenza unless contraindicated by personal medical conditions, to help:
 - Protect the school community
 - Reduce demands on health care facilities
 - Decrease illnesses that cannot be readily distinguished from COVID-19 and would therefore trigger extensive measures from the school and public health authorities.
- Nothing in this guidance should be interpreted as restricting access to appropriate educational services.



3. Face Coverings

Face coverings must be used in accordance with CDPH guidelines unless a person is exempt as explained in the guidelines, particularly in indoor environments, on school buses, and areas where physical distancing alone is not sufficient to prevent disease transmission.

- Teach and reinforce use of face coverings, or in limited instances, face shields.
- Students and staff should be frequently reminded not to touch the face covering and to wash their hands frequently.
- Information should be provided to all staff and families in the school community on proper use, removal, and washing of cloth face coverings.
- Training should also include policies on how people who are exempted from wearing a face covering will be addressed.

STUDENTS

Age	Face Covering Requirement
Under 2 years old	No
2 years old – 2 nd grade	Strongly encouraged**
3 rd grade – High School	Yes, unless exempt

**Face coverings are strongly encouraged for young children between two years old and second grade, if they can be worn properly. A face shield is an acceptable alternative for children in this cohort who cannot wear them properly.

- Persons younger than two years old, anyone who has trouble breathing, anyone who is unconscious or incapacitated, and anyone who is otherwise unable to remove the face covering without assistance are exempt from wearing a face covering.
- A cloth face covering or face shield should be removed for meals, snacks, naptime, or outdoor recreation, or when it needs to be replaced. When a cloth face covering is temporarily removed, it should be placed in a clean paper bag (marked with the student's name and date) until it needs to be put on again.
- In order to comply with this guidance, schools must exclude students from campus if they are not exempt from wearing a face covering under CDPH guidelines and refuse to wear one provided by the school. Schools should develop protocols to provide a face covering to students who inadvertently fail to bring a face covering to school to prevent unnecessary exclusions. Schools should offer alternative educational opportunities for students who are excluded from campus.

STAFF

- All staff must use face coverings in accordance with CDPH guidelines unless Cal/OSHA standards require respiratory protection.
- In limited situations where a face coverings cannot be used for pedagogical or developmental reasons, (i.e. communicating or assisting young children or those with special needs) a face shield can be used instead of a cloth face covering while in the classroom as long as the wearer maintains physical distance from others, to the extent practicable. Staff must return to wearing a face covering outside of the classroom.

- Workers or other persons handling or serving food must use gloves in addition to face coverings. Employers should consider where disposable glove use may be helpful to supplement frequent handwashing or use of hand sanitizer; examples are for workers who are screening others for symptoms or handling commonly touched items.



4. Ensure Teacher and Staff Safety

- Ensuring staff maintain physical distancing from each other is critical to reducing transmission between adults.
- Ensure that all staff use face coverings in accordance with CDPH guidelines and Cal/OSHA standards.
- Support staff who are at higher risk for severe illness or who cannot safely distance from household contacts at higher risk, by providing options such as telework, where appropriate, or teaching in a virtual learning or independent study context.
- Conduct all staff meetings, professional development training and education, and other activities involving staff with physical distancing measures in place, or virtually, where physical distancing is a challenge.
- Minimize the use of and congregation of adults in staff rooms, break rooms, and other settings.
- Implement procedures for daily symptom monitoring for staff.

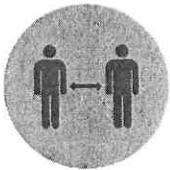


5. Intensify Cleaning, Disinfection, and Ventilation

- Consider suspending or modifying use of site resources that necessitate sharing or touching items. For example, consider suspending use of drinking fountains and instead encourage the use of reusable water bottles.
- Staff should clean and disinfect frequently-touched surfaces at school and on school buses at least daily and, as practicable, these surfaces should be cleaned and disinfected frequently throughout the day by trained custodial staff.
- Buses should be thoroughly cleaned and disinfected daily and after transporting any individual who is exhibiting symptoms of COVID-19. Drivers should be provided disinfectant wipes and disposable gloves to support disinfection of frequently touched surfaces during the day.

- Frequently touched surfaces in the school include, but are not limited to:
 - Door handles
 - Light switches
 - Sink handles
 - Bathroom surfaces
 - Tables
 - Student Desks
 - Chairs
- Limit use and sharing of objects and equipment, such as toys, games, art supplies and playground equipment to the extent practicable. When shared use is allowed, clean and disinfect between uses.
- When choosing disinfecting products, use those approved for use against COVID-19 on the Environmental Protection Agency (EPA)-approved list "N" and follow product instructions.
 - To reduce the risk of asthma and other health effects related to disinfecting, programs should select disinfectant products on list N with asthma-safer ingredients (hydrogen peroxide, citric acid or lactic acid) as recommended by the US EPA Design for Environment program.
 - Avoid products that contain peroxyacetic (peracetic) acid, sodium hypochlorite (bleach) or quaternary ammonium compounds, which can cause asthma.
 - Follow label directions for appropriate dilution rates and contact times. Provide workers training on the chemical hazards, manufacturer's directions, Cal/OSHA requirements for safe use, and as applicable and as required by the Healthy Schools Act.
 - Custodial staff and any other workers who clean and disinfect the school site must be equipped with proper protective equipment, including gloves, eye protection, respiratory protection, and other appropriate protective equipment as required by the product instructions. All products must be kept out of children's reach and stored in a space with restricted access.
 - Establish a cleaning and disinfecting schedule in order to avoid both under- and over-use of cleaning products.
- Ensure safe and correct application of disinfectant and keep products away from students.

- Ensure proper ventilation during cleaning and disinfecting. Introduce fresh outdoor air as much as possible, for example, by opening windows where practicable. When cleaning, air out the space before children arrive; plan to do thorough cleaning when children are not present. If using air conditioning, use the setting that brings in outside air. Replace and check air filters and filtration systems to ensure optimal air quality.
 - If opening windows poses a safety or health risk (e.g., by allowing pollen in or exacerbating asthma symptoms) to persons using the facility, consider alternatives. For example, maximize central air filtration for HVAC systems (targeted filter rating of at least MERV 13).
- Consider installing portable high-efficiency air cleaners, upgrading the building's air filters to the highest efficiency possible, and making other modifications to increase the quantity of outside air and ventilation in classrooms, offices and other spaces.
- Take steps to ensure that all water systems and features (for example, drinking fountains and decorative fountains) are safe to use after a prolonged facility shutdown to minimize the risk of Legionnaires' disease and other diseases associated with water.

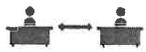


6. Implementing Distancing Inside and Outside the Classroom



Arrival and Departure

- Maximize space between students and between students and the driver on school buses and open windows to the greatest extent practicable.
- Minimize contact at school between students, staff, families and the community at the beginning and end of the school day. Prioritize minimizing contact between adults at all times.
- Stagger arrival and drop off-times and locations as consistently as practicable as to minimize scheduling challenges for families.
- Designate routes for entry and exit, using as many entrances as feasible. Put in place other protocols to limit direct contact with others as much as practicable.
- Implement health screenings of students and staff upon arrival at school (see Section 9).
- Ensure each bus is equipped with extra unused face coverings on school buses for students who may have inadvertently failed to bring one.



Classroom Space

- To reduce possibilities for infection, students must remain in the same space and in cohorts as small and consistent as practicable, including for recess and lunch. Keep the same students and teacher or staff with each group, to the greatest extent practicable.
- Prioritize the use and maximization of outdoor space for activities where practicable.
- Minimize movement of students and teachers or staff as much as practicable. For example, consider ways to keep teachers with one group of students for the whole day. In secondary schools or in situations where students have individualized schedules, plan for ways to reduce mixing among cohorts and to minimize contact.
- Maximize space between seating and desks. Distance teacher and other staff desks at least six feet away from student desks. Consider ways to establish separation of students through other means if practicable, such as, six feet between desks, where practicable, partitions between desks, markings on classroom floors to promote distancing or arranging desks in a way that minimizes face-to-face contact.
- Consider redesigning activities for smaller groups and rearranging furniture and play spaces to maintain separation.
- Staff should develop instructions for maximizing spacing and ways to minimize movement in both indoor and outdoor spaces that are easy for students to understand and are developmentally appropriate.
- Activities where there is increased likelihood for transmission from contaminated exhaled droplets such as band and choir practice and performances are not permitted.
- Activities that involve singing must only take place outdoors.
- Implement procedures for turning in assignments to minimize contact.
- Consider using privacy boards or clear screens to increase and enforce separation between staff and students.



Non-Classroom Spaces

- Limit nonessential visitors, volunteers and activities involving other groups at the same time.
- Limit communal activities where practicable. Alternatively, stagger use, properly space occupants and disinfect in between uses.
- Consider use of non-classroom space for instruction, including regular use of outdoor space, weather permitting. For example, consider part-day instruction outside.
- Minimize congregate movement through hallways as much as practicable. For example, establish more ways to enter and exit a campus, create staggered passing times when necessary or when students cannot stay in one room and create guidelines on the floor that students can follow to enable physical distancing while passing. In addition, schools can consider eliminating the use of lockers and moving to block scheduling, which supports the creation of cohort groups and reduces changes of classrooms.
- Serve meals outdoors or in classrooms instead of cafeterias or group dining rooms where practicable. Where cafeterias or group dining rooms must be used, keep students together in their cohort groups, ensure physical distancing, and consider assigned seating. Serve individually plated or bagged meals. Avoid sharing of foods and utensils and buffet or family-style meals.
- Consider holding recess activities in separated areas designated by class.



Sports and Extra Curricular Activities (Updated August 3, 2020)

- Outdoor and indoor sporting events, assemblies, dances, rallies, field trips, and other activities that require close contact or that would promote congregating are not permitted at this time. For example, tournaments, events, or competitions, regardless of whether teams are from the same school or from different schools, counties, or states are not permitted at this time.
- Youth sports and physical education are permitted only when the following can be maintained: (1) physical distancing of at least six feet; and (2) a stable cohort, such as a class, that limits the risks of transmission (see [CDC Guidance on Schools and Cohorting](#)). Activities should take place outside to the maximum extent practicable.

- For sports that cannot be conducted with sufficient distancing or cohorting, only physical conditioning and training is permitted and ONLY where physical distancing can be maintained. Conditioning and training should focus on individual skill building (e.g., running drills and body weight resistance training) and should take place outside, where practicable. Indoor physical conditioning and training is allowed only in counties where gyms and fitness centers are allowed to operate indoors.
- Avoid equipment sharing, and if unavoidable, clean and disinfect shared equipment between use by different people to reduce the risk of COVID-19 spread.
- Consistent with guidance for gyms and fitness facilities, cloth face coverings must be worn during indoor physical conditioning and training or physical education classes (except when showering). Activities that require heavy exertion should be conducted outside in a physically distanced manner without face coverings. Activities conducted inside should be those that do not require heavy exertion and can be done with a face covering. Players should take a break from exercise if any difficulty in breathing is noted and should change their mask or face covering if it becomes wet and sticks to the player's face and obstructs breathing. Masks that restrict airflow under heavy exertion (such as N-95 masks) are not advised for exercise.
- Youth sports programs and schools should provide information to parents or guardians regarding this and related guidance, along with the safety measures that will be in place in these settings with which parents or guardians must comply.
- Activities where there is increased likelihood for transmission from contaminated exhaled droplets such as band and choir practice and performances are not permitted.



7. Limit Sharing

- Keep each child's belongings separated and in individually labeled storage containers, cubbies or areas. Ensure belongings are taken home each day to be cleaned.
- Ensure adequate supplies to minimize sharing of high-touch materials (art supplies, equipment, etc.) to the extent practicable or limit use of supplies and equipment to one group of children at a time and clean and disinfect between uses.
- Avoid sharing electronic devices, clothing, toys, books and other games or learning aids as much as practicable. Where sharing occurs, clean and disinfect between uses.



8. Train All Staff and Educate Families

- Train all staff and provide educational materials to families in the following safety actions:
 - Enhanced sanitation practices
 - Physical distancing guidelines and their importance
 - Proper use, removal, and washing of face coverings
 - Screening practices
 - How COVID-19 is spread
 - COVID-19 specific symptom identification
 - Preventing the spread of COVID-19 if you are sick, including the importance of not coming to work if staff members have symptoms, or if they or someone they live with has been diagnosed with COVID-19.
 - For workers, COVID-19 specific symptom identification and when to seek medical attention
 - The employer's plan and procedures to follow when children or adults become sick at school.
 - The employer's plan and procedures to protect workers from COVID-19 illness.
- Consider conducting the training and education virtually, or, if in-person, ensure a minimum of six-foot distancing is maintained.



9. Check for Signs and Symptoms

- Prevent discrimination against students who (or whose families) were or are diagnosed with COVID-19 or who are perceived to be a COVID-19 risk.
- Actively encourage staff and students who are sick or who have recently had close contact with a person with COVID-19 to stay home. Develop policies that encourage sick staff and students to stay at home without fear of reprisal, and ensure staff, students and students' families are aware of these policies.
- Implement screening and other procedures for all staff and students entering the facility.

- Conduct visual wellness checks of all students or establish procedures for parents to monitor at home. If checking temperatures, use a no-touch thermometer.
- Ask all individuals if they or anyone in their home is exhibiting COVID-19 symptoms.
- Make available and encourage use of hand-washing stations or hand sanitizer.
- Document/track incidents of possible exposure and notify local health officials, staff and families immediately of any exposure to a positive case of COVID-19 at school while maintaining confidentiality, as required under FERPA and state law related to privacy of educational records. Additional guidance can be found here. As noted in Section 11 below, the staff liaison can serve a coordinating role to ensure prompt and responsible notification.
- If a student is exhibiting symptoms of COVID-19, staff should communicate with the parent/caregiver and refer to the student's health history form and/or emergency card.
- Monitor staff and students throughout the day for signs of illness; send home students and staff with a fever of 100.4 degrees or higher, cough or other COVID-19 symptoms.
- Policies should not penalize students and families for missing class.



10. Plan for When a Staff Member, Child or Visitor Becomes Sick

- Work with school administrators, nurses and other healthcare providers to identify an isolation room or area to separate anyone who exhibits symptoms of COVID-19.
- Any students or staff exhibiting symptoms should immediately be required to wear a face covering and be required to wait in an isolation area until they can be transported home or to a healthcare facility, as soon as practicable.
- Establish procedures to arrange for safe transport home or to a healthcare facility, as appropriate, when an individual is exhibiting COVID-19 symptoms:
 - Fever
 - Cough
 - Shortness of breath or difficulty breathing

- Chills
 - Repeated shaking with chills
 - Fatigue
 - Muscle pain
 - Headache
 - Sore throat
 - Congestion or runny nose
 - Nausea or vomiting
 - Diarrhea
 - New loss of taste or smell
- For serious injury or illness, call 9-1-1 without delay. Seek medical attention if COVID-19 symptoms become severe, including persistent pain or pressure in the chest, confusion, or bluish lips or face. Updates and further details are available on [CDC's webpage](#).
 - Notify local health officials immediately of any positive case of COVID-19, and exposed staff and families as relevant while maintaining confidentiality as required by state and federal laws. Additional guidance can be found [here](#).
 - Close off areas used by any individual suspected of being infected with the virus that causes COVID-19 and do not use before cleaning and disinfection. To reduce risk of exposure, wait 24 hours before you [clean and disinfect](#). If it is not possible to wait 24 hours, wait as long as [practicable](#). Ensure a [safe and correct application](#) of disinfectants using personal protective equipment and ventilation recommended for cleaning. Keep disinfectant products away from students.
 - Advise sick staff members and students not to return until they have met CDC criteria to discontinue [home isolation](#), including at least 3 days with no fever, symptoms have improved and at least 10 days since symptoms first appeared.
 - Ensure that students, including students with disabilities, have access to instruction when out of class, as required by federal and state law.
 - Schools should offer distance learning based on the unique circumstances of each student who would be put at-risk by an in-person instructional model. For example, students with a health condition, students with family members with a health condition, students who cohabitate or regularly interact with high-risk individuals, or are otherwise identified as "at-risk" by the parents or guardian, are students whose circumstances merit offering distance learning.

- Implement the necessary processes and protocols when a school has an outbreak, in accordance with [CDPH guidelines](#).
- Investigate the COVID-19 illness and exposures and determine if any work-related factors could have contributed to risk of infection. Update protocols as needed to prevent further cases.
- Update protocols as needed to prevent further cases. See the CDPH guidelines, [Responding to COVID-19 in the Workplace](#), which are incorporated into this guidance and contain detailed recommendations for establishing a plan to identify cases, communicating with workers and other exposed persons, and conducting and assisting with contact tracing.



11. Maintain Healthy Operations

- Monitor staff absenteeism and have a roster of trained back-up staff where available.
- Monitor the types of illnesses and symptoms among your students and staff to help isolate them promptly as needed.
- Designate a staff liaison or liaisons to be responsible for responding to COVID-19 concerns. Workers should know who they are and how to contact them. The liaison should be trained to coordinate the documentation and tracking of possible exposure, in order to notify local health officials, staff and families in a prompt and responsible manner.
- Maintain communication systems that allow staff and families to self-report symptoms and receive prompt notifications of exposures and closures, while maintaining confidentiality, as required by FERPA and state law related to privacy of educational records. Additional guidance can be found [here](#).
- Consult with local health departments if routine testing is being considered by a local educational agency. The role of providing routine systematic testing of staff or students for COVID-19 (e.g., PCR swab testing for acute infection, or presence of antibodies in serum after infection) is currently unclear.
- Support students who are at higher risk for severe illness or who cannot safely distance from household contacts at higher risk, by providing options such as virtual learning or independent study.



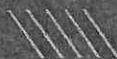
12. Considerations for Reopening and Partial or Total Closures

California schools have been closed for in-person instruction since mid-March 2020 due to the COVID-19 pandemic. School closures to in-person instruction were part of a broader set of recommendations intended to reduce transmission of SARS-CoV-2, the virus that causes COVID-19. For more detailed direction on measures to be taken when a student, teacher, or staff member has symptoms or is diagnosed with COVID-19, please see the [COVID-19 and Reopening Framework for K-12 Schools in California](#).

- Check State and local orders and health department notices daily about transmission in the area or closures and adjust operations accordingly.
- When a student, teacher or staff member tests positive for COVID-19 and had exposed others at the school, refer to the [CDPH Framework for K-12 Schools](#), and implement the following steps:
 - In consultation with the local public health department, the appropriate school official should ensure cleaning and quarantine of exposed persons and whether any additional intervention is warranted, including the length of time necessary, based on the risk level within the specific community as determined by the local public health officer.
 - Close off the classroom or office where the patient was based and do not use these areas until after cleaning and disinfection. Wait at least 24 hours before cleaning and disinfecting. If 24 hours is not feasible, wait for at least two hours and as long as possible.
 - Additional areas of the school visited by the COVID-19 positive individual may also need to be cleaned and disinfected.
 - Implement communication plans for exposure at school and potential school closures to include outreach to students, parents, teachers, staff and the community.
 - Include information for staff regarding labor laws, information regarding Disability Insurance, Paid Family Leave and Unemployment Insurance, as applicable to schools. See additional [information on government programs supporting sick leave and worker's compensation for COVID-19](#), including worker's sick leave rights under [the Families First Coronavirus Response Act](#) and employee's rights to workers' compensation benefits and presumption of the work-relatedness of COVID-19 pursuant to the [Governor's Executive Order N-62-20](#), while that Order is in effect.
 - Provide guidance to parents, teachers and staff reminding them of

the importance of community physical distancing measures while a school is closed, including discouraging students or staff from gathering elsewhere.

- o Develop a plan for continuity of education. Consider in that plan how to also continue nutrition and other services provided in the regular school setting to establish alternate mechanisms for these services to continue.
- o Maintain regular communications with the local public health department.



Clear Creek Elementary School District

Reopening Plan Protocol

August 12, 2020

The following Document outlines preparations for reopening Clear Creek Elementary School for the 2020-2021 school year as permitted by the Nevada County Public Health Department. This plan was developed in conjunction with guidance from the California Department of Public Health, the Nevada County Public Health Department as well as the Nevada County Superintendent of Schools office.

Clear Creek School recognizes that the existence of a chronic health condition or other circumstances within each home may influence a parent/guardian's decision to return to physical attendance on campus. Your concerns are respected and the school does offer a Learn @ Home option for students.

The following protocols and procedures will be in place on campus for all students, staff, and visitors:

Physical Distancing

While on campus both inside and outside students and staff will maintain 6 feet of physical distance between themselves and others as practicable. Excess furniture will be removed from classrooms and desks will be spaced at least 6 feet apart and facing in the same direction.

Face masks

The District will follow the CDPH and local health department guidelines on face masks. All staff and students in grades 3rd and up are required to wear face masks on campus. Students in TK-2nd are strongly recommended to wear masks. In order to protect all students and staff, Clear Creek will ask all students TK-8th grade to wear masks during drop-off before school, dismissal after school, and while walking in public areas of the school. TK-2nd grade students may take a mask break in the classroom once they are settled and situated with physical distance.

Symptom Check Student

A new procedure for this school year will be a Daily Symptom Check. Each family will receive one in your first day packet. Please post this check list by the door or on your refrigerator so that each morning before you leave for school, you will ask each of your children these questions. If they say "No" to all then you are good to proceed to campus. If your child exhibits any symptoms on this list, please let the school know and keep them home. A staff member will confirm with you when you drop off that the check has been completed and use a No Touch thermometer to complete a temperature check before sending students to class.

Temperature Checks

As students arrive at the drop-off area, they should have on their masks and a staff member will do a temperature check with a No Touch thermometer. If the child has a temperature of 100.4 or higher, they will be asked to return home until they are fever free without medication for 24 hours.

Morning Drop off Procedure

In the morning, you will follow the cones and drive up the first ramp to where staff will be waiting. Your child/ren will need to put on their mask, we will ask if the daily symptom check has been completed, and take their temperature before you leave. Then you will pull forward and exit the far ramp. **As on campus visitors are limited to essential personnel only, we are asking that parents do not park and walk their kids up to campus.** I know this is different and not like our usual mornings with parents and kids milling about, but we need to maintain physical distance and not mix class cohorts. Also, please do not drop your child off before 8:15. Students must be dropped off only between 8:15-8:30. Staggering drop off alphabetically will help to alleviate back up in the parking lot. If your last name begins with A-L, please drop off between 8:15-8:25 and if your last name begins with M-Z, please drop off between 8:20-8:30. If your child arrives after staff have left the drop off area, they should come to the office as usual and we will check them in and then send them to class after a temperature and symptom check.

Dismissal Procedure

At 11:30 dismissal, also please stagger your pick up based alphabetically by last name. Again, drivers will follow the cones up the first ramp to pick up their children. Students with last names that begin with A-L should arrive between 11:30-11:40 and students with last names that begin with M-Z should arrive 11:40-11:50. **In order to reduce the chance of mixing student groups and alleviate congestion, the M-Z students will not be released from class until 11:40, so please do not drive up to the pick-up area until your designated time.** All students will need to wear a mask at dismissal until they get into their cars. This will be a learning experience for all of us, so please be patient, considerate and cooperative. Your help in keeping all students, staff, and family members safe is of paramount importance to us.

Staff Symptom and Temperature Check

Staff members are asked to complete a daily symptom and temperature check before beginning their work day. If they have symptoms or a fever, they should notify the school, secure a sub, and provide sub plans for the day.

Hand Washing

Students and staff are encouraged to wash their hands frequently while on campus. The teachers will provide student training on proper hand washing technique. All classrooms have sinks with soap, water, and paper towels to be used frequently. The school will also have two portable outdoor hand washing stations on the black top to provide additional opportunities for handwashing.

Hand Sanitizer

Every room on campus will also have access to hand sanitizer. The teachers will monitor use for younger children. We will install four wall mounted no-touch hand sanitizer dispensers in the office, Room 2, the Library, and the Copy/Work Room.

Lunch

Students who order lunch or milk will receive them prior to dismissal and will be allowed to take lunches home to eat.

Pop up shade structures

The school will set up pop up shade structures with tables so that teachers can use the spaces as an outdoor instructional area.

Designated Isolation Area

The school will set up an area that will be designated as an isolation area so that a student or staff member on campus can wait safely and privately until they can be transported home.

Sports

After school sports will not begin until at least January. At that point, the county status will be reevaluated to determine when/if sports can begin.

Assemblies, Field Trips, Clubs, Meetings

The school will not schedule assemblies, field trips, after school clubs, or meetings at this time to avoid large gatherings or allow non-essential visitors on campus.

Parent Volunteers

Based on the current health department guidelines, our school will be restricted to staff and students only. Initially, on campus parent volunteers will not be allowed. Parents may check with their child's teacher to find out how they can provide support at home. We will reevaluate as we get updates from our county health department.

Playground Structures and Equipment

At this time, it is recommended by the health department that play structures be off limits and equipment be discouraged. Physical activities that do not require equipment are encouraged and recommended. Any school equipment used must be cleaned after use. Students will not be allowed to bring personal sports equipment to school.

Food in Classrooms

While we recognize the importance of celebrations in children's lives, food brought for celebrations and other activities will not be permitted. Students may bring an individual snack from home and eat outside of the classroom at the teacher's discretion.

Water Fountains and Water Bottles

The water fountains will not be used. Students are encouraged to bring their own water bottle from home. Water bottles may be kept at their desk. We will provide paper cups to be used in the classroom for students who do not have a water bottle. Students will be encouraged to bring their water bottle outside during outdoor time.

Manipulative Items

Teaching manipulatives will either be limited or provided in small groups or individually. The items will be cleaned after use and prior to further use.

Computers

The school is purchasing additional computers so that each student may be assigned their own computer for use on campus. They should be wiped down between uses. Based on the huge need for technology devices across the state, we may not have all of the devices by the first day of school. Computers are backordered all across the state.

Computer Check out for Learn @ Home Students

If a Learn @ Home student needs a computer, please contact the school office and we will work with the parent to check out a device for student use.

Office Front Desk

A plexi glass shield has been installed around the front office desk to protect visitors and staff. Please respect the boundaries. Visitors on campus should be limited to essential visits only. Please wait outside if there is already someone at the front desk.

Cleaning and Sanitation

Our maintenance and custodial staff members will conduct daily cleaning of classrooms, bathrooms, and common areas. Maintenance, custodial, and instructional aide staff will conduct period cleaning throughout the day of frequently touched surfaces, door handles, and desks and chairs. We will be wiping surfaces as well as using an electro static sprayer to clean and sanitize surfaces daily. All cleaning products are on the EPA approved list.

Staff and Work Rooms

Congregating in the staff and work room will follow physical distance guidelines. Staff may eat in the staff room, outside or in the gym if they need a larger area for collaboration. Staff should bring and maintain their own utensils, plates, cups, mugs, etc. Shared treats or food should not be placed in the staff room.

COVID-19 Testing Recommended

While Clear Creek School will strictly enforce all California Health Department Guidelines as well Nevada County Health guidelines exposure to the virus can occur anywhere. For this reason, all students and Clear Creek School staff members are strongly recommended to get

tested prior to the beginning of the school year and periodically thereafter. Students and staff only need to notify the school of a positive COVID-19 test result. Clear Creek School staff will be given release time when students are not present to be tested. Staff members should notify the office to secure release time. Students and staff may seek testing at their local health providers office, OptumServe (free testing), or Yuba Docs.

Exposure and Communication protocol

The school will work with our school nurse and the Nevada County Health Department to follow their guidance on when and what to communicate to families and staff on a case by case basis. We have distributed and posted the COVID-19 Exposure and Communication Protocol that was developed by the Nevada County Public Health Department and the Nevada County Superintendent of Schools Office.

Site Specific School Safety Plan

The school has written a safety plan that has been reviewed by the Nevada County Health Department. It has also been distributed to staff, School Site Council and the School Board for review and input. It will be posted on our school website and will be modified as new information becomes available.

Enrollment Questionnaire

Parents were sent an enrollment questionnaire on July 23, 2020 and asked to indicate their instructional model choice to begin this school year. Parents were asked to choose a Hybrid model or a DL/Learn @ Home model. Staff and student schedules were based on the information parents provided. At this time, based on the number of students on the Distance Learning/Learn @ Home model, we will have our Hybrid students on campus in the morning only. Because of the physical distance requirements, we require parents who chose the Distance Learning/Learn @ Home model to continue with that choice until at least October break. The school will contact Learn @ Home parents in late September to determine if any changes are requested. If we can accommodate changes, they will occur upon return from October break.

I understand all of these changes are new and different. There will be an adjustment period for all of us. While we get used to the new look of on campus instruction, please understand that these guidelines are required in order to reopen to in person instruction and stay open. Your patience, cooperation, and collaboration will be greatly appreciated.

Thank you!

**COVID-19 and
Reopening In-Person
Instruction Framework
& Public Health
Guidance for K-12
Schools in California,
2020-2021 School Year**

January 14, 2021

**CALIFORNIA
ALL**

**Your Actions
Save Lives**



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Overview

The California Department of Public Health (CDPH) developed the following framework to support school communities as they decide when and how to implement in-person instruction for the 2020-2021 school year. This document is rooted in the scientific evidence available to date and supports twin goals: **safe** and **successful** in-person instruction.

Understanding and evidence about the transmission and epidemiology of SARS-CoV-2, the virus that causes COVID-19, has evolved significantly over the course of the pandemic. Schools throughout the state are now in various stages of instruction including fully distance learning, fully in-person learning, and hybrid instruction based on local conditions.

Key mitigation strategies, studied in multiple settings and used successfully in schools nationally and internationally, allow for safe in-person instruction. The thoughtful implementation of mitigation strategies, specific to school context, provides a careful and effective pathway forward as community transmission rates fluctuate.

Information about the latest science of COVID-19 transmissions, including evidence regarding the lower risk of transmission for elementary aged students compared to middle and high-school aged students, is available here as an evidence summary. However, new evidence and data about COVID-19 transmission, including variations by age, and the effectiveness of disease control and mitigation strategies continues to emerge regularly.

Recommendations regarding in-person school reopening and closure should be based on the latest available evidence as well as state and local disease trends and we will update this guidance as needed to reflect new evidence.

This document is intended to provide an update to the *COVID-19 and Reopening In-Person Learning Framework for K-12 Schools in California, 2020-2021 School Year (July 17, 2020)* guidance. This document also provides a consolidation of content from other CDPH COVID-19 and school-related guidance and supersedes previous CDPH COVID-19 and Cal/OSHA school guidance.

AUTHORITY

This guidance is a public health directive that applies to all public and private schools operating in California. Under operative executive orders and provisions of the California Health and Safety Code, schools must comply with orders and guidance issued by the California Department of Public Health and relevant

local health departments (LHDs) to limit the spread of COVID-19 and protect public health.

Governmental and non-governmental entities at all levels have issued guidance and directives relating to the safe reopening of schools for in-person instruction. Schools may comply with guidance from other federal, state, local, and non-governmental sources, to the extent those guidelines are not weaker than or inconsistent with state and local public health directives.

This updated directive also incorporates two other public health directives issued January 14, 2021, related to: (1) reporting details of any positive case of a person who has been on campus to LHDs and (2) reporting to CDPH whether and to what degree all public and private schools have reopened to serve students in-person on campus. These directives are attached as Appendices 3 and 4.

SUMMARY OF CHANGES AND ADDITIONS

CDPH developed this comprehensive framework to support school communities as they determine how to implement in-person instruction for the remainder of the 2020-2021 school year.

This document is intended to consolidate and update prior state public health guidance and orders related to schools. Specifically, this document supersedes the following guidance, orders, and frequently asked questions:

- *COVID-19 Industry Guidance: Schools and School-Based Programs* (first published in May 2020; last updated August 3, 2020).
- *The COVID-19 and Reopening In-Person Learning Framework for K-12 Schools in California, 2020-2021 School Year* (July 17, 2020).
- The Elementary Education Waiver process and the associated School Waiver Letter and Cover Form and Local Health Officer Waiver Notice Form (all issued on August 3, 2020).
- CDPH Schools Frequently Asked Questions (first issued August 3, 2020; last updated October 20, 2020).

This update provides both K-12 schools and LHDs additional guidance for providing in-person instruction, including:

1. Criteria and processes for school reopenings under the [Blueprint for a Safer Economy](#) framework. (Updated on January 19, 2021 to clarify language in the Re-open definition.)
2. Considerations intended to help school community leaders plan for and prepare to resume in-person instruction including steps to take when a

student or staff member is found to have COVID-19 symptoms during the school day and while participating in before and after school programs.

3. Response to confirmed COVID-19 infections when:
 - a. a case of COVID-19 is confirmed in a student or staff member; and
 - b. a cluster or outbreak of COVID-19 at a school is being investigated.
4. Physical distancing in classrooms.
5. Implementation of stable groups of students and staff.

This document does not modify or supersede the Guidance Related to Cohorts for Children and Youth (first issued on August 25, 2020; last updated September 4, 2020), which applies to groups of children and youth in controlled, supervised, and indoor environments. The Cohort Guidance continues to allow schools that are not permitted to reopen under state or local public health directives and schools (and any grades at schools) that have not yet reopened if permitted to do so to serve students in-person in small, stable cohorts, as specified in the Cohort Guidance.

DEFINITIONS

Schools and Local Educational Agencies (LEAs): As used throughout this document, refer to county offices of education or their equivalent, school districts, charter schools, and the governing authorities of private schools (including nonpublic nonsectarian schools).

Transitional Kindergarten: Means the first year of a two-year kindergarten program that uses a modified kindergarten curriculum that is age and developmentally appropriate. As used throughout this document, “kindergarten” is inclusive of transitional kindergarten.

Cohorts: In this document, “cohorts” has a specific meaning, which are groups of students who are meeting for targeted supports and intervention services, under the direction of an LEA, while the school is closed to in-person instruction and in addition to distance learning. Sometimes these groups are also called “learning hubs” or “pods.” Regardless of the name, all of the provisions in the Cohorting Guidance must be followed for such cohorts to meet, whether they are operated by LEAs, non-profits, or other providers, as a maximum of 16 individuals (students and staff). In this document, “cohort” does not refer to the more general “stable groups” that are described in the Stable Group Guidance section below.

Reopen for in-person instruction:

What does it mean to be “open” or “reopened”? The term “open” or “reopen” refers to operations for at least one grade at the school that are permitted only

if the county satisfies the eligibility requirements for schools to “open” or “reopen.” Specifically, the school must have given all students in at least one grade the option to return for in-person instruction for at least part of the school-week to be considered to “open” or “reopen.” This includes a school that has offered all students in at least one grade the option of receiving in-person instruction for only certain days during the week (commonly referred to as a “hybrid” model). Schools that were operating only in the manner permitted under the Cohorting Guidance are therefore not “open” or “reopened.”

In addition, if only some students were being served in-person in a school in a county in the Red Tier or lower (e.g., only students with disabilities) and all students in at least one grade did **not** have the option to return in-person as described above, the school has not “opened” or “reopened.” In such circumstances, if the school is located in a county that shifts to the Purple Tier, the school may continue serving the students in-person as it did as of January 14, 2021, but it may not bring additional students back for in-person instruction and services, unless it adheres to the Cohort Guidance for the students newly brought back in-person.

Is a school “reopened” if it was previously permitted to reopen but became ineligible to reopen before actually reopening? No. Schools must have actually reopened for in-person instruction (using the definition above) while the county was in the Red Tier in order to remain open if the county moves back to Purple Tier. If the county is in the Purple Tier on the day the school plans to reopen for in-person instruction, the school must wait until it is eligible again.

If a school was implementing a phased reopening (e.g., only opened grades 9-10 for in-person instruction with set plans to phase in grades 11 and 12) while the county was in the Red Tier, the school site may continue their phased reopening if the county reverts back to the Purple Tier, if authorized by local health officer (LHO). This is only applicable to individual school sites. If a school district has a phased reopening of their schools, the schools in that district that did not open for in-person instruction may not re-open until the county meets the reopening criteria.

This also applies to schools subject to the updated Elementary Reopening Process (see below) applicable to the Purple Tier. Even if the school previously received a waiver under the former Elementary Education Waiver Process or meets the conditions to reopen under the updated Elementary Reopening Process, if it has not yet reopened and the county case rate (CR) exceeds the criteria described below, the school must delay reopening until the county case rate drops below the threshold.

In-Person School Reopening

The two subsections below describe the requirements for all schools, including those that have already reopened and those that have not. The Blueprint for a Safer Economy continues to inform the school reopening process. The Blueprint for a Safer Economy is based on Tiers, defined using the CR, the 7-day average of daily COVID-19 cases per 100,000 population, and the test positivity in a county. This Schools Framework uses the adjusted case rate, as described in the Blueprint.

Under this updated guidance, all schools must complete and post to their website homepages a COVID-19 Safety Plan (CSP), described below in COVID-19 Safety Plan for In-person Instruction section (page 10) prior to reopening for in-person instruction. Schools that have already reopened are required to post their CSPs by February 1, 2021. The CSP is intended to consolidate requirements to develop written plans pursuant to CDPH guidance first issued in May 2020 and the Cal/OSHA Emergency Temporary Standards finalized in November 2020.

Of note, the Cal/OSHA Emergency Temporary Standards require a written plan called the Cal/OSHA COVID-19 Prevention Program (CPP) (see the COVID-19 Safety Plan for In-person Instruction for more information); therefore, schools are expected to have already created this written plan. In order to align with Cal/OSHA standards and minimize burden to schools, the CPP for the school is the first component of the CSP.

As described below, under the updated Elementary Reopening Process, schools must also submit a copy of the CSP to the LHD and the State Safe Schools for All Team before they reopen elementary schools if they are operating within a jurisdiction or county that is in the Purple Tier.

REQUIREMENTS FOR SCHOOLS THAT HAVE ALREADY REOPENED

The *COVID-19 and Reopening In-Person Learning Framework for K-12 Schools in California, 2020-2021 School Year* (July 17, 2020 Framework) permitted schools to reopen for in-person instruction at all grades if they are located in counties in the Red, Orange, or Yellow Tiers under the Blueprint for a Safer Economy. Operations for schools that are already open must adhere to the School Reopening Guidance section below.

Schools that have already reopened for in-person instruction must, by February 1, 2021, complete and post a COVID-19 Safety Plan (CSP) to their website homepage or, in the case of schools that do not maintain websites, in another

publicly accessible manner, to continue operating in-person instruction, as described in the Covid-19 Safety Plan for In-Person Instruction section.

Schools that have reopened are not required to close if the county moves to the Purple Tier or goes over a CR of 25 per 100,000 population. See School Closure Determinations below for more information.

CRITERIA TO REOPEN FOR IN-PERSON INSTRUCTION

Red, Orange, and Yellow Tiers. Consistent with the July 17 Framework, schools may reopen at all grades if they are located in counties in the Red, Orange or Yellow Tiers under the Blueprint for a Safer Economy. Operations once reopened must adhere to the updated Sector Guidance for School and School-Based Program reflected in this document (see below). Schools that reopen under this paragraph must complete and post a CSP to their website homepage before reopening for in-person instruction, as described in the CSP Posting and Submission Requirements for In-Person Instruction [section](#).

Purple Tier. Schools may not reopen for grades 7-12 if the county is in Purple Tier. Subject to the limitation in the bullet immediately below, schools serving grades K-6 may reopen for in-person instruction in the Purple Tier, including during a State of California Regional Stay at Home Order, if they complete and post a CSP to their website homepage and submit the CSP to their local health officer (LHO) and the State Safe Schools for All Team and there are no identified deficiencies, as described in the Covid-19 Safety Plan (CSP) Posting and Submission Requirements for In-Person Instruction [section](#) below.

- **K-6 schools in counties in Purple Tier with CR>25:** Schools serving students in grades K-6 may not reopen for in-person instruction in counties with adjusted CR above 25 cases per 100,000 population per day. They may post and submit a CSP, but they are not permitted to resume in-person instruction until the adjusted CR has been less than 25 per 100,000 population per day for at least 5 consecutive days. This case rate reflects [recommendations](#) from the Harvard Global Health Institute analysis of safe school reopening policy. Please find additional information on how the adjusted CR is calculated [here](#). Recognizing that re-opening for in-person instruction takes time to routinize and improve safety, and that some schools may have already been conducting in-person learning successfully and had time to optimize all their policies and procedures to support minimal disease transmission on-site and detect new cases, schools who have already opened, as defined above, with minimal or no in-school transmission, may remain open and may consider increasing testing per CDPH supported testing [framework](#).

These new criteria and the requirements below replace the Elementary Education Waiver (issued August 3) that allowed LHOs to grant a waiver to school applicants for grades K-6 if specific criteria were satisfied. All waivers approved prior to this date remain valid.

COVID-19 SAFETY PLAN (CSP) FOR IN-PERSON INSTRUCTION

The COVID-19 Safety plan (CSP) consists of two parts: (1) the Cal/OSHA COVID-19 Prevention Program (CPP) and (2) the COVID-19 School Guidance Checklist.

Cal/OSHA Prevention Program (CPP)

On December 1, 2020, Cal/OSHA's Emergency Temporary Standards requiring employers to protect workers from hazards related to COVID-19 went into effect. The regulations require that employers, including schools, establish and implement a written CPP to address COVID-19 health hazards, correct unsafe or unhealthy conditions, and provide face coverings. Employers can also create a written CPP by incorporating elements of this program into their existing Injury and Illness Prevention Program (IIPP), if desired. Cal/OSHA has posted FAQs and a one-page fact sheet on the regulation, as well as a model COVID-19 prevention program.

- Cal/OSHA [Frequently Asked Questions](#)
- Cal/OSHA [Fact Sheet](#)
- Cal/OSHA Prevention Program Template - [Example](#)

COVID-19 School Guidance Checklist

In addition to the CPP, a COVID-19 School Guidance Checklist must be included and be posted online and submitted as outlined below.

COVID-19 SAFETY PLAN (CSP) POSTING AND SUBMISSION REQUIREMENTS FOR IN-PERSON INSTRUCTION

The Tiers from the Blueprint for a Safer Economy Framework inform the process needed for submission of CSPs for maintaining and/or resuming in-person instruction as described below and in Table 1.

Yellow (Tier 4/Minimal), Orange (Tier 3/Moderate), and Red (Tier 2/Substantial):

- For schools that have already reopened and are located in a county that is in the Yellow, Orange, or Red Tier, the LEA must post the CSP publicly on its website homepage by February 1, 2021.
- For those schools that have not reopened, and the county has been in the Purple Tier, the county must be in the Red Tier for 5 consecutive days before the school may reopen.
- For schools that have not reopened, the LEA must complete and post the CSP publicly on its website homepage at least 5 days prior to providing in-person instruction.
- While developing and prior to posting a CSP, it is strongly recommended that the LEA (or equivalent) consult with labor, parent, and community organizations. Examples of community organizations include school-based non-profit organizations and local organizations that support student enrichment, recreation, after-school programs, health services, early childhood services, or provide family support.

Purple (Tier 1/Widespread):

- For schools that have already reopened and are located in a county or LHD that is in the Purple Tier, the LEA must post the CSP publicly on its website homepage by February 1, 2021.
- Schools serving grades K-6 not already open, may reopen for in-person instruction if the LEA completes and posts a CSP to its website homepage and submits the CSP to their LHD and the State Safe Schools for All Team and does not receive notification of a finding that the CSP is deficient within 7 business days of submission. Under these circumstances, schools serving grades K-6 may only reopen for their K-6 grade students, even if their school serves non-K-6 grade students (e.g., a 6-8 school).
 - While developing and prior to submitting a CSP, the LEA must consult with labor, parent, and community organizations. Examples of community organizations include school-based non-profit organizations and local organizations that support student enrichment, recreation, after-school programs, health services, early childhood services or provide family support.
 - The COVID-19 School Guidance Checklist requires that the LEA provide evidence of consultation with labor, parent, and community organizations.
 - The LEA must sign an attestation confirming the names and dates that the organizations were consulted. If school staff are not represented by a labor organization, then the applicant must describe the process by which it consulted with school staff.

- The LEA must confirm publication of the CSP on the website of the LEA.
- The LEA must submit the CSP on behalf of all schools within their direct administrative authority, with site-specific precautions noted within the CSP to address considerations unique to specific school sites, as applicable. For example, a school district must submit a consolidated CSP for every school under its direct administrative authority, and must outline site-specific precautions insofar as there are features unique to the site that raise greater risks of COVID-19 transmission.
- If a group of private, faith-based, or charter schools within a single county are subject to the same governing authority (e.g., an archdiocese, charter management organization, etc.), the governing authority may submit the CSP on behalf of those schools, but must address site-specific considerations consistent with the bullet above. Otherwise, independent, private, faith-based, or charter schools that are affiliated with a broader network should post and submit the CSP for each school.
- LHDs and the State Safe Schools for All Team have 7 business days to provide feedback to the LEA regarding deficiencies in the CSP.
- The school may reopen on the eighth business day after submitting the CSP if the LHD and/or State Safe Schools for All Team do not provide notification that the CSP is unsafe within 7 business days of submission.
- If the LHD and/or State Safe Schools for All Team identify any deficiencies during the 7-business-day review period, the LEA will receive feedback on what they need to improve in order to be able to reopen for in-person instruction.
- After the LEA responds to feedback and re-submits the plan, the entity that identified the deficiency will have 7 business days to review revisions.
- If the LHD has noted a deficiency in a submitted CSP and has required a response prior to opening for in-person instruction, the LHD must notify the State Safe Schools for All Team.
- The school may reopen on eighth business day after submitting the revisions if the LHD and the State Safe Schools for All Team do not provide additional feedback.
- As noted above, schools serving grades K-6 may not reopen for in-person instruction in jurisdictions with CR above 25 cases per 100,000 population per day.

Table 1. School reopening actions for in-person instruction, by Tier			
Yellow	Orange	Red	Purple
CR <1.0* TP <2%	CR 1-3.9* TP 2-4.9%	CR 4-7* TP 5-8%	CR >7* TP >8%
- CSP posted publicly for K-12 th grades 5 days prior to in-person instruction.	- CSP posted publicly for K-12 th grades 5 days prior to in-person instruction.	- CSP posted publicly for K-12 th grades 5 days prior to in-person instruction. - Must be in Red 5 days prior to reopening.	- <u>Already reopened</u> : CSP posted publicly by 02/01/21. - <u>Not previously open</u> : - CSP posted publicly for K-6, and submitted concurrently to LHD and State Safe Schools for All Team. - 7 business days for review. - 7 th -12 th grade reopening not permitted if CR>7*. - K-6 th grade reopening not permitted if CR>25*, though CSP can be posted and submitted for review. - Note: Targeted in-person instruction may be offered pursuant to the Cohorting Guidance.

* Adjusted case rate.

While not required, LEAs are strongly encouraged to post on their website, along with the CSP, the detailed plans describing how they will meet the requirements outlined in the CSP elements. This can provide transparency to school community members making decisions about participation in in-person learning.

The email address for submission of the CSP to the State Safe Schools for All Team is: K12csp@cdph.ca.gov.

Cohorting Guidance for Specialized Services

This updated guidance does not modify or supersede the applicability of the Cohorting Guidance to school settings. More information regarding the minimum health and safety guidelines that must be followed to provide in-person services and supervision to children and youth in cohorts is set forth in the Cohorting Guidance, which applies across multiple sectors serving youth, including childcare and schools that are not reopened for in-person instruction.

The stable groups described in the Cohorting Guidance, and described below in the Stable Group Guidance decreases opportunities for exposure to or transmission of the virus; reduces the numbers of exposed individuals if COVID-19

is introduced into the cohort; facilitates more efficient contact tracing in the event of a positive case; and allows for targeted testing and quarantine of a single cohort instead of potential schoolwide closures in the event of a positive case or cluster of cases.

The Cohorting Guidance provides a way for schools not yet permitted to reopen under state and local public health directives or that have not yet reopened even though permitted to reopen to provide in-person supervision, instruction, targeted support services, and facilitation of distance learning for some students, especially high-need student groups and students who may not be able to benefit fully from distance learning offerings.

Existing state law requires public schools to provide in-person instruction to the greatest extent possible (Education Code section 45304(b)). State law further requires that distance learning ensure access to connectivity and devices that allow students to participate in the educational program and complete assigned work. In addition, state law requires that students with disabilities and English learners receive educational and related services to which they are entitled under the law, among other requirements (Education Code section 45303(b) (1), (4) & (5)). The Cohorting Guidance therefore provides an important avenue for schools that have not yet reopened under this guidance to provide supervision, instruction and support to small cohorts of students to ensure students receive necessary services even while students are generally participating in distance learning.

ADDITIONAL REOPENING CONSIDERATIONS

Availability of Distance Learning for Students Who Request It. Schools should continue to offer distance learning for students who request it.

Thoughtful, Phased Implementation. K-12 school sites should employ a phased-in model as a part of their reopening plan. Phased reopening plans for in-person instruction may include, but are not limited to:

- Shifting from a full distance learning model to hybrid.
- Gradually allowing for specified grades and/or a percentage of each grade to resume in-person learning, beginning with the youngest and most disproportionately impacted students.
- Allowing for a gradual number of students, at a specified capacity, per grade or school site.

If a school with a phased-in model has opened for in-person instruction, and the county changes to the Purple Tier or to a CR>25, the school may continue the phased reopening.

Staff Access to Campus if Not Reopened for In-Person Instruction. Teachers, school and support staff, and administrators may return to work physically without students on site while counties are not open for in-person instruction, provided that those on site follow the school's COVID-19 Safety Plan consistent with Cal/OSHA regulations.

Boarding Schools. Residential components of boarding schools are to remain closed (with the exception of residential components of boarding schools that are currently operating with the permission of local health authorities, and those serving wards or dependents of the juvenile courts) regardless of the Tier status of their county until further guidance is issued. The non-residential components of boarding schools (e.g., in-person instruction for day students) are governed by the same guidelines as other K-12 schools.

School Reopening Guidance

All guidance, as schools plan and prepare to resume in-person instruction, should be implemented as outlined in the In-Person School Reopening section, including the development of a CSP.

LAYERS OF SAFETY: INFECTION MITIGATION STRATEGIES

A key goal for safe schools is to reduce or eliminate in-school transmission. A helpful conceptual framing as schools plan for and implement safety measures for in-person instruction, is the layering of mitigation strategies. Each strategy (face coverings, stable groups, distancing, etc.) decreases the risk of in-school transmission; but no one layer is 100% effective. It is the combination of layers that are most effective and have been shown to decrease transmissions.

As schools plan for reopening for in-person instruction and as they continue to work on operations once open, it may be helpful to understand the mitigation strategies with stronger evidence supporting their use. We have ordered the list below such that the interventions known at this time to be more effective in reducing the risk of transmission appear before the ones that are helpful but may have a potentially smaller effect or have less evidence of efficacy. Of note, though scientific comparative assessments are limited, the top three items are likely of similar importance:

1. Face coverings.
2. Stable groups.
3. Physical distancing.
4. Adequate ventilation.
5. Hand hygiene.

6. Symptom and close contact exposure screening, with exclusion from school for staff or students with symptoms or with confirmed close contact.
7. Surveillance or screening testing.

Frequent disinfection, which was thought at the beginning of the pandemic to be a key safety component, can pose a health risk to children and students due to the chemicals used and has proven to have limited to no impact on COVID-19 transmission. Disinfection with specified products (see [Cleaning and Disinfection section](#)), is recommended for schools after a case has been identified in the school, in the spaces where the case spent a large proportion of their time (e.g., classroom, or administrator's office if an administrator). Please see [Cleaning and Disinfection section](#) for additional details.

Of note, adults (>18 years old) appear to be more infectious overall than children, making staff-to-staff transmission an important focus for safety efforts. A specific situation that has resulted in exposure and transmission among staff in multiple schools is eating and drinking indoors without being physically distant (for instance, in break rooms or common areas). Specific messaging and support to staff to prevent this scenario are strongly recommended.

The following sections outline specific actions school sites should take to keep students and staff safe.

GENERAL MEASURES

Establish and continue communication with local and state authorities to determine current disease levels and control measures in your community. For example:

- Consult with your LHO, or designated public health staff, who are best positioned to monitor and provide advice on local conditions. A directory can be found [here](#).
- Collaborate with other schools and school partners in your region, including the county office of education.
- Access State Technical Assistance resources available for schools and for LHDs to support safe and successful in-person instruction, available on the [Safe Schools for All Hub](#).
- Regularly review updated guidance from state agencies, including [CDPH](#) and [California Department of Education](#).

Per Cal/OSHA requirements noted above, establish a written CPP at every facility, perform a comprehensive risk assessment of all work areas and work tasks, and designate a person at each school to implement the plan.

FACE COVERINGS

Face coverings must be used in accordance with [CDPH guidelines](#) unless a person is exempt as explained in the guidelines.

- Information contained in the [CDPH Guidance for the Use of Face Coverings](#) should be provided to staff and families of students. The face covering guidance applies to all settings, including schools. The guidance discusses the circumstances in which face coverings must be worn and the exemptions, as well as any policies, work rules, and practices employers have adopted to ensure the use of face coverings.
- Teach and reinforce use of [face coverings](#), or in limited instances, [face shields with drapes](#).
- Students and staff should be frequently reminded not to touch the face covering and to [wash their hands](#) frequently.
- Information should be provided to all staff and families in the school community on [proper use, removal, and washing of cloth face coverings](#).
- Training should also include policies on how people who are exempted from wearing a face covering will be addressed.
- **Students in all grade levels K-12 are required to wear face coverings at all times, while at school, unless [exempted](#).**
 - A cloth face covering or face shield should be removed for meals, snacks, naptime, or when it needs to be replaced. When a cloth face covering is temporarily removed, it should be placed in a clean, safe area, clearly marked with the student's name and date, until it needs to be put on again.
- Participants in youth and adult sports should wear face coverings when participating in the activity, even with heavy exertion as tolerated, both indoors and outdoors.
- The face covering guidance recognizes that there are some people who cannot wear a face covering for a number of different reasons. People are exempted from the requirement if they are under age 2, have a medical or mental health condition or disability that would impede them from properly wearing or handling a face covering, those with a communication disability, or when it would inhibit communication with a person who is hearing impaired. Those with communication disabilities or caregivers of those with communication disabilities can consider wearing a clear mask or cloth mask with a clear panel when appropriate.
- Persons exempted from wearing a face covering due to a medical condition, as confirmed by school district health team and therapists, must wear a non-restrictive alternative, such as a face shield with a drape on the bottom edge, as long as their condition permits it.

- Schools must develop protocols to provide a face covering to students who inadvertently fail to bring a face covering to school to prevent unnecessary exclusions.
- Schools should offer alternative educational opportunities for students who are excluded from campus because they will not wear a face covering.
- In order to comply with this guidance, schools must exclude students from campus if they are not exempt from wearing a face covering under [CDPH guidelines](#) and refuse to wear one provided by the school.
- Employers must provide and ensure staff use face coverings and all other required personal protective equipment in accordance with CDPH guidelines.
- The California Governor's Office of Emergency Services (CalOES) and CDPH are and will be working to support procurement and distribution of face coverings and needed personal protective equipment to schools. Additional information can be found [here](#).
- The Department of General Services negotiated statewide master contracts, which LEAs may leverage to reduce costs and secure supply chains. Additional information can be found [here](#).
- Face covering policies apply on school buses and any vehicle affiliated with the LEA used to transport students, staff, or teachers to and/or from a school site.
- Classrooms, school buses, and shared school office spaces used by persons who cannot tolerate face coverings are less safe for others who share that environment. Schools may want to consider notifying others who share spaces with unmasked or sub-optimally masked individuals about the environment. Also consider employing several additional mitigation strategies (or fortifying existing mitigation strategies) to optimize safety. These may include increasing the frequency of asymptomatic tests offered to unmasked or sub-optimally masked individuals, employing longer social distances, installing clear physical barriers, reducing duration of time in shared environments, and opting for either outdoor or highly-ventilated indoor educational spaces, as possible.

Staff

- All staff must use face coverings in accordance with [CDPH guidelines](#) unless Cal/OSHA standards require respiratory protection.
- For staff who come into routine contact with others, CDPH recommends the use of disposable 3-ply surgical masks, which are more effective than cloth face coverings.

- In limited situations where a face covering cannot be used for pedagogical or developmental reasons, (e.g., communicating or assisting young children or those with special needs) a face shield with a drape (per [CDPH guidelines](#)) can be used instead of a face covering while in the classroom as long as the wearer maintains physical distance from others. Staff must return to wearing a face covering outside of the classroom.
- Workers or other persons handling or serving food must use gloves in addition to face coverings.
- Employers should consider where disposable glove use may be helpful to supplement frequent handwashing or use of hand sanitizer; examples are for workers who are screening others for symptoms or handling commonly touched items.

STABLE GROUP GUIDANCE CONSIDERATIONS BY GRADE LEVEL

Stable groups provide a key mitigation layer in schools. A stable group is a group with fixed membership that stays together without mixing with any other groups for any activities.

Guidance from other agencies, including the federal Centers for Disease Control and Prevention (CDC), sometimes refers to them as “cohorts”¹ or “pods.”

Implementing stable groups of students and staff reduces the numbers of exposed individuals if COVID-19 is introduced into the group, decreases opportunities for exposure to or transmission of the virus; facilitates more efficient contact tracing in the event of a positive case; and allows for targeted testing and quarantine of a small group instead of potential schoolwide closures in the event of a positive case or cluster of cases.

How can an elementary school create stable groups?

- Students can be placed into stable groups that stay together all day with their core teacher (and any aide or student teacher who is present). If there are counselors or teachers of electives, they should ideally be assigned to only one group or conduct their classes / counseling virtually.

¹ The CDC's use of the term is different from the use of “cohort” within California's guidance. “Cohort” is specifically defined in the Cohort Guidance as a group no larger than 16 individuals. To avoid any confusion, this guidance uses “stable group” instead of “cohort” for this concept.

- Students should eat lunch and go to recess with their group at times that are staggered and separated from other groups.
- There are different approaches to organizing stable groups. Students can be divided into smaller groups that attend school in person on a rotating schedule. Here are a few examples:
 - A group of students comes to school for in-person instruction on Monday and Tuesday. Another attends on Thursday and Friday.
 - On the alternating days, they learn remotely.
 - Some LEAs or schools have students attend school in-person during alternating weeks.
 - Other LEAs or schools have one group of students attend school in person in the morning and another group attend school in person in the afternoon.

These approaches create even smaller groups that stay together and do not mix with one another. Electives or counseling can be conducted virtually to limit the number of staff in direct contact with any given stable group.

How can a middle or high schools school create stable groups?

- Students can be placed into groups that remain together all day during in-person instruction. Middle or high school groups are often larger than elementary school groups. Because middle and high school curricula differ from elementary school curricula, teachers are not usually assigned to one stable group of students, creating an opportunity for mixing across stable groups or students. The following guidance provides examples of approaches to minimizing crossover of staff across stable groups of students.
- The CDC guidance notes that schools may keep a single group together in one classroom and have educators rotate between groups, or have smaller groups move together in staggered passing schedules to other rooms they need to use (e.g., science labs) without allowing students or staff to mix with others from distinctive groups.
- Teachers and supports staff from different content areas can work in teams that share students, preferably in a dedicated space, separate from others. For example: math, science, English, and history teachers might work as a team with a set group of students they share.
- When combined with block schedules that reduce the number of courses students take in any one day, the number of educators and students who interact can be minimized further.
- It is also possible to keep students in one stable group that stays together with one or two instructors who teach them directly part of the day and

support their instruction from others who teach them virtually during other parts of the day.

- Electives can be offered virtually or organized so that no group of students takes more than one elective in a term and the elective teachers do not work with more than one or two groups.
- Stable groups could switch schedules or even membership after a break at the quarter, trimester, or semester in ways that support students being able to take additional classes without substantial group mixing.
- The school year can be divided into even smaller time units – 4 to 8 weeks for example – in which students study one or two subjects intensively, completing all of the work they might normally have completed in a semester or a year. They stay in stable groups with only 1 or 2 teachers during this time. At the end of unit, they switch schedules and groups to take 1 or 2 other courses, and so on throughout the year.
- Additional examples of approaches to creating stable groups of students that limit the risk of transmission across large groups of students are available [here](#).

OTHER CONSIDERATIONS:

- **Schedule for Access and Inclusion:** The construction of stable groups can increase or decrease equity or segregation across the school campus, so consider how to support inclusion and access for all student populations as you organize students for learning.
- **Schedules as Tools for Physical Distancing:** To the extent possible, schools should think about how to reconfigure the use of bell schedules to streamline foot traffic and maintain practicable physical distancing during passing times and at the beginning and end of the school day. Create staggered passing times when students must move between rooms minimize congregated movement through hallways as much as is practicable.
- **Restructure Electives:** Elective teachers who move in and out of stable groups can become points of exposure for themselves and the students they work with. Some models have made elective teachers part of middle and high school stable groups, while others have used them only for remote instruction. Other options include ensuring elective teachers maintain longer distance from students (e.g., 12 feet).

IMPLEMENTING DISTANCING INSIDE AND OUTSIDE THE CLASSROOM

Arrival and Departure

- Maximize space between students and between students and the driver on school buses and open windows to the greatest extent practicable. Two windows on a bus should be opened fully at a minimum.
- Minimize contact at school between students, staff, families and the community at the beginning and end of the school day. Prioritize minimizing contact between adults at all times.
- Stagger arrival and drop off-times and locations as consistently as practicable to minimize scheduling challenges for families.
- Designate routes for entry and exit, using as many entrances as feasible. Put in place other protocols to limit direct contact between people as much as practicable.
- Ensure each school bus is equipped with extra unused face coverings for students who may have inadvertently failed to bring one.

Classroom Space

- Maximize space between seating and desks. Distance teacher and other staff desks at least 6 feet away from student and other staff desks.



Figure 1. Classroom with adequate spacing between students

Distance student chairs at least 6 feet away from one another, except where 6 feet of distance is not possible after a good-faith effort has been made. Upon request by the local health department and/or State Safe Schools Team, the superintendent should be prepared to demonstrate that good-faith effort, including an effort to consider all outdoor/indoor space options and hybrid learning models. Please reference Figures 1 and 2 for examples of adequate and inadequate spacing. Under no circumstances should distance between student chairs be less than 4 feet. If 6 feet of distance is not possible, it is recommended to optimize ventilation and consider using other separation techniques such as



Figure 2. Classroom without adequate spacing between students

partitions between students or desks, or arranging desks in a way that minimizes face-to-face contact.

- Short-term exposures of less than 6 feet between students and staff are permitted (e.g., a teacher assisting a student one-on-one), but the duration should be minimized and masks must be worn.

- Consider redesigning activities for smaller groups and rearranging

furniture and play spaces to maintain separation.

- Staff should develop instructions for maximizing spacing and ways to minimize movement in both indoor and outdoor spaces that are easy for students to understand and are developmentally appropriate.
- Prioritize the use and maximization of outdoor space for activities where possible.
- Activities where there is increased likelihood for transmission from contaminated exhaled aerosols such as band and choir practice and performances are permitted outdoors only, provided that precautions such as physical distancing and use of face coverings are implemented to the maximum extent (see below in Non-classroom spaces).
- Consider using cleanable privacy boards or clear screens to increase and enforce separation between staff and students.

Non-Classroom Spaces

- Limit nonessential visitors, volunteers and activities involving other groups at the same time. School tours are considered a non-essential activity and increase the risk of in-school transmission.
- Limit communal activities. Alternatively, stagger use, properly space occupants and clean in between uses.
- Consider use of non-classroom space for instruction, including regular use of outdoor space, weather permitting. For example, consider part-day instruction outside.
- Minimize congregate movement through hallways as much as practicable. For example, establish more ways to enter and exit a campus, create staggered passing times when necessary or when students cannot stay in one room and use visual reminders on the floor

that students can follow to enable physical distancing while passing and waiting in line. In addition, schools can consider eliminating the use of lockers, which can become congregating areas.

- Serve meals outdoors or in classrooms instead of cafeterias or group dining rooms where practicable. Where cafeterias or group dining rooms must be used, keep students together in their stable groups, ensure physical distancing, hand hygiene before and after eating, and consider assigned seating. If indoor meal times are paired with recess or outdoor time, consider having half of a stable group of students eat while the other half is outdoors and then switch. Serve individually plated or bagged meals. Avoid sharing of foods and utensils and buffet or family-style meals.
- Consider holding recess activities in separated areas designated by group.
- School athletic activities and sports should follow the [CDPH Outdoor and Indoor Youth and Adult Recreational Guidance](#). Note that risk of infection transmission increases for indoor activities; indoor sports are higher risk than outdoor sports due to reduced ventilation. And transmission risk increases with greater exertion levels; greater exertion increases the rate of breathing and the quantity of air that is inhaled and exhaled with every breath.
- Outdoor singing and band practice are permitted, provided that precautions such as physical distancing and mask wearing are implemented to the maximum extent possible. Playing of wind instruments (any instrument played by the mouth, such as a trumpet or clarinet) is strongly discouraged. School officials, staff, parents, and students should be aware of the increased likelihood for transmission from exhaled aerosols during singing and band practice, and physical distancing beyond 6 feet is strongly recommended for any of these activities.

VENTILATION

- Ensure sufficient ventilation in all school classrooms and shared workspaces per American Society of Heating, Refrigerating, and Air-Conditioning Engineers (ASHRAE) [guidance](#) on ventilation.
 - Contact a mechanical engineer, heating, ventilation, and air conditioning (HVAC) design professional, or mechanical contractor in order to evaluate your ventilation system in regards to the ASHRAE guidance.
 - If opening windows poses a safety or health risk (e.g., by allowing pollen in or exacerbating asthma symptoms) to persons in the

- facility, consider alternatives. For example, maximize central air filtration for HVAC systems by using filters with a minimum efficiency reporting value (MERV) of at least 13.
- Consider installing portable high-efficiency air cleaners, upgrading the building's air filters to the highest efficiency possible, and making other modifications to increase the quantity of outside air and ventilation in classrooms, offices and other spaces.
 - If not able to properly ventilate indoor instructional spaces, outdoor instruction is preferred (use caution in poor air quality conditions).
- Ventilation considerations are also important on school buses; use open windows as much as possible to improve airflow.
 - Specific practices to avoid:
 - Classrooms or buses with no ventilation.
 - Classrooms or buses with increased airflow across occupants (e.g., air conditioners or fans blowing into the classroom or overhead fans creating air currents across occupants).

PROMOTE HEALTHY HAND HYGIENE PRACTICES

- Teach and reinforce washing hands, avoiding contact with one's eyes, nose, and mouth, and covering coughs and sneezes among students and staff.
 - Teach students and remind staff to use tissue to wipe their nose and to cough/sneeze into a tissue or their elbow.
 - Students and staff should wash their hands frequently throughout the day, including before and after eating; after coughing or sneezing; after classes where they handle shared items, such as outside recreation, art, or shop; and before and after using the restroom.
 - Students and staff should wash their hands for 20 seconds with soap, rubbing thoroughly after application. Soap products marketed as "antimicrobial" are not necessary or recommended.
 - Staff should model and practice handwashing. For example, use bathroom time in lower grade levels as an opportunity to reinforce healthy habits and monitor proper handwashing.
 - Students and staff should use fragrance-free hand sanitizer when handwashing is not practicable. Sanitizer must be rubbed into

- hands until completely dry. Note: frequent handwashing is more effective than the use of hand sanitizers.
- Ethyl alcohol-based hand sanitizers are preferred and should be used when there is the potential of unsupervised use by children.
- Isopropyl alcohol-based hand sanitizers are more toxic when ingested or absorbed into skin.
- Do not use hand sanitizers that may contain methanol which can be hazardous when ingested or absorbed.
 - Children under age 9 should only use hand sanitizer under adult supervision. Call Poison Control if consumed: 1-800-222-1222.
- Consider portable handwashing stations throughout the school site and near classrooms to minimize movement and congregating in bathrooms to the extent practicable.
- Develop routines enabling students and staff to regularly wash their hands at staggered intervals.
- Ensure adequate supplies to support healthy hygiene behaviors, including soap, tissues, no-touch trashcans, face coverings, and hand sanitizers with at least 60 percent ethyl alcohol for staff and children who can safely use hand sanitizer.

CLEANING AND DISINFECTION

The section below provides recommendations for cleaning and disinfection. “Cleaning” involves water and soap or a detergent, does not use disinfecting agents, and significantly decreases germs on surfaces and decreases infectious risks. “Disinfection” kills germs on surfaces using specific agents (see below for those approved for use). If a case has been identified, the spaces where the case spent a large proportion of their time (e.g., classroom, or administrator’s office if an administrator) should be disinfected. Frequent disinfection can pose a health risk to children and students due to the strong chemicals often used and so is not recommended in the school setting unless a case has been identified.

- Staff should clean frequently-touched surfaces at school and on school buses daily.
- Buses should be thoroughly cleaned daily and after transporting any individual who is exhibiting symptoms of COVID-19. Drivers should be provided cleaning materials, including but not limited to wipes and disposable gloves, to support cleaning of frequently touched surfaces during the day.
- Frequently touched surfaces in the school include, but are not limited to:
 - Sink handles.

- Shared tables, desks, or chairs.
 - If a school has morning and afternoon stable groups, the desks and tables are considered shared and should be cleaned before the next group arrives.
 - Desks or chairs do not need daily cleaning if only used by one individual during the day.
- Door handles.
- Shared technology and supplies.
- If used, outdoor playgrounds/natural play areas only need routine maintenance. Make sure that children wash or sanitize their hands before and after using these spaces. When hand hygiene is emphasized, cleaning of outdoor structures play is not required between cohorts.
- When choosing disinfection products after an in-school COVID-19 case has been identified (see "What to do if there is a case of COVID-19 in a School"), use those approved for use against COVID-19 on the [Environmental Protection Agency \(EPA\)- approved list "N"](#) and follow product instructions.
 - To reduce the risk of asthma and other health effects related to disinfection, programs should select disinfectant products on list N with asthma-safer ingredients (hydrogen peroxide, citric acid or lactic acid) as recommended by the US EPA Design for Environment program.
 - Avoid products that contain peroxyacetic (peracetic) acid, sodium hypochlorite (bleach) or quaternary ammonium compounds, which can cause asthmatic attacks.
 - Follow label directions for appropriate dilution rates and contact times. Provide workers training on the chemical hazards, manufacturer's directions, Cal/OSHA requirements for safe use, and as applicable and as required by the Healthy Schools Act.
 - Custodial staff and any other workers who clean and disinfect the school site must be equipped with proper personal protective equipment, including gloves, eye protection, respiratory protection, and other appropriate protective equipment as required by the product instructions. All products must be kept out of the reach of children and stored in a space with restricted access.
 - Establish a cleaning schedule in order to avoid both under- and over-use of cleaning products.
- Ensure safe and correct application of disinfectant and keep products away from students.

- Ensure proper ventilation during cleaning and disinfecting. Introduce fresh outdoor air as much as possible for example by opening windows where practicable. When disinfecting, air out the space before students arrive; disinfection should be done when students are not present.
- Take steps to ensure that all water systems and features (for example, drinking fountains and decorative fountains) are safe to use after a prolonged facility shutdown to minimize the risk of Legionnaires' disease and other diseases associated with water.

CHECK FOR SIGNS, SYMPTOMS AND EXPOSURES

- Actively encourage staff and students who are sick or who have recently had close contact with a person with COVID-19 to stay home. Develop policies that encourage sick staff and students to stay at home without fear of reprisal, and ensure staff, students and students' families are aware of these policies.
- Implement symptom and exposure screening for all staff and students at home each day before leaving for school.
- Students or staff exhibiting symptoms of COVID-19 at school (fever of 100.4 degrees or higher, cough, difficulty breathing, or other COVID-19 symptoms) must be immediately isolated in a private area until they can leave school or be picked up by a parent or guardian. Ill students and staff should be recommended to be tested for COVID-19 as soon as possible.
- Policies should not penalize students for missing class.

Symptom and Exposure Screening

Daily screening for COVID-19 symptoms and for exposure to someone with COVID-19 prior to leaving for school can prevent some people with COVID-19 from coming to school while infectious, thus preventing in-school transmission. Screening does not prevent asymptomatic cases from being at school and spreading SARS-CoV2, the virus that causes COVID-19.

CDPH recommends that:

1. Parents be provided with the list of COVID-19 symptoms and instructed to keep their child at home if the child is feeling ill or has symptoms of COVID-19, even if symptoms are very mild, and to get their ill child tested for SARS-CoV2.
2. Staff members be provided with the list of COVID-19 symptoms and be instructed to call in sick and stay home if having symptoms of COVID-19 and to get tested for SARS-CoV2.

Note: If a student or staff member has chronic allergic or asthmatic

symptoms (e.g., cough or runny nose), then a change in their symptoms from baseline would be considered a positive symptom.

Implementation of home symptom and exposure screening

- There are several implementation options, each with benefits and challenges. Implementing a daily reminder system for home screening, such as a text message or through an online screening application, can support families and staff to review the symptom list each day before leaving for school and confirm that they do not have symptoms of COVID-19 and have not had close contact with a known case. This is likely the easiest and most effective approach, but families or staff may not all have technology access to support this. For those who do not, a list of screening questions on paper can be provided for daily review at home. Schools do not need to monitor compliance with home screening.

Symptoms at School

- Identify an isolation room or area to separate anyone who exhibits 1 or more symptoms of COVID-19 while at school.
- Staff and students should self-monitor throughout the day for signs of illness; staff should observe students for signs or symptoms of illness to support students who are less able to self-monitor or less likely to self-report.
- Any students or staff exhibiting 1 or more symptoms should be required to wait in the previously identified isolation area until they can be transported home or to a healthcare facility, as soon as practicable.
- If a student is exhibiting 1 or more symptoms of COVID-19, staff should communicate with the parent/caregiver and refer to the student's health history form and/or emergency card.
- Unless the LHD recommends otherwise, there is no need to exclude asymptomatic contacts (students or staff) of the symptomatic individual from school until test results for the symptomatic individual are known.

Return to school after exclusion for symptoms at home or in school:

- Ensure that students, including students with disabilities, have access to instruction when out of class, as required by federal and state law.
- Testing of symptomatic students and staff can be conducted through local health care delivery systems or other testing resources, as fits the context of the local health jurisdiction. Advise staff members and students with symptoms of COVID-19 infection not to return for in-person instruction until they have met [CDPH criteria](#) to discontinue home isolation for those with symptoms:

- At least 24 hours have passed since resolution of fever without the use of fever-reducing medications; and
- Other symptoms have improved; and
- They have a negative test for SARS-CoV-2, OR a healthcare provider has provided documentation that the symptoms are typical of their underlying chronic condition (e.g., allergies or asthma) OR a healthcare provider has confirmed an alternative named diagnosis (e.g., Streptococcal pharyngitis, Coxsackie virus), OR at least 10 days have passed since symptom onset.

STAFF-TO-STAFF INTERACTIONS

- Ensuring staff maintain physical distancing of six feet from each other is critical to reducing transmission between adults.
- Ensure that all staff use face coverings in accordance with [CDPH guidelines](#) and Cal/OSHA standards.
- Support staff who are at higher risk for severe illness or who cannot safely distance from household contacts at higher risk, by providing options such as telework, where appropriate, or teaching in a distance learning context.
- Conduct all staff meetings, professional development training and education, and other activities involving staff with physical distancing measures in place, outside, or virtually, where physical distancing is a challenge.
- Minimize the use of and congregation of adults in staff rooms, break rooms, and other settings. Try to provide space outside whenever possible.

LIMIT SHARING

- Consider suspending or modifying use of site resources that necessitate sharing or touching items. For example, consider suspending use of drinking fountains and instead encourage the use of reusable water bottles.
- Limit use and sharing of objects and equipment, items such as electronic devices, clothing, toys, games, and art supplies to the extent practicable, or limit use of supplies and equipment to one group of children at a time and clean between uses.
 - Cleaning shared objects between uses (for example with microfiber cloths or baby wipes) can help to physically remove germs on surfaces.
 - Ensure adequate supplies to minimize sharing of high-touch materials.

- Keep each student's individual belongings separated and in individually labeled storage containers, cubbies or areas.

TRAIN ALL STAFF AND EDUCATE FAMILIES

- Train all staff and provide educational materials to families in the following safety actions:
 - Proper use, removal, and washing of face coverings.
 - Physical distancing guidelines and their importance.
 - Symptoms screening practices.
 - COVID-19 specific symptom identification.
 - How COVID-19 is spread.
 - Enhanced sanitation practices.
 - The importance of staff and students not coming to work they have symptoms, or if they or someone they live with or they have had close contact with has been diagnosed with COVID- 19.
 - For staff, COVID-19 specific symptom identification and when to seek medical attention.
 - The employer's plan and procedures to follow when staff or students become sick at school.
 - The employer's plan and procedures to protect staff from COVID-19 illness.

Consider conducting the training and education virtually, or, if in-person, outdoors, and ensure a minimum of six-foot distancing is maintained.

MAINTAIN HEALTHY OPERATIONS

- Monitor staff absenteeism and have a roster of trained back-up staff where available.
- Monitor symptoms among your students and staff on school site to help isolate people with symptoms as soon as possible.
- Designate a staff liaison or liaisons to be responsible for responding to COVID-19 concerns. Other staff should know who the liaisons are and how to contact them. The liaison should be trained to coordinate the documentation and tracking of possible exposures, in order to notify local health officials, staff and families in a prompt and responsible manner. This will support local health department contact tracing efforts.
- Maintain communication systems that allow staff and families to self-report symptoms and receive prompt notifications of exposures, exclusions, and closures, while maintaining confidentiality, as required by

FERPA and state law related to privacy of educational records. Additional guidance can be found [here](#).

- Consult with [CDPH K-12 School Testing Guidance](#) if routine testing is being considered by a LEA.
- Support students who are at higher risk for severe illness or who cannot safely distance from household contacts at higher risk, by providing options such as distance learning.

What to do if there is a Confirmed or Suspected Case of COVID-19 in a School

What measures should be taken when a student, teacher or staff member has symptoms, is a contact of someone infected, or is diagnosed with COVID-19?

	Student or Staff with:	Action	Communication with school community
1.	COVID-19 symptoms (e.g., fever, cough, loss of taste or smell, difficulty breathing) Symptom screening: per CDC Symptom of COVID-19 .	<ul style="list-style-type: none"> • Send home if at school. • Recommend testing (If positive, see #3, if negative, see #4). • School/classroom remain open. 	<ul style="list-style-type: none"> • No action needed.
2.	Close contact (+) with a confirmed COVID-19 case.	<ul style="list-style-type: none"> • Send home if at school. • Exclude from school for 10 days from last exposure, per CDPH quarantine recommendations. • Recommend testing 5-7 days from last exposure (but will not shorten 10-day exclusion if negative). • School/classroom remain open. 	<ul style="list-style-type: none"> • Consider school community notification of a known exposure. No action needed if exposure did not happen in school setting.
3.	Confirmed COVID-19 case infection.	<ul style="list-style-type: none"> • Notify the LHD. • Exclude from school for 10 days from symptom onset date or, if asymptomatic, for 10 days from specimen collection date. • Identify school contacts (+), inform the LHD of identified contacts, and exclude 	<ul style="list-style-type: none"> • School community notification of a known case. • Notification of persons with

		<p>contacts (possibly the entire stable group (††)) from school for 10 days after the last date the case was present at school while infectious.</p> <ul style="list-style-type: none"> • Recommend testing asymptomatic contacts 5-7 days from last exposure and immediate testing of symptomatic contacts (negative test results will not shorten 10-day exclusion). • Disinfection and cleaning of classroom and primary spaces where case spent significant time. • School remains open. 	<p>potential exposure if case was present in school while infectious</p>
4.	<p>Symptomatic person tests negative or a healthcare provider has provided documentation that the symptoms are typical of their underlying chronic condition.</p>	<ul style="list-style-type: none"> • May return to school after 24 hours have passed without fever and symptoms have started improving. • School/classroom remain open. 	<ul style="list-style-type: none"> • Consider school community notification if prior awareness of testing.

(†) A contact is defined as a person who is within 6 feet from a case for more than 15 minutes cumulative within a 24-hour period, regardless of face coverings. In some school situations, it may be difficult to determine whether individuals have met this criterion and an entire stable group, classroom, or other group may need to be considered exposed, particularly if people have spent time together indoors.

(††) See Stable Group Guidance for definition of a stable group. In some situations, (e.g., when seating charts are used, face covering is well adhered to, and teachers or staff have observed students adequately throughout the day), contact tracing and investigation may be able to determine more precisely whether each stable group member has been exposed. In this situation, those who were not close contacts could continue with in-person instruction.

CONFIRMED COVID-19 CASE

Although the LHD may know of a confirmed or probable case of COVID-19 in a student or staff member before the school does, it is possible that the school may be made aware of a case before the LHD via a parent or staff member report.

The following are the interim COVID-19 case definitions from the Council of State and Territorial Epidemiologists'.

Confirmed case: Meets confirmatory laboratory evidence (detection of SARS-CoV-2 RNA in a clinical or autopsy specimen using a molecular amplification test).

Probable case: Meets clinical criteria AND epidemiologic linkage(‡) with no confirmatory lab testing performed for SARS-CoV-2; OR meets presumptive laboratory evidence (detection of SARS-CoV-2 by antigen test in a respiratory specimen); OR meets vital records criteria with no confirmatory laboratory evidence for SARS-CoV-2.

(‡) Epidemiologically-linked cases include persons with close contact with a confirmed or probable case of COVID-19 disease; OR a member of a risk stable group as defined by public health authorities during an outbreak. This includes persons with identifiable connections to each other such as sharing a defined physical space e.g., in an office, facility section or gathering, indicating a higher likelihood of linked spread of disease than sporadic community incidence.

Local Health Department Actions

1. Interview the case to identify the infectious period and whether case was infections while at school; identify household and community close contacts, particularly any close contacts at school.
2. It may be necessary to consider the entire class or members of the case's stable group exposed, as it can be challenging to determine who may have had contact with the case within 6 feet for at least 15 cumulative minutes in a 24-hour period. In some situations, case investigations may be able to determine individual members of a stable group are close contacts, and allow those who are not identified as close contacts to continue in-person instruction.
3. Notify the school COVID-19 coordinator or point person at the school that a case of COVID-19 in a student or staff member has been reported and provide guidance to identify and generate a line list of close contacts at the school.
4. Notify all close contacts at the school and instruct them to follow [CDPH COVID-19 Quarantine Guidance](#). (or follow LHO orders, if relevant and/or more stringent).
5. Recommend that all close contacts be tested; symptomatic contacts should be prioritized for immediate testing, and asymptomatic contacts should be recommended to be tested 5-7 days from last exposure.
6. Contacts who test negative must still complete the required quarantine as defined in the [CDPH guidance](#).
7. Contacts who test positive are required to isolate until at least 10 days

have passed since symptom onset; and at least 24 hours have passed since resolution of fever without the use of fever-reducing medications; and other symptoms have improved. If asymptomatic, cases should be isolated for 10 days after the specimen collection date of their positive test.

8. Investigate COVID-19 cases in school students and staff to determine if in-school transmission likely occurred and whether any school-related factors could have contributed to risk of infection. Assist schools to update protocols as needed to prevent additional cases.

School Actions

1. Schools must adhere to required reporting requirements and notify, as indicated, the LHD of any newly reported case of COVID-19 in a student or staff member if the LHD has not yet contacted them about the case.
2. If the case is present at school at the time the school is notified, the case must go home and be excluded from school for at least 10 days from symptom onset date or, if asymptomatic, 10 days from the date the specimen was collected for the positive test.
3. Send a notice, developed in collaboration with the LHD, to parents and staff to inform them that a case of COVID-19 in a student or staff member has been reported and that the school will work with the LHD to notify exposed people. (see sample notification #1 in Appendix 2).
4. Arrange for cleaning and disinfection of the classroom and primary spaces where case spent significant time (see Cleaning and Disinfection above for recommendations). This does not need to be done until students and staff in the area have left for the day.
5. Implement online/distance learning for student cases if they are well enough to participate.

School closure determinations should be made in consultation with the LHO according to the section "School Closure Determinations." A school with confirmed cases and even a small cluster of COVID-19 cases can remain open for in-person education as long as contact tracing identifies all school contacts for exclusion and testing in a timely manner, any small cluster is investigated and controlled rapidly, and the LHO agrees that the school can remain open.

MEASURES FOR WHEN A CLUSTER OR OUTBREAK IS BEING INVESTIGATED AT A SCHOOL

When either a school or LHD is aware that an outbreak may be underway, the LHD should investigate, in collaboration with the school, to determine whether

these cases had a common exposure at school (e.g., a common class or staff member, bus ride, or other common exposures outside of school).

CDPH defines a school outbreak as 3 or more confirmed or probable cases of staff or students occurring within a 14-day period who are epidemiologically-linked in the school, are from different households and are not contacts of each other in any other investigation cases (e.g., transmission likely occurred in the school setting).

The objectives of a school outbreak investigation are to identify and isolate all cases and to identify, quarantine, and test contacts to prevent further transmission of COVID-19 at the school. In addition, the investigation will attempt to ascertain whether the cases had a common exposure at school (e.g., a common class or teacher, bus ride, or other common exposures in the school setting). The investigation may also reveal common exposures outside of the school setting.

As noted above, an outbreak investigation is also an opportunity to understand the circumstances that may have allowed for transmission in the school setting. It is recommended that investigations determine whether there is adherence to key mitigation strategies to prevent school transmission. If gaps are identified, schools should take steps to strengthen strategies to prevent future outbreaks.

Local Health Department Actions

1. Review interviews (or re-interview as needed) of clustered cases to identify common exposures and determine whether the cluster suggests an outbreak with transmission at the school. If data suggest an outbreak, then notify the school about starting an investigation.
2. Provide the school with guidance on identifying and creating a line list of all school cases and contacts, including illness onset date, symptoms, date tested, test results, etc. (see sample data collection notification in Appendix 2).
3. Consult with CDPH as needed for technical assistance, testing, and other resources.
4. Form an outbreak investigation team with a lead investigator and including one or more school staff members to assist with the investigation.
5. Identify all potential exposures and close contacts and implement testing of contacts, prioritizing symptomatic contacts for testing.
6. Testing may be recommended for those who were not identified as close contacts but could potentially have been exposed; the fastest pathway to get test results rapidly should be used.
7. All symptomatic contacts should be considered probable cases and be

interviewed to identify prioritized close contacts and exposures while awaiting their test results.

8. Implement isolation of all cases and symptomatic contacts and quarantine of all asymptomatic contacts of confirmed and probable cases.
9. Investigate to determine if in-school transmission likely occurred and whether any school-related factors could have contributed to risk of transmission. Assist schools to update and strengthen protocols as needed to prevent additional cases.
10. Determine, in collaboration with the school, whether the school meets closure criteria. See School Closure Determinations (page 36).
11. Determine, in collaboration with the school, when the school should be closed for 14 days even if the conditions outlined in School Closure Determinations below have not been reached. This may be when: 1) the investigation shows that cases or symptomatic students or staff members continue to be identified and school-based transmission of SARS-CoV2 is likely ongoing despite implementation of prevention and control measures; or 2) other local epidemiologic data support school closure.

School Actions

1. Notify parents/guardians and school staff of a cluster/outbreak investigation related to the school and encourage them to follow public health recommendations (see sample notification #2 in Appendix 3).
2. Identify, as part of the CSP, one or more school staff member who can liaise with the LHD regarding the cluster/outbreak investigation by confirming which classes and stable groups included confirmed cases or symptomatic students and staff members, and if recent events or gatherings involved any cases or symptomatic persons.
3. Identify absenteeism among those in affected classes or stable groups, and coordinate with the LHD to contact these absentees to screen for symptoms of COVID-19 if they were exposed to a case during the cases infectious period.
4. Coordinate with the LHD to share a line list of cases and contacts with dates present at or absent from school.
5. Arrange for cleaning and disinfection of classrooms or other areas where cases or symptomatic students or staff members spend significant time.
6. Coordinate with the LHD on notifications to the school community, including specific notifications of stable groups or classrooms regarding their exclusion status and instructions.
7. Coordinate with the LHD on whether and when the school should be

- closed and reopened.
8. Notify the school community if the school is to be closed for 14 days due to widespread and/or ongoing transmission of SARS-CoV2 at the school or in the general community, and repeat recommendations for prevention and control measures (see sample notification #3 in Appendix 2).
 9. Implement online/distance teaching and learning during school closure.
 10. Arrange for cleaning and disinfection of entire school before reopening in the case of closure.

School Closure Determinations

What are the criteria for closing a school to in-person learning?

Individual school closure, in which all students and staff are not on campus, is recommended based on the number of cases and stable groups impacted, which suggest that active in-school transmission is occurring. Closure should be done in consultation with the LHO. Situations that may indicate the need for school closure:

- Within a 14-day period, an outbreak has occurred in 25% or more stable groups in the school.
- Within a 14-day period, at least three outbreaks have occurred in the school AND more than 5% of the school population is infected.
- The LHO may also determine school closure is warranted for other reasons, including results from public health investigation or other local epidemiological data.

Length of closure: 14 days, or according to a decision made in consultation with the LHO.

The State Safe Schools for All Technical Assistance teams (TA teams), comprised of experts across multiple state agencies, will be available to assist schools with disease investigation for those with outbreaks that cannot find resources to investigate the outbreaks. The TA teams will also be available to help schools that close in order to identify and address any remediable safety issues.

If a school is closed, when may it reopen?

Schools may typically reopen after 14 days and if the following have occurred:

- Cleaning and disinfection
- Public health investigation
- Consultation with the LHD

What are the criteria for closing a LEA?

A school district should close if 25% or more of schools in a district have closed due to COVID-19 within a 14-day period and in consultation with the LHD.

If a LEA is closed, when may it reopen?

LEAs may typically reopen after 14 days, in consultation with the LHD.

K-12 School Testing

OVERVIEW

Used in conjunction with other mitigation strategies, testing for SARS-CoV-2 provides an additional tool to support safe and successful K-12 in-person instruction. Testing can allow for early identification of cases and exclusion from school to prevent transmission. However, it should not be used as a stand-alone approach to prevent in-school transmission. A negative test provides information only for the moment in time when the sample is collected. Individuals can become infectious shortly after having a negative test, so it is important to maintain all other mitigation strategies even if a recent negative test has been documented.

There are several circumstances under which a student or staff member might undergo testing. Below, we outline these circumstances and considerations for testing implementation in K-12 schools.

DEFINITIONS

Symptomatic testing: This testing is used for individuals with symptoms of COVID-19, either at home or at school. In this situation, the school guidance requires that these individuals stay home and isolate in case they are infectious. The Guidance includes the possibility of return to school in the case of a negative test for SARS-CoV-2 and 24 hours after fever is resolved and symptoms are improving.

Response testing: This testing is used to identify positive individuals once a case has been identified in a given stable group. Response-based testing can be provided for symptomatic individuals or for asymptomatic individuals with known or suspected exposure to an individual infected with SARS-CoV-2.

Asymptomatic testing: This testing can be used for surveillance, usually at a cadence of every 2 weeks or less frequently, to understand whether schools have higher or lower rates of COVID19 rates than the community, to guide decisions about safety for schools and school administrators, and to inform LHDs about district level in-school rates. Asymptomatic testing can also be used for screening, usually at a higher cadence (weekly or twice weekly) than

surveillance testing, to identify asymptomatic or pre-symptomatic cases, in order to exclude cases that might otherwise contribute to in-school transmission. Screening testing is indicated for situations associated with higher risk (higher community transmission, individuals at higher risk of transmission (e.g., adults and high school students transmit more effectively than elementary aged students).

TESTING STRATEGY APPROACH

Asymptomatic testing considerations

The science regarding the extent to which asymptomatic testing will achieve the goal of safe and successful schools is still under development. Empirically, schools that have successfully implemented the core mitigation strategies outlined in the School Guidance are operating safely, with limited or no in-school transmission, under a range of asymptomatic testing approaches. The approaches range from no additional asymptomatic testing, to testing a sample of staff and students monthly, to testing all students and staff every other week. Modeling studies show that masking alone and cohorting alone can decrease symptomatic infections more than weekly testing of students and school staff. Taken together, these data suggest that a range of potential testing approaches can be considered for implementation as part of a comprehensive safety strategy.

The state of California has put into place support for the testing cadences in Table 3, through supplemental testing supplies, shipment, laboratory capacity, enrollment and reporting technology, training, and assistance with insurance reimbursement.

The increased levels of testing in the higher Tiers in Table 3 reflect the higher likelihood that someone in the school community might be infected due to higher levels of circulating virus in the surrounding community.

Table 3. Testing Cadences with Support from the State of California for K-12 schools

	Yellow CR <1.0* TP <2%	Orange CR 1-3.9* TP 2-4.9%	Red CR 4-7* TP 5-8%	Purple CR >7-13.9* TP >8%
Staff	Symptomatic and response testing.	Symptomatic and response testing.	Symptomatic and response testing + Every 2 weeks asymptomatic testing.	Symptomatic and response testing + Every 2 weeks asymptomatic testing.
Students K-12	Symptomatic and response testing.	Symptomatic and response testing.	Symptomatic and response testing + Every 2 weeks asymptomatic testing.	Symptomatic and response testing + Every 2 weeks asymptomatic testing.

TP = test positivity

* The case rates above are adjusted case rates.

** Weekly asymptomatic testing assumes the use of a PCR test. If antigen testing is used, testing should be at a twice weekly cadence.

Students or staff who have tested positive for active infection with SARS-CoV-2 virus within the last 90 days are exempt from asymptomatic testing.

Any school currently open is subject to the minimum testing requirement standards established by [Cal/OSHA](#). These standards include response testing for exposed cases and outbreak testing for everyone weekly until no longer considered an outbreak. Please refer to [Cal/OSHA guidance](#) for complete details.

Vaccines for K-12 Schools

CDPH strongly recommends that all persons eligible to receive COVID-19 vaccines receive them at the first opportunity. Currently, people under 16 are not eligible for the vaccine since trials for that group are still underway.

In addition to vaccines required for school entry, CDPH strongly recommends that all students and staff be immunized each autumn against influenza unless contraindicated by personal medical conditions, to help:

- Protect the school community.
- Reduce demands on health care facilities.
- Decrease illnesses that cannot be readily distinguished from COVID- 19 and would therefore trigger extensive measures from the school and public health authorities.

Because vaccine implementation for schools is rapidly evolving, we are providing a separate vaccine guidance document that will be available on the Safe Schools for All Hub [here](#).

Appendix 1: Resources

SCHOOL RESOURCE LINKS

- [Safe Schools for All Hub](#)
- [Testing Guidance](#)

Appendix 2: Sample Notifications

SCHOOL EXPOSURE TO A CASE OF COVID-19 NOTIFICATION

K-12 SCHOOL NAME/LETTERHEAD

From School Principal (or Designee)

Date

Dear Parents/Guardians,

We would like to inform you that we have been notified about a confirmed case of COVID-19 (Coronavirus Disease 2019) in a member of our school community. The individual who tested positive (the "case") was last on school premises on [DATE]. All school areas where the case spent time will be cleaned and disinfected before they are in use again.

Our school is working with the [LOCAL HEALTH DEPARTMENT] to follow up with the case and will reach out to all persons who are identified as having had close contact with the case to recommend home quarantine and COVID-19 testing. If

you or your child are not contacted, it means that you or your child were not identified as exposed to the case.

Please remind your child to use their face covering, stay at least 6 feet from other people, and wash their hands often with soap and water for at least 20 seconds.

Symptoms of COVID-19 may appear 2-14 days after exposure to the virus and include:

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

Anyone with COVID-19 symptoms should be tested. However, many infected people do not develop symptoms, which is why it is recommended that exposed people be tested whether they have symptoms or not.

Ensuring the health and safety of our students, teachers, and staff members is of the utmost importance to us. If you have any questions or concerns, please contact [CONTACT NAME] at XXX-XXX-XXXX.

Sincerely,

COVID-19 SCHOOL OUTBREAK NOTIFICATION

TK-12 SCHOOL NAME/LETTERHEAD

From School Principal (or Designee)

Date

Dear Parents/Guardians, Teachers, and Staff Members,

We would like to inform you that we are working with the [LOCAL HEALTH DEPARTMENT] on their investigation of a COVID-19 outbreak in our school community. Our school is working with the [LOCAL HEALTH DEPARTMENT] to

follow up with all cases and symptomatic contacts to identify all exposed persons and recommend home quarantine and testing. If you or your child are not contacted, it means that you or your child were not exposed to either a case or a symptomatic contact.

If you are a parent/guardian, please remind your child to use their face covering, stay at least 6 feet from other people, and wash their hands often with soap and water for at least 20 seconds.

Symptoms of COVID-19 may appear 2-14 days after exposure to the virus and include:

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

Anyone with COVID-19 symptoms should be tested. However, many infected people do not develop symptoms, which is why it is recommended that exposed people be tested whether they have symptoms or not.

Ensuring the health and safety of our students, teachers, and staff members is of the utmost importance to us. If you have any questions or concerns, please contact [CONTACT NAME] at XXX-XXX-XXXX.

Sincerely,

SCHOOL CLOSURE DUE TO COVID-19 NOTIFICATION

TK-12 SCHOOL NAME/LETTERHEAD

From School Principal (or Designee)

Date

Dear Parents/Guardians, Teachers, and Staff Members,

We are informing you that we are closing our school, starting on [DATE] due to the ongoing COVID-19 outbreak and likely continuing transmission at our school. In consultation with the [LOCAL HEALTH OFFICER], we have been advised that the school should be closed for 14 days to prevent further transmission of COVID-19 and to clean and disinfect the school before reopening on [DATE].

During school closure, the school will switch to online teaching to continue our classes; please see attached information sheet on how students can sign in to continue their schoolwork online. The [LOCAL HEALTH DEPARTMENT] will also continue to follow-up with cases and contacts during school closure to ensure isolation and quarantine and testing.

If upon school reopening, your child is feeling ill or having a fever or symptoms of COVID-19, even if symptoms are very minor, please do not send your child to school and consider getting your ill child tested for COVID-19. If your child is well without any symptoms, please remind your child before going back to school to use their face covering, stay at least 6 feet from other people, and wash their hands often with soap and water for at least 20 seconds. School staff should call in sick and stay home if having a fever or symptoms of COVID-19 and consider getting tested.

Symptoms of COVID-19 may appear 2-14 days after exposure to the virus and include:

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

Ensuring the health and safety of our students, teachers, and staff members is of the utmost importance to us. If you have any questions or concerns, please contact [CONTACT NAME] at XXX-XXX-XXXX.

Sincerely,



Appendix 3: Public Health Directive

REPORTING DETAILS OF POSITIVE CASES

Required COVID-19 Case Reporting By Schools

January 14, 2021

Following school closures that occurred in spring 2020 in response to the COVID-19 pandemic, the California Department of Public Health ("CDPH") developed the "COVID-19 and Reopening In-Person Learning Framework for K-12 Schools in California, 2020-2021 School Year" (July 17, 2020) to support school communities as they decided when and how to implement in-person instruction for the 2020-2021 school year. Public and private K-12 schools throughout the state are currently in various stages of instruction including distance learning, in-person learning, and hybrid instruction based on local conditions.

New evidence and data about COVID-19 transmission coupled with the experiences of schools both nationally and internationally demonstrates that schools, particularly elementary schools, can operate in-person instruction safely with the correct safety protocols in place. Concurrently with this directive, CDPH issued updated, consolidated guidance for K-12 schools (including public, private, and charter) to support school re-openings and safe implementation of in-person instruction for students and staff.

Under current guidance, schools that have already reopened are permitted to continue offering in-person instruction, and additional schools are expected to reopen under the forthcoming K-12 school guidance. To be equipped to prevent and mitigate ongoing community COVID-19 transmission, a comprehensive and coordinated approach for the secure sharing of vital data and information regarding COVID-19 infections among school employees and students is necessary, especially in light of current epidemiological conditions.

The sharing of identified case information data with public health professionals is therefore necessary to ensure that state and local public health experts can respond to confirmed cases of COVID-19 who have been present at a school site, to track and understand the extent of disease transmission within the state, and to support communities with appropriate prevention strategies and support. Accordingly, to monitor and prevent the spread of COVID-19, it is necessary for CDPH and local health jurisdictions to have accurate information about COVID-19 infections among school employees and students. Specifically, the prompt, secure, and confidential sharing of information about individuals within the school community who have tested positive for COVID-19 is critical to ensure that public health authorities can rapidly respond by:

1. Instituting necessary case investigation and contact tracing;
2. Focusing public health resources to effectively provide comprehensive support to the affected schools related to further investigation, mitigation strategies, and operational plans;
3. Assessing and monitoring the practices and activities that may have led to the infection or transmission of COVID-19;
4. Taking appropriate measures to protect the health of both the school community and population-at-large; and
5. Ensuring that CDPH and local health jurisdictions have the information necessary to accurately assess the impact of school reopening on COVID-19 transmission and case rates to effectively update operative public health guidance and directives as necessary.

Schools are authorized under the Family Educational Rights and Privacy Act (FERPA) to disclose personally identifiable information without parental consent to local health departments regarding COVID-19 testing and cases. (20 USC § 1232g(b)(1)(I).) In response to the COVID-19 pandemic, California has been under a State of Emergency since March 4, 2020. California continues to see the dire effects of this pandemic through limited ICU capacities and new cases and deaths each day. The COVID-19 pandemic poses an extreme threat to the health and safety of all Californians. Even with protocols in place to mitigate the transmission of COVID-19, the presence of an individual who has tested positive of COVID-19 on a K-12 public or private school campus is an emergency that poses a risk to health or safety of students and employees present on the campus. Reporting to the local health officer the presence of a positive case of COVID-19 in an individual who is or has been present on a K-12 public or private school campus is necessary to protect the health and safety of students and

employees present on the campus. California law (17 C.C.R. section 2508) also requires anyone in charge of a K-12 public or private school kindergarten to report at once to the local health officer the presence or suspected presence of any of the communicable disease, which includes COVID-19.

Accordingly:

- Effective immediately, every local educational agency (school district, county office of education, and charter school) and private school in California shall notify its local health officer of any known case of COVID-19 among any student or employee who was present on a K-12 public or private school campus within the 10 days preceding a positive test for COVID-19. Specifically, the local educational agency or private school shall report the following information:
 - The full name, address, telephone number, and date of birth of the individual who tested positive;
 - The date the individual tested positive, the school(s) at which the individual was present on-site within the 10 days preceding the positive test, and the date the individual was last on-site at any relevant school(s); and
 - The full name, address, and telephone number of the person making the report.
- This information shall be reported to the local health officer by telephone within twenty-four hours from the time an individual within the local educational agency or private school is first made aware of a new case.
- This reporting shall continue until this directive is modified or rescinded.

Information reported to the local health officer pursuant to this directive shall not be disclosed except to (1) the California Department of Public Health; (2) to the extent deemed necessary by the local health officer for an investigation to determine the source of infection and to prevent the spread of COVID-19, including with health officers in other jurisdictions as necessary to monitor, investigate, prevent, and/or control the spread of COVID-19; (3) if required by state or federal law; or (4) with the written consent of the individual to whom the information pertains or the legal representative of the individual.

This reporting does not replace or supersede any other statutory or regulatory requirements that require reporting of COVID-19 cases and/or outbreaks to other entities or institutions, such as Cal/OSHA.



Appendix 4: Public Health Directive

REPORTING DETAILS OF IN-PERSON INSTRUCTION

COVID-19 School Reopening Status Reporting

January 14, 2021

Following school closures that occurred in spring 2020 in response to the COVID-19 pandemic, the California Department of Public Health (CDPH) developed the “COVID-19 and Reopening In-Person Learning Framework for K-12 Schools in California, 2020-2021 School Year” (July 17, 2020) to support school communities as they decided when and how to implement in-person instruction for the 2020-2021 school year. Schools throughout the state are currently in various stages of instruction including distance learning, in-person learning, and hybrid instruction based on local conditions.

New evidence and data about COVID-19 transmission and experience nationally and internationally demonstrate that schools, particularly elementary schools, can operate safely for in-person instruction with the correct safety protocols in place. Concurrently with this directive, CDPH issued updated, consolidated guidance for public and private K-12 schools to support school reopenings and safe implementation of in-person instruction for students and staff.

Under the guidance, schools that have already reopened are permitted to continue offering in-person instruction, and additional schools will reopen through the early spring. To be equipped to prevent and mitigate ongoing community COVID-19 transmission, it is necessary for CDPH and local health jurisdictions to have accurate information about which school sites are serving students in-person and to which degree such in-person services are being provided, especially in light of evolving epidemiological conditions.

This information will assist public health authorities maintain awareness of possible locations where case transmission may occur and can rapidly respond

to any confirmed positive cases of individuals who have been on-site at schools offering in-person instruction and services. It is also necessary to focus public health resources to support schools, including COVID-19 testing support, contact tracing, and technical assistance related to mitigation strategies and operational plans, to make the most efficient and effective use of those resources. Finally, this information will assist CDPH and local health jurisdictions to accurately assess the impact of school reopening on COVID-19 and update operative public health guidance and directives as necessary.

Accordingly:

- Beginning January 25, 2021, every local educational agency (school district, county office of education, and charter school) and private school in California shall notify the California Department of Public Health whether it is serving students in-person. Specifically, the local educational agency or private school shall report the following information:
 - In-person instruction is provided full-time, including whether provided for all grades served by the local educational agency or private school or only certain grade spans.
 - In-person instruction is provided only part-time (hybrid model), including whether provided for all grades served by the local educational agency or private school or only certain grade spans.
 - In-person instruction and services are provided only pursuant to the Guidance Related to Cohorts issued by the California Department of Public Health.
 - No in-person instruction and services are provided (distance learning only).

- This reporting shall continue every other Monday (or the Tuesday immediately following, if the Monday is a state holiday) until this directive is modified or rescinded.

- This information shall be reported via a web form that will be made available by the California Department of Public Health.

- The California Department of Public Health will provide this information to local health officers and, once the information is processed, will make this information publicly available on the Safe Schools For All Hub website.