

COVID-19 Staff_Student Health and Safety Protocols

COVID-19 Staff and Students Health and Safety Protocols

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Background information:

What needs to be accomplished?

- Develop COVID-19 prevention procedures/protocols for staff and students that are in compliance with county and state health and safety guidelines for schools in order to reopen school in 2020-21.

What do we know?

- California Department of Education, California Department of Public Health, and SDCOE have released a set of guidelines for the re-opening of school campuses.
- Effective June 12, 2020, schools "may hold classes ... provided the school complies with the measures contained in the State COVID-19 Industry Guidance: Schools and School-Based Programs and has completed and posted a Safe Reopening Plan ... detailing compliance with the measures." and meets all requirements on the SDCOE Reopening Checklist.

What don't we know?

- If changes to these requirements for reopening schools will change before the 2020-21 school year begins
- Whether additional waves of COVID-19 infections will impact the current county health order prior to the start of the school year.

#1 Protocol for Daily COVID-19 Symptom Screening for Staff

1. Employees will be trained on how to conduct an **active** Daily COVID-19 symptom training.
2. Prior to coming to work each day, ALL SBSB employees are **encouraged** to do a passive Daily COVID-19 Symptom Screening at home to check for COVID-19 symptoms. All staff are asked to stay home if they are sick. If staff have a temperature of 100.0 to 100.5 degree, they are encouraged to retake their temperature up to 30 minutes to ensure they are getting an accurate reading.
3. Employees are required to complete an **active** Daily COVID-19 Symptom Screening and complete the automated symptom screener via computer, iPad, or smartphone **every day**, whether they are onsite or at home. If students are entering the site when the employee arrives onsite, they are to enter the site in an alternate identified entrance.
4. The Daily COVID-19 Symptom Screener requires the employee to:
 - Take their own temperature daily to determine if it is at or above 100 degrees F (fever is defined as at or >100.0 degrees F that does not resolve within 30 minutes without medication) **AND**
 - Determine if they, or any member in their home, have one or more symptoms (fever, chills, loss of taste and smell, sore throat, cough, shortness of breath, extreme continuous fatigue, muscle ache not typical) or no symptoms **AND**
 - Identify if they have been in close direct contact with anyone who has been diagnosed with COVID-19, within the last 14 days. **Close direct contact** is defined as being within 6 feet of each other and for 15 minutes (San Diego County Public Health) or longer (prolonged periods of time), with or without a mask, or contact with body fluids or secretions (coughed or sneezed on).
1. If the employee answers "yes," the automated symptom screener will alert them to stay at home if they are at home or return home if they are at their work site.
2. If the employee answers "yes" to any of the above questions, the automated screener results will go to HR (Asst. Superintendent) and the District nurses who will follow up with the employee, and the site and/or district supervisor will also be notified.
3. Supervisors, both site and district, will receive a confirmation email and verify that all employees completed the active screening and keep a daily log. Supervisors (both site and district) follow up with any employee who has not submitted his/her symptom screener.
4. If a staff member has COVID-19 symptoms, they should contact their health provider immediately, and stay home until:
 - Ten days have passed from the onset of their first symptom **AND**
 - Has not had a fever for at least 24 hours without the use of fever reducing medications **AND**
 - Symptoms (e.g. cough, or shortness of breath) have improved
1. Staff members are to remain at home for 24 hours without the use of fever reducing medication for all non-confirmed COVID-19 illnesses.
2. Staff members are to be educated that they should remain at home if they are sick and will not be penalized for their attendance.
3. Staff should contact HR for information regarding labor laws, information regarding disability insurance, FMLA, unemployment insurance, as well as employee's sick leave rights under the Families First Coronavirus Response Act, and an employee's rights to worker's compensation benefits and presumption of the work-relatedness of COVID-19 pursuant to the Governor's Executive Order N-62-20, while the order is in effect.

#1 Protocol for Daily COVID-19 Symptom Screening for Students

1. Families/students will be trained/educated on how to perform both a passive Daily COVID-19 symptom check and how all students will participate in an **active** Daily COVID-19 symptom training upon arriving at the school campus.
2. Families are **encouraged** to conduct a passive Daily COVID-19 Symptom Screening at home prior to bringing their child to school to check for COVID-19 symptoms. If their child has a temperature of 100 F or greater or if the parent/guardian answers yes to any symptom questions, or had close direct contact with another individual diagnosed with COVID-19, the student must remain at home. It is recommended for families to contact their primary physician for follow-up testing and to notify the school.
3. Families are also to be educated to not give their children fever reducing medication prior to bringing them to school.
4. Families are to be educated that students should remain at home if they are sick and will not be penalized for their attendance. Per Education Code 48205, student absences due to illness or quarantine are considered excused absences.
5. All students will participate in a **daily active** COVID-19 symptom screening before entering the campus, which includes a temperature check as well as symptom check.
6. Parents/guardians with students in grades K-3 will accompany their student to the COVID-19 symptom screening as students in grades K-3 have a difficult time accurately answering health questions.
7. The daily COVID-19 symptom screener will include the following:
 - If the student has a temperature at or above 100 degrees F (**fever is defined as at or >100.0 degrees F that does not resolve within 30 minutes without medication**) **AND**
 - If the student, or any member in their home, has one or more symptoms (fever, chills, loss of taste and smell, sore throat, cough, shortness of breath, extreme continuous fatigue, muscle aches, rash) or no symptoms **AND**
 - If the student has been in close direct contact with anyone who has been diagnosed with COVID-19, within the last 14 days. **Close direct contact** is defined as being within 6 feet of each other and for 15 minutes (San Diego County Public Health) or longer (prolonged periods of time), with or without a mask, or contact with body fluids or secretions (coughed or sneezed on).
1. If the student's temperature is between 100.0 and 100.5, the site will identify a "cool area" where the student can sit for up to 30 minutes and then have their temperature rechecked to ensure accuracy. (This is important during hot weather)
2. If a child has COVID-19 symptoms, they must stay home and contact their healthcare provider and may not return until:
 - Ten days have passed from the onset of their first symptom **AND**
 - Has not had a fever for at least 24 hours without the use of fever reducing medications **AND**
 - Symptoms (e.g. cough, or shortness of breath) have improved
1. Communication will be sent to families that if their child has current allergies/asthma or other medical conditions that may present with some of the symptoms associated with COVID-19 (cough, difficulty breathing, etc.) and is not currently documented and on file with the school (i.e., in Aeries and/or Health Office) that they will need to present a note from their healthcare provider.
2. Students with special needs who may be at risk of becoming infected or having unrecognized illness due to COVID-19 may need to have their specialized health care plan, IEP or 504 Plan updated to document additional accommodations that might be needed or a specialized health care plan, IEP or 504 plan may need to be implemented.
3. Each school site will identify multiple entry points for students to enter and exit daily
 - Grade levels will be assigned a specific entry point (it might need to be multiple entry points within one grade level depending on the number of students) and a timeframe to come to the site
 - All students and adults will be expected to maintain physical distancing (markers will be placed on the ground to support physical distancing) and wear face coverings
 - Supervising staff will conduct a Daily COVID-19 Symptom Screening
1. Protocol for supervising staff:
 - Wear surgical grade mask, face shield, and latex-free gloves
1. Entry locations should include a table/cart that contains the following supplies (communication with M&O):
 - Extra face coverings for students who come to school without one
 - Hand sanitizer
 - Copy of Daily COVID-19 Symptom Screener (laminated) as a reminder to parents
 - Two no-touch infrared thermometers
 - Latex free gloves
 - Open trash can
 - Class attendance sheets
1. Protocol for students entering site will include:
 - Morning CDC students will receive an active Daily COVID-19 symptom screening only once when they arrive at CDC
 - K-3 parents/guardians will wait until their child has been screened prior to entering school
 - Conduct active Daily COVID-19 Symptoms Screening
 - All students must use hand sanitizer before coming into the building. Children under age 9 (Grade K-3) should use hand sanitizer under adult supervision
- Two adults** located at each of the entry locations
 - One to conduct a Daily COVID-19 Symptom Screening
 - One to supervise waiting students to ensure physical distancing or to take any student who presents with symptoms without parent in attendance to the health isolation room
1. When students arrive late to school, the parent/guardian must bring the student into the office where the student will receive the Daily COVID-19 symptom check prior to going to class by the School Nurse, health clerk or office staff. The tardy pass will indicate that the child has received their health screening.

#2 Protocol for staff who exhibit COVID-19 or flu-like symptoms

1. Separate from others right away
2. Any staff exhibiting symptoms should continue or immediately wear a face covering
3. Employee will contact the health office
4. If necessary, the health clerk will escort the employee to the health isolation area(s)
5. The health clerk/district nurse will take the staff member's temperature and complete the Symptom Checker, asking the following questions:
 - Do you have a new cough, nasal congestion, or runny nose?
 - Are you experiencing shortness of breath or difficulty breathing?
 - Are you having new muscle pain or extreme continuous fatigue?
 - Do you have a headache (that is not normal for you)?
 - Do you have a sore throat?
 - Are you experiencing a new loss of taste or smell?
 - Are you experiencing nausea, vomiting, abdominal pain, or diarrhea?
 - Have you been exposed to anyone who has been tested positive for COVID-19 in the last two weeks (14 days)?
6. If the employee meets the criteria for COVID-19 signs and symptoms, they will be sent home immediately and should contact their healthcare provider
7. The employee is required to wait in a health isolation area until they can safely return home or be transported to a healthcare facility
8. For serious illness, call 911 without delay if COVID-19 symptoms become severe, including persistent pain or pressure in the chest, confusion, or bluish lips or face
9. Contact the District Nurse, direct supervisor, and HR
10. Activate emergency substitute teacher plan and consider moving the class to another location
11. Disinfect the workspace/classroom used by the employee
12. Maintain confidentiality
13. Advise sick staff not to return to work until they have met current public health criteria
14. **If symptomatic, staff may return to work with one of the following:**
 - 10 days from the day symptom(s) first appeared, AND improved symptoms AND no fever (or use of fever reducing medication) for the last 24 hours
 - Confirmation by a primary care physician in writing confirming the diagnosis for a chronic condition, and that the symptoms are unrelated to COVID-19.
 - **If tested for COVID-19 and test results come back negative, staff may return to school 72 hours after symptoms have resolved.**

#2 Protocol for students who exhibit COVID-19 or flu-like symptoms

1. Separate from others right away
 2. Any student exhibiting symptoms should continue or immediately wear a face covering
 3. The teacher/staff member will notify the health office prior to sending the student, allowing the health clerk to prepare with proper PPE
 4. The health clerk or identified staff member will pick up the student and escort them to the health isolation area (s)
 5. The health clerk/district nurse will take the student's temperature and complete the Symptom Checker, asking the following questions:
 - Do you have a new cough, nasal congestion, or runny nose?
 - Are you experiencing shortness of breath or difficulty breathing?
 - Are you having new muscle pain or extreme continuous fatigue?
 - Do you have a headache (that is not normal for you)?
 - Do you have a sore throat?
 - Are you experiencing a new loss of taste or smell?
 - Are you experiencing nausea, vomiting, abdominal pain, or diarrhea?
 - Do you have a new rash?
 - Have you been exposed to anyone who has been tested positive for COVID-19 in the last two weeks (14 days)?
 - Does your child have any health conditions (e.g., asthma, allergies) that mimics COVID-19 symptoms?
- If the student meets the criteria for COVID-19 signs and symptoms, contact the District Nurse, principal, SS, and the family. Refer to contact information provided on the student emergency card or in the Student Information System (Aeries)
 - The student will be sent home and the family should contact their healthcare provider
 - Until the student leaves the school, the student is required to wait in the isolation area
 - For serious illness, call 911 without delay if COVID-19 symptoms become severe, including persistent pain or pressure in the chest, confusion, or bluish lips or face
 - Maintain confidentiality
 - Advise student's parent/guardian that their child cannot return to school until they have met current public health criteria
 - **If symptomatic, students may return to school with one of the following:**
 - 10 days from the day symptom(s) first appeared, AND improved symptoms AND no fever (or use of fever reducing meds) for the last 24 hours
 - Confirmation by a primary care physician in writing confirming the diagnosis for a chronic condition, and that the symptoms are unrelated to COVID-19.
 - **If tested for COVID-19 and test results come back negative, student may return to school 72 hours after symptoms have resolved.**

#3 Protocol for Staff that Test Positive or are Suspected to have COVID 19 and SBSB Staff Who Had Close Direct Contact with the Employee/Student

1. A staff member who has tested positive for COVID-19 or is suspected of having COVID-19 is expected to notify (**what is the format/method? - phone call to direct supervisor**) the Assistant Superintendent of Human Resources (HR)
 2. Provide date of positive test result
 3. Provide date of when symptoms were first experienced
 4. Provide the names of the individuals (adults and children) whom they came in close direct contact with at work during the time the employee had their symptoms and 48 hours prior to symptoms. **Close direct contact** is defined as being within 6 feet of each other and for 15 minutes (San Diego County Public Health) or longer (prolonged periods of time), with or without a mask, or contact with body fluids or secretions (coughed or sneezed on).
 5. Maintain confidentiality of employee as required by the Americans with Disabilities Act (ADA)
2. HR notifies the Superintendent and the District Nurse/San Diego Public Health Agency as well as the Site Supervisor so they can arrange for a substitute.
3. If an employee is confirmed or clinically suspected to have COVID-19 and is symptomatic, they will be sent home to **isolate** and may not return to work until:
6. Ten days have passed from the onset of their first symptom **AND**
 7. Has not had a fever for at least 24 hours without the use of fever reducing medications **AND**
 8. Symptoms (e.g. cough, or shortness of breath) have improved.
5. If an employee is confirmed to have COVID-19 and is asymptomatic, they will isolate at home and may not return to work until:
9. Ten days after the date that the test was taken
 10. If they develop any symptoms during these 10 days, they will need to follow the isolation instructions above for individuals with symptoms
6. HR will notify any district employee who had direct close contact with the employee/student that tested positive or is suspected to have COVID-19.
7. The employee will be asked to **self-quarantine** for 14 days, starting the date they had their last direct close contact with the employee who has known or suspected COVID-19. They may return to work on the 15th day if they have not shown any symptoms. Testing is recommended. If they are tested, they still need to remain in quarantine for 14 days even if the test result is negative.
8. If an exposed employee develops symptoms, contact their medical provider to determine whether testing is needed to confirm they have positive COVID-19.
- **They do need to remain home** for 10 days from when symptoms first appeared **AND**
 - 24 hours after their fever is completely gone (without fever reducing medication) **AND**
 - Their symptoms have improved.
9. The San Diego Health and Human Services Agency does not recommend investigating individuals with possible secondary exposure to the identified employee who tested positive or who is suspected to have COVID-19, unless the secondary contact develops symptoms or tests positive.
10. All work-related questions should be directed to HR and all medical-related questions to the healthcare provider.
11. The Superintendent, in collaboration with HR, will communicate with the San Diego Health and Human Services Agency to determine the need for partial or full school closure due to a positive COVID-19 case within the site/school.
12. Communication will be coordinated through the Superintendent's Office/HR to inform site and /or district staff of a positive COVID-19 case, maintaining the confidentiality of the staff member. [Initial Parent Communication Letter for Positive COVID Case at School](#)
[Parent Communication Letter for Positive COVID Case at School and School Will Close](#)
[Parent Communication Letter for Positive COVID Case and School Will Remain Open](#)

#3 Protocol for Students that Test Positive or are Suspected to Have COVID-19 and Have Had Close Direct Contact with Other Students/Teacher

1. The parent of a student who has tested positive for COVID-19 or is suspected of having COVID-19 is expected to call the school office/CDC and/or Student Services (notification may come from Public Health)
 2. Provide date of positive test result
 3. Provide date of when symptoms were first experienced
 4. Maintain confidentiality of student as required by the Americans with Disabilities Act (ADA)
2. The site notifies Student Services who notifies the Superintendent/HR and the District Nurse will contact San Diego Public Health Agency
3. If a student is confirmed or clinically suspected to have COVID-19 and is symptomatic, they will remain home to **isolate** and may not return to school until:
5. Ten days have passed from the onset of their first symptom **AND**
 6. Has not had a fever for at least 24 hours without the use of fever reducing medications **AND**
 7. Symptoms (e.g. cough, or shortness of breath) have improved.
4. If a student is confirmed to have COVID-19 and is asymptomatic, they will isolate at home and may not return to school until:
8. Ten days after the date that the test was taken
 9. If they develop any symptoms during these 10 days, they will need to follow the isolation instructions above for individuals with symptoms
5. Student Services/HR will work with the site administrator to notify any district employee and/or the parents of other students who had direct close contact with the student that tested positive or is suspected to have COVID-19. **Close direct contact** is defined as being within 6 feet of each other and for 15 minutes (San Diego County Public Health) or longer (prolonged periods of time) with or without a mask, or contact with body fluids or secretions (coughed or sneezed on).
6. They will be asked to **self-quarantine** for 14 days, starting the date they had their last direct close contact with the student/adult who has known or suspected COVID-19. They may return to school on the 15th day if they have not shown any symptoms. Testing is recommended. If they are tested, they still need to remain in quarantine for 14 days even if the test result is negative.
7. If an exposed student develops symptoms, contact their medical provider to determine whether testing is needed to confirm they have positive COVID-19.
- **They do need to remain home** for 10 days from when their symptoms first appeared **AND**
 - 24 hours after their fever is completely gone (without fever reducing medication) **AND**
 - Their symptoms have improved.
8. The San Diego Health and Human Services Agency does not recommend investigating individuals with possible secondary exposure to the identified student who tested positive or who is suspected to have COVID-19, unless the secondary contact develops symptoms or tests positive.
9. All school-related questions should be directed to Student Services/District nurses and all medical-related questions to the healthcare provider.
10. The Superintendent, in collaboration with HR/SS, will communicate with the San Diego Health and Human Services Agency to determine the need for partial or full school closure due to a positive COVID-19 case within the site/school.
11. Communication will be coordinated through the Superintendent's Office/HR/SS to inform the community of a positive COVID-19 case, maintaining the confidentiality of staff and/or student(s).
12. Will not discriminate against any student(s) or their families who were or are diagnosed with COVID-19 or who are perceived to be a COVID-19 risk.

#4 Protocols for Wearing Face Coverings for Staff

Face coverings are most essential when physical distancing is not feasible. Face coverings serve two purposes: 1) To limit large respiratory droplets from spreading, and 2) to prevent the user from touching their face, especially their nose and mouth. Face coverings are also meant to protect other people in case the wearer is unknowingly infected but does not have symptoms.

1. All staff will be trained on health and safety hygiene of face coverings (proper use, removal, and washing of cloth face coverings)
2. All staff are required to wear face coverings while they are on school property and when working off property (i.e., duty)
3. Staff may use a face shield while in the classroom while teaching, as long as the wearer maintains physical distance from others. Staff must return to wearing a face covering outside of the classroom.
4. Staff may use a face shield or eyewear (including goggles) along with a face covering for added eye protection
5. Face shields may be used in place of washable face covering, practicing 6' physical distancing, when a staff member is working with students who need to see their mouth while teaching. This could include:
 - Teaching phonics and phonemic awareness skills
 - Working with English learners
 - Interacting with someone with a hearing loss
 - Participating in forms of therapy where the student needs to see the staff members mouth (e.g., speech therapy)

1. For optimal protection, the face shield should extend below the chin anteriorly, to the ears laterally, and there should be no exposed gap between the forehead and the shield's headpiece.
2. It is necessary to wear both a face mask and a face shield (or other forms of eye protection such as goggles), as well as a latex-free gloves and have a physical barrier, if working with a student who is unable to manage secretions (e.g., severely handicapped students who spit or do raspberries)
3. If changing from a face covering to a face shield, wash or sanitize hands prior to placing the face shield on, place face shield on (while still wearing face covering), remove facial covering and continue to maintain physical distancing during interaction. After the interaction, place your facial covering back on your face, remove the face shield and wash or sanitize your hands
4. If removing face covering for any reason, maintain physical distancing
5. Exceptions to wearing facial coverings
 - Working alone in a single space office with the door closed (e.g., teachers working in their classroom after school is over with door closed)
 - In a vehicle used exclusively by the driver
 - Eating or drinking

1. Types of Face Coverings

- Washable face masks are appropriate for all situations (need to be washed daily)
- A cloth face covering is a material that covers the nose and mouth. It can be secured to the head with ties or straps or simply wrapped around the lower face. It can be made of a variety of materials, such as cotton, silk, or linen. A cloth face covering may be factory-made or sewn by hand or can be improvised from household items such as scarfs, T-shirts, sweatshirts, or towels.
- Facial coverings may also include bandanas or neck gaiter face covering masks
- Disposable masks will be provided to employees, students, and visitors who forget to bring their face covering; not superior to washable face masks and must be deposited after use.
- N95 masks can be reused (by same individual) after being stored in a paper bag for 72 hours

1. Discard face coverings that:

- No longer cover the nose and mouth
- Have stretched out or damaged ties or straps
- Cannot stay on the face
- Have holes or tears in the fabric

1. Face Shield care

- While wearing gloves, carefully wipe the inside, followed by the outside of the face shield using a clean cloth with soap and water or cleaner wipe
- Carefully wipe the outside of the face shield with a EPA-registered disinfectant solution or disinfectant wipe
- Wipe the outside of the face shield with clean water or alcohol to remove residue
- Fully dry (air dry or use clean absorbent towels)
- Remove gloves, dispose gloves and wash hands

#5 Protocols for Healthy Hygiene Routines for Staff

Hand washing /Healthy Hygiene Protocol- Hand washing is the single most effective infection control intervention (CDC).

1. Train staff on proper hand washing techniques
2. Scrub with soap for at least 20 seconds or use hand sanitizer if soap and water are not accessible
 - Frequent hand washing is more effective than the use of hand sanitizers
 - Sanitizer must be rubbed into hands until completely dry
 - Use of single use paper towels to dry hands thoroughly

1. Staff must wash or sanitize their hands as they enter campus
2. Provide opportunities for staff to meet hand washing frequency guidance which include:

- Arriving and leaving school
- After being outside with students
- After having close contact with others
- After using shared surfaces or tools/equipment, including office equipment (e.g., copy machine)
- Before and after using the restroom
- After blowing nose, coughing, and/or sneezing
- Before and after eating

#4 Protocols for Wearing Face Coverings for Students

All K-6 students will be required to wear face coverings during the school day. Exceptions can be based on a medical condition, the inability of the student to remove the face covering independently, or a decision made by the 504 or IEP team.

1. All students and families will be educated on health and safety hygiene of face coverings (proper use, removal and washing of cloth face coverings, and frequent reminders to not touch the face covering or face).
2. If a student comes to school without a face covering, they will be provided with a disposable face covering.
3. If the student refuses to wear the face covering provided, they will be sent home. If the student and/or family continue to refuse to wear the face covering, the student/family will be asked to participate in the Online Scholars program.
4. Students must wear a face covering on at all times while on school buses
5. When students arrive at school in the morning:
 - They will wear their face covering at all times, both within the building and outside on the playground.
 - A face covering may be removed for snack, lunch, or naptime (preschool), or when the face covering needs to be replaced and placed in a paper bag with the student's name marked on the bag
1. Decoration of facial coverings must comply with the District dress code and not be distracting to the learning environment
2. For students who are in grades K-2 who have not learned to tolerate a face mask, a face shield with a drape at the bottom is an acceptable alternative. Students wearing face shields must maintain 6' physical distancing

#5 Protocols for Healthy Hygiene Routines for Students

Hand washing/Healthy Hygiene Protocol

1. Train/educate students on appropriate hand washing hygiene.
2. Teach students on proper handwashing techniques
 - Scrub with soap for at least 20 seconds or use hand sanitizer if soap and water are not accessible
 - Frequent hand washing is more effective than the use of hand sanitizers
 - Use of single use paper towels to dry hands thoroughly

1. Students must wash or sanitize hands as they enter campus and buses
2. Students will be required to meet handwashing frequency guidance which include:

- Arriving and leaving school
- After playing outside
- After having close contact with others
- After using shared surfaces or tools/equipment
- Before and after using the restroom
- Upon entering the classroom each time
- After blowing nose, coughing, and/or sneezing
- Before and after eating

1. Provide sufficient access to handwashing and hand sanitizer stations

- Sanitizer must be rubbed into hands until completely dry
- Consider portable hand washing stations to help minimize gatherings in bathrooms

1. Staff will develop routines enabling students to regularly wash their hands at staggered intervals
2. Staff should model and practice handwashing

Face Coverings and Gloves

3. Teach and reinforce use of cloth face coverings, face coverings are most essential when physical distancing is not practicable
4. All staff should use cloth face coverings unless Cal/OHSA standards require respiratory protection
5. Front office and food service staff, provide face coverings and disposable latex-free gloves
6. All staff to wear disposable latex-free gloves when cleaning any and all surfaces
7. Ensure adequate supplies to support health hygiene behaviors
 - Soap
 - Tissues
 - No-touch trash cans
 - Face coverings
 - Hand sanitizer with at least 60 percent ethyl alcohol
 - Use of privacy boards or clear screens when practicable in classrooms and shared locations (main office)
 - Disposable coverings for commonly touched surfaces, i.e., touchpads, copy machines

Physical Distancing

8. Arrival and Departure

- Minimize contact at school between employees, students, families and the community at the beginning and end of the school day.
- Prioritize minimizing contact between adults at all times.
- 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.

1. Classroom Space

- To reduce possibilities for infection, students must remain in the same cohorts as small and consistent as practicable, including for recess and lunch.
- Keep the same students and teacher/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/staff as much as practicable.
- Maximize space between seating and desks. Distance teacher and other staff desks at least six feet away from student desks. Establish separation of students ensuring 6 feet between student desks/tables, markings on classroom floors to promote distancing, and arranging desks in a way that minimizes face-to-face contact.
- Redesign activities for smaller groups and rearrange furniture and play spaces to maintain separation.
- Implement procedures for turning in assignments to minimize contact.
- Clear plexiglass screens are recommended to increase and enforce healthy safety protocols between identified employees and students. This could include employees who provide speech /language and/or OT services, employees working with students in the severely handicapped program, etc.
- 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 such as band and choir practice and/or performances are not permitted due to an increased likelihood for transmission from contaminated exhaled droplet
- Activities that involve singing must only take place outdoors.

1. Non-Classroom Space

- 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.
- 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.
- Recess activities should be separated in areas designated by cohort

Health Recommendations

It is recommended that staff be immunized for influenza in the autumn unless contraindicated by personal medical conditions.

- To protect the school community
- Reduce demands on healthcare facilities
- Decrease illnesses that cannot be readily distinguished from COVID-19 and would, therefore, trigger extensive measures from the school and Public Health authorities

Restroom protocol

1. Designate all staff restrooms as single or double occupancy restrooms based on physical size of restroom
2. Post hand washing hygiene, facial coverings, and physical distancing posters inside the restroom as well as outside the restroom
3. Post "occupied/vacant" sign on the door and physical distant markers outside the restroom
4. Wash hands for 20 seconds before and after using the restroom
5. Use a paper towel to turn off the faucet (if doesn't turn off automatically and to open the door handle, and then discard the paper towel in the trash

Resources (CDC) [Don't Spread Germs at Work](#)

- [Handwashing - Women's Restroom](#)
- [Handwashing - Men's Restroom](#)

1. Provide fragrance-free hand sanitizer (with a minimum of 60 percent alcohol) is available in all classrooms, entry and re-entry locations and on buses.
2. Children under age 9 (Grade K-3) should use hand sanitizer under adult supervision. Call Poison Control if consumed: 1-800-222-1222
3. Teach student to use a tissue to wipe nose and cough and sneeze inside the tissue, dispose of tissue and wash hands
4. Do not touch face, face covering or face covering of others

Physical Distancing

5. Arrival and Departure

- Maximize space between students and between students and the driver on school buses and open windows to the greatest extent practicable, and ensure each bus is equipped with extra unused face coverings on school buses for students who may have inadvertently failed to bring one..
- Minimize contact at school between students, staff, families and the community at the beginning and end of the school day.
- 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.

1. Classroom Space

- To reduce possibilities for infection, students must remain in the same 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.
- Minimize movement of students as much as practicable. For example, consider ways to keep teachers with one group of students for the whole day.
- Maximize space between seating and desks. Distance teacher/staff desks at least six feet away from student desks. Separate student desks/tables at least 6 feet from other student desks/tables. Consider ways to establish separation of students through other means if practicable, such as markings on classroom floors to promote distancing or arranging desks in a way that minimizes face-to-face contact.
- Students will receive instruction on ways to minimize movement in both indoor and outdoor spaces that are easy for the students to understand and are developmentally appropriate.
- Students will have specific procedures for turning in assignments to minimize contact.
- Activities such as band and choir practice and/or performances are not permitted due to an increased likelihood for transmission from contaminated exhaled droplet
- Activities that involve singing must only take place outdoors.
- Clear plexiglass screens will be utilized to increase and enforce healthy safety protocols between identified employees and students. This could include students who receive speech/language and/or OT services, or students in the severely handicapped program, etc.

1. Non-Classroom Spaces

- The school is closed to visitors, volunteers and activities involving other groups at this time.
- Students will be educated on movement through hallways, including ways to enter and exit a campus, guidelines on the floor for students to follow to enable physical distancing while moving to restroom, recess/lunch, etc.
- Except for inclement weather, students will have morning snack/lunch recess outdoors. When using the lunch tables, students will sit together with their cohort group, ensuring physical distancing, and assigned seating. Purchased lunch will be served in bagged meals. Students will not share foods and /or utensils
- Recess activities will be separated in areas designated by each specific cohort

Health Recommendations

It is recommended that students be immunized for influenza in the autumn unless contraindicated by personal medical conditions.

- To protect the school community
- Reduce demands on healthcare facilities
- Decrease illnesses that cannot be readily distinguished from COVID-19 and would, therefore, trigger extensive measures from the school and Public Health authorities

Restroom protocol

1. It is recommended that classrooms design bathroom schedules to be used throughout the school day.
2. Assign specific restrooms to specific classrooms
3. Post classroom numbers outside the bathroom and number of students allowed in the restroom (1-2)
4. Place markings on the ground outside the restrooms to allow for physical distancing
5. Post signs inside and outside the restroom promoting healthy hygiene, i.e., proper handwashing, physical distancing and proper face covering
6. Limit the modified capacity to one or two students dependent upon the size of the restroom.
7. Wash hands for 20 seconds before and after using the restroom

Use a paper towel to turn off the faucet (if doesn't turn off automatically)

- Schedule bathroom times prior to recess/lunch (it is recommended that students use the bathroom while class is in session rather than during or immediately following recess); possibility of using IA's who do playground supervision to support prior to recess.
- Think of staggering morning recess/lunch by different physical locations rather than by grade level to maximize restroom availability.

1. Resources (CDC)

- [Handwashing](#)
- [Germs Around You](#)
- [Wash Your Hands](#)
- [Handwashing is Your Super Power \(Boy\)](#)
- [Handwashing is Your Super Power \(Girl\)](#)
- [Germs and Handwashing](#)

#6 Protocols for Isolating Staff with Symptoms

1. Each site will identify two isolation areas. The school health office is not an isolation room.
2. Ensure the staff member has a face covering. If not, provide one
3. The health clerk (who is wearing PPE) to go to location of the ill staff member and escort them to the health isolation room/area
4. If more than one staff member becomes sick, they may be isolated in the same room/area, keeping 6 foot physical distancing.
5. The health clerk will take the staff member's temperature and ask the following questions:

- Do you have a new cough, nasal congestion or runny nose?
- Do you have a sore throat?
- Are you experiencing shortness of breath or difficulty breathing?
- Are you having new muscle pain or fatigue?
- Do you have a headache (that is not normal for you)?
- Are you experiencing a new loss of taste or smell?
- Are you experiencing nausea, vomiting, abdominal pain, or diarrhea?
- Have you been exposed to anyone who has been tested positive for COVID-19 in the last two weeks?

1. The health clerk, following all privacy requirements, will immediately notify the district nurse and site supervisor if the staff member's temperature is at or above 100 degrees F **AND/OR** has symptom(s) such as:

- Chills
- Cough
- Loss of taste and smell
- Sore throat
- Shortness of breath
- Diarrhea
- Headache
- Muscle or body aches
- Extreme continuous fatigue

1. The district nurse will contact HR
2. The staff member will go home and contact their medical provider and will follow up with HR regarding results
3. Follow protocol for *SBSD Staff that Test Positive or are Suspected to have COVID 19*

Disinfecting Isolation/Additional Infected Areas

4. Close off all areas (isolation room/area, classroom, other shared locations) used by any individual suspected of being infected with the virus that causes COVID-19 and do not use before cleaning and disinfecting
5. Place a sign on the door with the date and time of closing
6. Room remains closed for 24 hours, or as long as practicable up to 24 hours
7. The health clerk will notify the principal and plant foreman that an isolation room/additional areas have been contaminated.
8. Staff will properly disinfect wearing appropriate PPE equipment
9. Following disinfection, can be reused for another sick child/staff member

#6 Protocols for Isolating Students with Symptoms

1. Ensure the student has a face covering. If not, provide one.
2. The health clerk or identified employee (who is wearing PPE) will go to the location of the ill student and escort them to health isolation room/area while maintaining physical distancing
3. If more than one child becomes sick, they may be isolated in the same room/area, keeping 6 foot physical distancing.
4. The health clerk will take the student's temperature and ask the following questions:

- Do you have a new cough, nasal congestion, or runny nose?
- Are you experiencing shortness of breath or difficulty breathing?
- Are you having new muscle pain or fatigue?
- Do you have a headache (that is not normal for you)?
- Do you have a sore throat?
- Are you experiencing a new loss of taste or smell?
- Are you experiencing nausea, vomiting, abdominal pain, or diarrhea?
- Do you have a new rash?
- Have you been exposed to anyone who has been tested positive for COVID-19 in the last two weeks?

1. The health clerk will immediately notify the district nurse and site supervisor if

the student's temperature is at or above 100 degrees F **AND/OR** accompanying symptom(s) such as:

- Chills
- Cough
- Loss of taste and smell
- Sore throat
- Shortness of breath
- Diarrhea
- Headache
- Muscle or body aches
- Extreme continuous fatigue
- Other: Rash, red eyes, cracked/ swollen lips, red/swollen tongue, swelling hands/ feet, stomach pain

1. For serious injury or illness, call 911 without delay. Seek medical attention of COVID-19 symptoms become severe, including persistent
2. The district nurse will contact HR/SS
3. The parent/guardian or emergency contact will be called and asked to pick up student as soon as possible
4. The student will be monitored and supervised while waiting to be picked up; the employee supervising must maintain 6 ft physical distancing, wear PPE, and avoid remaining in the room for greater than 15 minutes at a time (e.g., observe student via window if there is one)
5. When the parent/guardian/emergency contact arrives, they will phone the office from parking lot and the student will be escorted to the identified location in the parking lot
6. The health Clerk will sign-out the child
7. Follow protocol for *Students that Test Positive or are Suspected to Have COVID-19 and Have Had Close Direct Contact with Other Students/Teacher*

Disinfecting Isolation/Additional Infected Areas

8. Close off all areas (isolation room/area, classroom, other shared locations) used by any individual suspected of being infected with the virus that causes COVID-19 and do not use before cleaning and disinfecting
9. Place a sign on the door with the date and time of closing
10. Room remains closed for 24 hours, or as long as practicable up to 24 hours
11. The health clerk will notify the principal and plant foreman that an isolation room/additional areas have been contaminated.
12. Staff will properly disinfect wearing appropriate PPE equipment
13. Following disinfection, can be reused for another sick child/staff member

#7 Shared Items - Adults

To the extent feasible, schools should follow these recommendations and best practices:

1. Individually label storage containers, cubbies, or areas (hooks for backpacks with each student's name above each hook and spaced apart to ensure physical distancing) for students' personal belongings (lunch bag, reusable water bottle, outerwear). Ensure belongings are taken home each day to be cleaned
2. Provide each student with an individualized container with their name on it for daily classroom supplies (e.g., pencil, eraser, glue stick, crayon, markers, etc.) Supply box can be transported between home and school. Educate families that supply box and supplies should be cleaned before returning to school (Could PTA sponsor supply boxes to be used at home so no transporting back and forth?)
3. Ensure adequate supplies to minimize sharing of high-touch materials (art supplies, STREAM items, etc) to the extent feasible or limit use of supplies and equipment to one class cohort at a time and clean and disinfect between uses. Set up a system to organize containers that hold "clean" supplies and a separate container to place "used/dirty" supplies (e.g., paint brushes) that will need to be cleaned and disinfected. Those items that cannot be cleaned easily should not be used.
4. Limit use of shared playground equipment, including keeping playground equipment such as balls, jump ropes, etc. within the classroom cohort; or label containers for clean, unused playground equipment and another for equipment that needs to be cleaned that is kept outside by the playground.
5. ~~Plant foreman would be in charge of cleaning/disinfecting the used playground equipment.~~
6. **Staff Lounge/Kitchen Protocol**

- Limit use of occupancy based on size of lounge to ensure physical distancing
- No community coffee pot
- Lunch items placed in the refrigerator must be in a bag with your name on it. No common shared items (i.e., salad dressing, mustard, etc.) can be left in the refrigerator
- No use of community cookware (pans, plates, utensils, cups); may use disposable items, if available.
- Wash/sanitize hands before and after utilizing water dispenser handles
- Wash/sanitize hands before and after utilizing microwave handle
- Staff may not eat in the staff lounge. If sites have outside sitting on a patio, staff may sit outside as long as can physically distance

#7 Shared Items - Students

1. Each student's personal belongings (reusable water bottle, lunch bag, backpack) should be separated from the other students and kept in individually labeled containers, cubbies or other areas (backpack hooks spaced apart with the student name above hook) that are designated for specific students. Belongings need to be taken home each day to be cleaned.
2. Students should not bring personal toys, stuffed animals or other personal items to school
3. Students have individual school supplies (pencil, glue stick, scissors, eraser) that can be kept in a container with their name on it to be transported back and forth between home and school. Students/families to be educated to wipe down items before returning them back to school.
4. When using shared items (art supplies, playground equipment), limit to one small classroom cohort at a time, allowing for time to clean and disinfect before next use.

#8 Library Protocol**Option 1: Class Visits Library**

1. Only cohorts/classes who are scheduled for the library will visit the library. It is recommended to keep the cohort size small. The Library is not open for individual student or staff use.
2. Signage is posted within the library about facial coverings, hygiene and physical distancing
3. A teacher/staff member should accompany class to library to help support physical distancing
4. Students sanitize hands upon entry and exit of the library
5. When students arrive, they put their returned books in bin that is placed near the entrance of the library and they receive a book checkout form and pen
6. Designate a plan for how students will move through the library utilizing floor decals and clear signage to define one-way traffic routes, and to show where students are to stand; students do not sit in the library
7. Students are educated on **touchless browsing** in the library (e.g., CRT provides collections of books and displays them with the back or blurb facing up for students to read)
8. Students will write down the book(s) they want to check out, and will place the form in a basket on the checkout counter before returning to class. Pens will be placed in the "Dirty" container to be cleaned/disinfected before use by another cohort
9. The CRT will check out the books (Alexandria) for the class and deliver them to the classroom.
10. Returned books are "quarantined" for 72 hours (Institute of Museum & Library Services and School Library Association); there is a separate bin for each day that books are returned with the date posted that they are returned. After 72 hours, books may be reshelved wearing non-latex gloves

Option 2: Library on a Cart

11. CRT pulls a variety of genres of books from the library and places them on a mobile cart.
12. Each class has a weekly designated time for the CRT to visit the classroom
13. The CRT can hold book talks to introduce books to the students or could provide an electronic synopsis for the students to browse through on Google Classroom before CRT comes to the classroom. Students can choose their book on a book checkout form. Books could be taken home and returned once read
14. CRT will collect forms and enter into Alexandria upon arrival at library
15. The classroom will have a bin for returned books. The CRT will wear non-latex gloves to return books to the library to be quarantined for 72 hours. The date of pickup will be posted on the bin with a designated area in the library for returned bins/books
16. Library on a cart might allow the CRT to provide a lesson within the class as well, i.e., digital citizenship

Option 3: Classroom Libraries

17. Classroom teachers can pull a variety of genres of books from their classroom library or create an electronic list of classroom books for students to review
18. The classroom teacher and/or student(s) can do book talks to introduce books to their classmates
19. Students can select books of interest for the week
20. Books returned on Friday mornings and placed in bin for quarantine for 72 hours
21. Teacher reshelves books on Monday wearing non-latex gloves

#9 Education and Training for Staff, Students and Families

Train all staff and students and provide educational materials to families in the following safety actions:

1. Enhanced sanitation practices, including hand washing and using tissues to wipe nose and to cough/sneeze inside a tissue or elbow.
2. Physical distancing and the importance
3. Use of face coverings including proper use, removal, and washing of cloth face coverings according to CDPH guidelines.

<https://www.cdc.gov/coronavirus/2019-ncov/downloads/cloth-face-covering.pdf>

4. Wellness Symptom Screening practices
5. Information related to COVID-19 including the following:
 - Specific symptom identification
 - Emphasis on not coming to work or school when exhibiting signs or symptoms of COVID-19
 - Practices for preventing spread
 - When to seek medical attention
 - Vulnerable populations
1. Leave and workers' compensation benefits.
2. For janitorial workers and plumbers, communicate the hazards associated with working on sewage or plumbing, and performing janitorial services, since COVID-19 has been found in feces of infected persons.

#10 Testing of Employees**#10 Testing of Students**

Resources

[SDCOE COVID-19 Recovery and Reopening Plan](#)

[COVID-19 Industry Guidance: Schools and School-Based Programs](#) - 7/17/20

[Stronger Together - Coronavirus \(COVID-19\) \(CA Dept of Education\)](#)

[Reopening Schools CDE vs CDPH](#)

[COVID-19 Health Services Recovery Plan-FINAL](#) (California School Nurses Association)

[SDCOE Reopening Checklist](#) - 7/23/20