San Mateo County Coalition for Safe Schools and Communities

Pandemic Recovery Framework

The Framework Will Continue to Be Updated as New Information Becomes Available

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The Framework was developed in consultation with San Mateo County Health, and reflects the guidance in CDE’s [Stronger Together, a Guidebook for the Safe Reopening of California’s Public Schools](https://www.cde.ca.gov/cd/ls/cr/crps2020/guidebook/guidebook.asp) as well as the California Public Health Department’s (CDPH) Guidance for Schools, [COVID–19 Industry Guidance: Schools and School–Based Programs](https://www.cdph.ca.gov/C Https://www2.ca.gov/ar19/industryguidance/schoolsSchools.htm).
Please note: As conditions and public health orders change, the content and guidance in this framework may change as well.
I. Laying the Foundation for Recovery

As COVID-19 began to take hold and spread within San Mateo County in March 2020, the county’s Health Officer issued two orders that significantly impacted how schools operated, teachers taught, and students learned. The School Operations Modification Order was issued on March 13, 2020, and required all schools to transition immediately from on-campus to at-home learning. A Shelter-in-Place Order followed on March 16, 2020, which dictated that all but essential staff work from home. Governor Gavin Newsom issued a state order on March 19, 2020, directing all California residents to shelter in place.

Early indications point to success of the shelter-in-place order in flattening the disease’s growth curve in the state, prompting Governor Newsom to begin issuing guidance about reopening California, including schools. Based on the premise that COVID-19 is not going away soon, the Governor provided six key factors that need to be in place for the state to reopen, three of which are particularly relevant to schools.

A. State Indicators for Reopening

- Ability to test, contact trace, isolate, and support those exposed
- Ability to protect those at high risk for COVID-19
- Ability of businesses, schools, and childcare facilities to support physical distancing

On April 29, 2020, Bay Area public health officers released a similar set of indicators to measure progress in containing the virus and ensuring the region has the infrastructure in place to protect the community from further spread of COVID-19. These indicators will impact decisions about when and how to ease shelter-in-place restrictions.

B. County Indicators for Reopening

- The daily number of new cases in the community is flat or decreasing
- The number of new hospitalized patients with COVID-19 is flat or decreasing
- There is an adequate supply of personal protective equipment (PPE) for all healthcare workers
• The county is meeting the need for testing, especially for persons in vulnerable populations or those in high-risk settings or occupations

C. Targeted Audience for Framework
The primary audience for this framework is local education agencies (LEAs) operating school sites for children in grades preschool to twelfth grade. We understand that Licensed Child Care facilities have multiple regulatory agencies. Should guidelines differ, follow the stricter guidance. For more information on licensed Child Care and Early Learning Programs, please refer to the State’s Early Learning and Care Playbook at https://californiaall.org/home.

D. Districts and Schools
School districts and school programs, including early childcare, must ensure that public health conditions as determined by local health officials drive the planning and implementation of any educational program. In order to accomplish safe school operations amid the COVID-19 pandemic, school leaders must be able to implement the following actions:

• Collaborate with public health officials and San Mateo County Office of Education to help monitor and respond to cases of COVID-19 within school communities
• Provide essential protective equipment to all staff and effectively implement hygiene protocols, physical distancing, and cleaning practices
• Implement efficient, but effective health and temperature screenings for students, staff, and visitors who come on campus
• Be prepared to transition between at-home and on-campus learning supported through a continuum of instructional practices that support the diverse needs of all students
• Refer to specific requirements from CDE and Child Care Community Care Licensing for preschool programs when appropriate

E. Leadership and Policy
Policy makers must do all they can to support school leaders as they strive to provide high quality education to all students while maintaining safe learning environments. School leaders cannot do this work alone; flexible and forward-thinking policymaking
at the federal, state, and local levels is essential to the successful education of our students. Elected leaders have an important role to play in advocating for student needs, including prioritizing school funding and supporting operational flexibility.

F. Focus on Equity

The COVID-19 pandemic has further exposed pre-existing and untenable inequities in California’s education system that leave some of our most vulnerable students and families without critical support when they need it most. Some students may have limited or no access to digital devices or connectivity while others may have lost the benefit of personalized curriculum or one-on-one instructional support. Some families have received limited guidance in supporting their children’s at-home learning.

Additionally, reductions in school funding are expected as state revenues decline due to the economic impact of the pandemic. It is likely that as long as the pandemic persists as a public health threat the additional stress on funding California schools will also persist.

Despite these challenges, the San Mateo County Pandemic Recovery Framework for Schools calls on school leaders, elected school board members, and education professionals across all content areas to begin their return to school planning by identifying students with the most urgent learning needs and then building the Return to School Plan in a way that unequivocally meets these needs.

In order to implement physical distancing on school campuses, it is unlikely that all students will be able to participate in on-campus learning at one time. It is important that decisions about students’ educational programs are grounded in equity and aim to provide every student what they need when they need it. Some schools may be able to accommodate most students for on-campus learning while others may not. With courageous and collaborative leadership, existing equity gaps can intentionally be addressed. The COVID–19 pandemic provides San Mateo County a compelling opportunity to respond with equity as its top priority. If we set an ambitious goal that ensures every student is on track for success, academically, socially, and emotionally by the end of 2022, our decision making must be notably bold and courageous.

All students benefit from equity-driven systems. Return-to-school planning teams can ensure every student gets what they need when they need it. Planning teams are
strongly encouraged to begin their planning process by identifying the unique needs of students who:

- qualify for special education services
- experience housing insecurity or who are homeless
- are English Language Learners and/or whose families are English Language Learners
- are in the foster system
- receive counseling services
- experience grief/loss/sickness
- are undocumented
- are providing childcare for siblings or their own children
- have little or no access to technology or whose technology skills are underdeveloped
- have skills that are below grade level or are behind in credits
- are experiencing trauma

Equity-Driven Planning will consider:

- strengthening district-level structures to assist families with questions and emergent or unique circumstances
- supporting access to technology hardware and connectivity and providing computer literacy support to students who need it
- providing targeted learning and communication supports for non-English speaking students and families
- developing strategies to support students who participate in distance learning and who are experiencing insecure housing or whose home environment is not conducive to everyday learning
- ensuring students and families have current information about mental health resources and support
- supporting or providing access to home-to-school transportation

The role of schools in supporting multiple needs of families has sharply increased in the COVID-19 pandemic recovery. Schools should ensure families have current information about community resources and provide assistance to help families access:
• child care
• food
• legal services
• utilities services
• housing supports
• access to healthcare

Equity-driven planning should also take into consideration the needs of school staff around the use of technology, child care, mental health supports, and general health and well-being.

G. How to Use the Framework

The San Mateo County Pandemic Recovery Framework for Schools provides school leaders with the health, education, and legal guidance needed to develop local plans for the safe reopening of school campuses in San Mateo County after campus closures in response to community spread of COVID-19 beginning in March 2020.

Given that Governor Newsom stated, “Californians should not expect a return to ‘normal’ life until there is herd immunity and a vaccine exists for COVID-19,” (4/15/20) and Dr. Anthony Fauci, the director of the National Institute of Allergy and Infectious Diseases, has indicated it will take between 12 and 18 months to develop a coronavirus vaccine, (4/1/20) this framework provides school leaders with a continuum of learning options that can support the flexible delivery of education amid further possible closures throughout the 2020–21 school year.

This framework was developed as a collaboration of the San Mateo County Office of Education, San Mateo County district superintendents and administrators, the San Mateo County Health Officer, and San Mateo County Counsel. Additional technical review was provided by San Mateo County’s Coalition for Safe Schools and Communities Steering Committee.

H. Four Pillars: Health and Hygiene, Face Coverings, Physical Distancing, and Limiting Gatherings

The dangers of community spread of COVID-19 cannot be understated. Despite the fact that the U.S. declared a national emergency in mid-March and Americans have
been following strict guidelines including sheltering at home, nearly 100,000 Americans died from COVID-19 in the first five months of 2020.

Scientists continue to learn more every day about this virus, but what seems clear at this time is that the likelihood of spread increases in accordance with the amount of exposure or the “dose” of the virus. “Dose” is based on proximity, or how physically close people are to each other, and time, how much time people spend in close proximity. The Four Pillars of the San Mateo County Pandemic Recovery Framework (health and hygiene protocols, face coverings, physical distancing, and limiting gatherings) are intended to work in concert to reduce the likelihood of spread within the school setting.

The behaviors and actions required in the Four Pillars are grounded in science and represent best practices in preventing the spread of communicable disease. The Four Pillars also provide an opportunity to create new school norms that can improve health and safety for all members of the school community and therefore, can serve to improve academic, social, and emotional outcomes for all students.

Effective implementation of the Four Pillars can significantly reduce community spread within a school so that in-person learning can be sustained with integrity. And yet, until there is widespread vaccination in the community, some families will choose to protect against illness from COVID-19 by continuing to shelter in place. Schools should consider continuing to offer distance learning as one option for families who remain sheltering at home. Additionally, district administrators can utilize existing human resource processes for determining accommodation for employees who express health concerns.

Licensed Child Care facilities have multiple regulatory agencies. Should guidelines differ, follow the stricter guidance.

1. A Step-by-Step Approach

Incremental implementation of the Four Pillars can provide a cautious, but steady approach to reopening schools amid the COVID-19 pandemic. In cooperation with San Mateo County Health, school operations will be informed by public health data applicable to both the school community and the county. This step-by-step approach enables schools to be nimble in responding to current and changing conditions.
Three Steps: Step One, Step Two, Step Three

To ensure smooth implementation of the Four Pillars on each school campus, schools will use an incremental approach to guide their return-to-campus process. Each school site administrator will lead their school community through the incremental progression of the steps outlined below based on local school and district conditions.

Each step should be fully implemented for a minimum of three weeks before considering advancing the school community to the next step. Additionally, the steps provide clear restrictions that may need to be implemented in the event of an outbreak within the school community or more restrictive health orders countywide. Districts are encouraged to develop a district-wide protocol to guide site leaders in their decision-making and public communication.

The conditions informing this decision-making for each step include:

Step One (Minimum of three weeks)
- County health conditions: the number of COVID-19 positive cases in the county remains flat or decreasing
- Allow no on-campus visitors including volunteers; parents who support direct instruction in preschool classrooms are exempt
- Pause all extracurricular activities
- Pause all gatherings (a gathering is any meeting or social activity outside of classroom instruction that includes more than four people)
- Convene all meetings remotely
- Reinforce the wearing of face coverings by staff, students, and any others who enter the campus

Step Two (Minimum of three weeks)
- County health conditions: the number of COVID-19 positive cases in the county remains flat or decreasing
- Open the campus only to visitors and volunteers who directly support instruction with expectations that all will honor the Four Pillars
- Restrict extracurricular activities to those that directly support and intersect with instruction, with expectations that any in-person activities will honor the Four Pillars
- Restrict gatherings to groups smaller than ten people
- Convene most meetings remotely, specifically any that include groups larger than ten
- Consider holding sports (if allowed by health orders like golf, tennis, swimming, cross country) and school-related performances with no spectators or audience members. Conduct all such activities within the guidance of the Four Pillars

**Step Three: (Minimum of three weeks)**
- County health conditions: the number of COVID-19 positive cases in the county remains flat or decreasing
- Allow volunteers and visitors on campus with strict adherence to the Four Pillars
- Restrict instructional and interest-based extracurricular activities to those that can be implemented with small groups who can physically distance
- If county health orders allow, convene high priority gatherings comprised of no more than 50 people, including sport and performance-based activities that can be conducted within the guidance of the Four Pillars

This step-by-step approach requires patience and discipline from all members of the school community. Community health data and current campus conditions should guide school leaders in implementing the relevant steps. Although schools typically provide much more than academic instruction, including social and emotional support, interest-based activities, sports, and youth leadership opportunities, the primary goal of students returning to school for the 2020-21 school year is to maximize instructional time and provide high quality academic intervention and support that supports the educational success of all students.
II. Governance Structures

Government agencies, school district leadership, and elected boards have distinct, but important roles and responsibilities in emergency response and recovery. During an emergency such as the current public health crisis, community leaders should be mindful of their specific roles, stay in their lane, and trust and offer support to their partner agencies. This section reviews the various roles of different government and district agencies and leaders.

A. Role of the School District

During the COVID-19 threat, the district is responsible for maintaining its essential operations and supporting the public health where possible.

Prior to an identified COVID-19 outbreak in the area served by the district, the district will work closely with the San Mateo County Health Officer to monitor the threat, promote strategies to prevent disease transmission, and prepare for the spread of the disease in its community.

During a COVID-19 outbreak, the district will continue all prevention strategies and will take direction from the County Health Officer regarding measures necessary to control transmission of the disease.

- Declaration of Emergency
  Although the District Superintendent has the authority to declare a district emergency during a public health emergency, San Mateo County Health is the County’s lead agency and public health authority. To the greatest extent possible, school closures or student dismissal decisions (and when to remain in session) will be made in consultation with the County Health Officer.

- Public Employees are Disaster Service Workers
  California Government Code – [Sections 3100 – 3109](#) – compel all public employees to serve in the capacity of Disaster Services Workers “subject to such disaster service activities as may be assigned to them by their superiors or by law.”

- Activation
  The authority to activate a recovery plan rests with the superintendent.
• **Coordination**
  The district office will coordinate the actions and functions as described within this plan with city and county agencies, and any other affected entities.

• **Notifications**
  The superintendent will notify district administrators that this plan has been activated.
  
  The Public Information Officer (PIO), or the staff member filling that role as part of the district’s Incident Command structure, will be responsible for ensuring all public communications are consistent with the goals established by the superintendent. All communications with stakeholders (internal and external) and with the media will be issued or authorized by the PIO or designee.

• **Notification within Each Campus**
  Responsibility for communicating response or recovery actions and intentions begins with the Principal or Site Director.

**B. Role of the School Board**

Elected school board members work together with their superintendent as a governance team to make decisions that will best serve all students in the community. In the midst of a significant emergency such as the COVID-19 pandemic, this collaborative relationship is especially critical for the safety of all community members and the successful delivery of education for students.

Similarly, effective implementation of this framework by the governance team must be built on trust in the professional experience and pedagogical leadership of the superintendent. During the phases of emergency response and recovery, honoring the clear boundaries regarding each respective leader’s role is key to a successful response.

• **Policy Oversight**
  The school board will provide support to the district emergency recovery effort by evaluating whether district board policies (BP) or administrative regulations (AR) need to be adopted or amended to address COVID-19 impacts.
• **Board Policies of Note for COVID-19 Response**
  - BP/AR 1250 (Visitors/Outsiders)
  - AR 4112.4, 4212.4, 4312.4 (Health Examinations)
  - BP 4113.5/4213.5/4313.5 (Working Remotely)
  - BP/AR 4157, 4257, 4357 (Employee Safety)
  - BP/AR 5121 (Grades/Evaluation Of Student Achievement)
  - BP/AR 5123 (Promotion/Acceleration/Retention)
  - BP 6111 (School Calendar)
  - BP/AR 6112 (School Day)
  - BP/AR 6146.11 (Alternative Credits Toward Graduation)
  - BP/AR 6145 (Extracurricular And Cocurricular Activities)
  - BP/AR 6145.2 (Athletic Competition)
  - BP 6157 (Distance Learning)

• **Advocacy**
  The school board will determine which advocacy efforts the board will prioritize, especially around school funding. At a minimum, reopening schools with physical distancing in place requires additional funding to ensure the safety of all students, staff, and their families.

  Senate Bill 884, which provides funding for summer school to make up missed days due to emergencies including fires, floods, poor air quality (due to smoke), Public Safety Power Shutoff (PSPS) events, pandemic, etc., could also provide needed emergency funding to address immediate impacts.

  On the federal level, a second investment in education is urgently needed to assist schools now and through the coming months to support COVID-19 recovery efforts.

• **Communication**
  The school board will determine how the board can support the District’s communication plan, aligned with Board Bylaw 9010 (Public Statements). Clear and consistent messaging and community engagement by the board can help inform the community and instill trust and confidence.
C. Role of the San Mateo County Office of Education

Led by the County Superintendent of Schools, the San Mateo County Office of Education (SMCOE) supports school districts by performing some tasks that can be done more efficiently and effectively at the county level.

During a regional emergency, SMCOE assists by facilitating communication and coordination across the PreK-14 community, acting as a liaison and advocate for the county’s school systems with regional partners, and providing training, technical assistance, and support.

D. Role of the County of San Mateo

Numerous federal, state, and local statutes authorize public health actions to control the spread of an infectious disease such as COVID-19. Under California law, a local health officer who believes a contagious, infectious, or communicable disease exists within the territory under their jurisdiction “shall take measures as may be necessary to prevent the spread of the disease or occurrence of additional cases” and to protect the public’s health (California Health and Safety Code Section 120175).

San Mateo County Health will be the lead agency and will activate its Department Operations Center (DOC) when necessary. County Health will work in collaboration with the County Manager’s Office and Emergency Operations Center (EOC) to ensure that all reasonable measures are taken to limit the spread of an outbreak within the community’s borders. Activities will include the following:

- Emergency command and management
- Surveillance
- Emergency medical response
- Maintenance of essential health and medical services
- Maintenance of other essential services
- Communications
- Vaccine or antiviral distribution (when available)

Role of the County Health Officer

Each county is mandated to “take measures as may be necessary to preserve and protect the public health,” and the health officer plays a key role in fulfilling this duty. California law requires each county to appoint a health officer, who must be a
physician. California law grants local health officers broad authority to take action to prevent disease. For example, the health officer is vested with authority to issue orders, including orders for isolation and quarantine. Cal. Health and Safety Code § 120175.5(b) provides, “the local health officer may issue orders to other governmental entities within the local health officer’s jurisdiction to take any action the local health officer deems necessary to control the spread of the communicable disease.”

Governor Newsom’s Executive Order N-60-20, Section 3, provides that “[n]othing in this Order shall be construed to limit the existing authority of local health officers to establish and implement public health measures within their respective jurisdictions that are more restrictive than, or that otherwise exist in addition to, the public health measures imposed on a statewide basis pursuant to the statewide directives of the State Public Health Officer.” The most restrictive order takes precedence whether it comes from the county, the state, or the federal government.

E. Notifications

The Communication Structure (see Appendix) illustrates the coordinated flow of information from San Mateo County Health to the education community. Streamlining the communication from County Health to the Office of the County Superintendent and then to the district superintendent and in reverse, from the district superintendent to the County Superintendent and back to the County Health ensures a clear, uninterrupted communication flow.

Notice of confirmed cases within the county will be made by County Health.

- **Confirmed COVID-19 case in the school community**

  **County Health initiates.** County Health will follow the Communication Structure by contacting SMCOE’s Office of the Superintendent which will then communicate with the district superintendent or head of school.

  **School district initiates.** The school district superintendent will follow the Communication Structure by contacting SMCOE’s Office of the Superintendent which will work in collaboration with County Health and the local district or school.
• **Suspected COVID–19 case in the school community**

  **County Health initiates.** County Health will follow the Communication Structure by contacting SMCOE’s Office of the Superintendent which will then communicate with the district superintendent or head of school.

  **School district initiates:** The School District Superintendent will follow the Communication Structure by contacting SMCOE’s Office of the Superintendent which will work in collaboration with County Health and the local district or school.

• **Parent, staff or community member report**

  If an individual notifies a school staff member, including the school nurse, that they have or may have COVID–19, that staff member should immediately notify the school principal. The school principal will implement the Communication Flowchart by notifying the district superintendent or head of school who will then contact SMCOE’s Office of the Superintendent who will work in collaboration with County Health and the local district.

**F. Role of State Government**

The California Emergency Service Act (Government Code (GC), Title 2, Division, Chapter 7, Section 8550 et seq.) confers upon the Governor and chief executives of political subdivisions of the state emergency powers to provide for state assistance in the organization and maintenance of emergency programs; establishes Office of Emergency Services; assigns functions to state agencies to be performed during an emergency and provides for coordination and direction of emergency actions of those agencies; and establishes mutual aid procedures. Authority for the creation of standby orders, crucial for preparedness, exists in GC section 8567. Authority to suspend statutes and agency rules exists in GC section 8671.

**Department of Public Health**

The California Department of Public Health (CDPH) is the lead state department for the state’s pandemic response. CDPH’s response to COVID–19 will comply with Standardized Emergency Management System (SEMS) and the National Incident Management System (NIMS).
CDPH will work closely with the California Emergency Medical Services Authority (CEMSA) in coordinating the medical response. CDPH has primary responsibility for activating the response at the level appropriate to the specific phase of a pandemic.

Throughout all phases of a pandemic event, the CDPH and/or the CEMSA will be responsible for the following:

- Coordinating statewide planning and providing recommendations for local public health and healthcare systems planning and response activities, including surge capacity issues.
- Coordinating statewide monitoring and investigation of illnesses and deaths caused by infectious agents.
- Communicating with the Centers for Disease Control and Prevention, state, local, tribal and provincial health agencies.
- Providing laboratory facilities for identification and serving as liaison to the Centers for Disease Control and Prevention.
- Coordinating any statewide distribution of vaccine or antiviral medication if they become available.
- Providing information for the public on communicable disease and safety precautions.

**G. Role of Federal Government**

The Secretary of Health and Human Services (HHS) is responsible for preventing the introduction, transmission, and spread of communicable diseases from foreign countries into the United States and within the United States and its territories/possessions (section 361 of the Public Health Service [PHS] Act).

Under its delegated authority, the Centers for Disease Control and Prevention (CDC) is empowered to detain, medically examine, or conditionally release individuals reasonably believed to be carrying a communicable disease.
III. General Planning Assumptions

After delivering at–home or distance learning since March 16, 2020, in adherence with health orders aimed to slow the spread of COVID–19, San Mateo County schools and districts are now beginning to plan and prepare various scenarios to reopen school campuses for the start of the 2020–21 school year.

It has become increasingly clear that the 2020–21 school year isn’t likely to resemble school as we knew it last year or any year prior. With the promise of a COVID–19 vaccine still 12 to 18 months away, San Mateo County health and education leaders will be working in close collaboration to bring students back to school in ways that prioritize physical distancing and a slow and gradual return to in–person, on–campus learning.

Governor Newsom has made it clear that, as long as public health data continue to reflect a flattening in the number of COVID–19 cases, he wants schools to open. Of the six criteria included in California’s Pandemic Roadmap, three are especially relevant to schools. These three criteria are:

- testing, contact tracing, isolating, and supporting those who test positive or are exposed
- ability of businesses, schools, and child care to support physical distancing
- ability to determine when to reinstitute certain measures such as Shelter in Place if necessary

A. County Indicators to Assess Progress in Slowing the Spread

In mid–April, the San Mateo County Health released indicators to measure progress in containing COVID–19 and ensuring the county has adequate infrastructure in place to protect the community from increased spread. These indicators are critical to decision making by school leaders who will rely on them to ensure a safe return to school. The local indicators are:

- whether the total number of cases in the community is flat or decreasing
- whether the number of hospitalized patients with COVID–19 is flat or decreasing
• whether there is an adequate supply of personal protective equipment for all healthcare workers
• whether we are meeting the need for testing, especially for persons in vulnerable populations or those in high-risk settings or occupations
• whether we have the capacity to investigate all COVID-19 cases and trace all of their contacts, isolating those who test positive and quarantining the people who may have been exposed

In his statement to the public dated May 4, 2020, Dr. Morrow, San Mateo County’s Health Officer, addressed the delicate balance of choices we must make as a community in reopening society ahead of a vaccine or proven effective treatments.

... the loosening of restrictions on summertime ... activities of children for all ages in small groups ... reduces the chance of spread in the children who participate by allowing these activities only in small stable cohorts of children, but it does not eliminate the spread. Children who participate in these activities have a higher chance of getting infected and taking it back into their families than those who are never let out of their house. The balance here is the developmental needs of children, who may have lifelong adverse ramifications if these needs are not met, and the risk of transmission to high risk family members, which may or may not result in serious illness or death.

Dr. Morrow further explained that the needed resources to more aggressively contain the spread are imminent, potentially clearing the path to a slow and safe reopening.

These reopening decisions ... are coupled with an aggressive containment strategy, a much more widespread testing strategy and hardening of the healthcare system with additional equipment, PPE and surge capacity. The testing and containment strategy work in concert to try to rapidly identify cases and contacts to cases, investigate those cases and contacts, and isolate the cases and quarantine the contacts with close monitoring. A large public workforce is being mobilized to undertake these endeavors.

B. The Four Pillars

San Mateo County students and staff are eager to return to school, but until there is widespread vaccination in the community, schools must be organized around the Four Pillars, which include health and hygiene, face coverings, physical distancing,
and limiting gatherings as dictated by public health officials.

We understand that Licensed Child Care facilities have multiple regulatory agencies. Should guidelines differ, follow the stricter guidance. Instead of being very specific on the differences for early learning, this would remind early learning sites to follow the stricter protocol that pertains to their own regulatory agency.

**Pillar One: Health and Hygiene Protocols**

Hygiene protocols are essential to avoiding the spread of disease and require careful planning, purchasing of supplies, and training of staff, students, and parents, guardians, and families in order to implement effectively.

**Health and Hygiene Protocols: Daily Hygiene Routines**

- Ensure campus signage and other messages reinforce daily hygiene routines and are widely posted, disseminated, and encouraged through various methods of communication.

- Teach all students and staff to be alert for symptoms. Watch for fever, cough, shortness of breath, or other symptoms of COVID-19.

- All members of the school community, students and staff alike, must stay at home if experiencing flu-like symptoms or fever.

- School staff must explicitly teach and frequently reinforce prevention behaviors of handwashing and cough/sneeze etiquette as important strategies in slowing the spread of COVID-19 and other infectious diseases.
• Because washing with soap and water is preferred over hand sanitizers, consider investing in portable hand washing stations as necessary and strategically placing them around campus.

• Activate all hot water sinks in case they have been turned off. Use warm water for handwashing whenever possible. Although cold water is acceptable per CDC guidelines, it is less comfortable and may deter frequent handwashing.

• Without access to sinks with water, including portable hand washing stations, consider installing hand sanitizer dispensers inside and outside school buildings.

• Teachers should build classroom routines for hand washing upon entering and leaving the classroom and create regular cleaning practices for desks, equipment, writing utensils, and other classroom materials.

• Provide incentives (e.g., classroom recognition or special responsibilities) for proper and thorough hand washing and other healthy practices to reinforce good hand hygiene. Consider adding recognition of safe and healthy hygiene practices within the school’s positive behavior and intervention (PBIS) matrix. Be sure to empower and involve students to help lead these efforts.

**Health and Hygiene Protocols: Temperature Taking**

• Schools should implement policies and guidelines for health checks, including temperature taking for students, staff, and the public utilizing no-touch thermometers.

• County Health officials recommend conducting temperature screenings at the start of each day once students are on campus and inside their assigned classrooms. Schools may develop other ways to organize the morning health protocol as long as all students are participating daily.

• Consider using wristbands or other markers that students/staff may wear or display to designate that each person has completed the health screening at the start of each day.

• For students who use district-provided transportation, consider having a bus aide conduct temperature screenings when students load onto the bus at the start of the day. This may be especially applicable and effective for students
with special needs and would deter this more vulnerable population from entering the school environment while sick.

- Identify lead staff who can train others on proper health and hygiene techniques and provide support when questions arise.
- Any regularly employed staff may conduct temperature screenings according to district guidelines.
- Temperature data does not need to be recorded. If an individual registers a temperature reading outside the recommended range (above 100.4 degrees) that individual will be asked to go home. The school must maintain an isolation room for transitioning individuals from school to home.
- Develop a process to regularly conduct temperature checks for parent volunteers and all campus visitors.
- Educate families about COVID-19 related health protocols to conduct at home and support families who want to keep their students home when showing signs of illness.
- 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 to identify if the student has a history of allergies.

**Health and Hygiene Protocols: Essential Protective Equipment (EPE)**

Through a partnership with the San Mateo County Schools Insurance Group (SMCSIG) and the County Office of Education (SMCOE), a bulk purchase of EPE for schools and districts in San Mateo County will ensure adequate supplies are available to safely begin the 2020–21 school year. Child care supplies are available through the 4Cs.

- Gloves play a minimal role in COVID-19 safety, except when conducting cleaning, handling food, or toileting. The CDC and San Mateo County Health strongly recommends hand washing as the most effective measure against the spread of COVID-19 over the routine use of gloves.
- Essential Protective Equipment (EPE) includes face coverings, hand sanitizer, disinfecting wipes, gloves for specific activities, standards-based cleaning materials, and for staff working with special populations, disposable gowns and face shields.
Classrooms and office spaces must be supplied with wastebaskets, tissues, and CDC approved sanitizer.

Health and Hygiene Protocols: Cleaning

- Develop an explicit and detailed cleaning plan that includes a regular schedule for high traffic areas.
- When performing cleaning duties, custodial staff should follow CDC guidance on the use of face masks and other safety equipment.
- Be cognizant of providing “Allergy Friendly” products.
- Provide training to all staff on when and how to properly clean and disinfect their classrooms and workspaces. Consider deploying county, district, or school nurses to assist with training.
- Consider the assignment of restrooms to specific classes and/or using procedures to indicate when a restroom/stall is clean or if it has been used since the last cleaning (e.g. use of red/green signs to indicate clean or dirty).
- 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 fresh air. Replace and check air filters and filtration systems to ensure optimal air quality.
- Close off areas used by any sick person 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.
- Refer to the Cleaning & Disinfection Procedures Manual prepared for the San Mateo County Pandemic Recovery Framework for Schools by Professional Service Industries, Inc. and the San Mateo County Schools Insurance Group (SMCSIG)
• Check [CDC guidance](https://www.cdc.gov) about cleaning and disinfection after persons suspected/confirmed with COVID-19 have been in the facility.

**Health and Hygiene Protocols: Indoor Ventilation**

• Begin each school term by installing new air filters in the HVAC system.

• Open doors and/or windows when outside climate allows, but keep doors in locked position to quickly close and secure in the event of a security alert. Cross ventilation of outside air helps maintain a healthy environment.

• Consider using supplemental fans in classrooms to maintain healthy airflow.

• Use air conditioning to keep rooms comfortable.

• Viruses are tiny and survive about 90 minutes in air. There are air filters available that will take out virus-size particles, but they would not likely work with standard school HVAC systems.

• If opening windows poses a safety or health risk (e.g., 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).

• Maximizing outside airflow is the simplest and most efficient way to maintain a healthy classroom environment.

**Health and Hygiene: Limit Sharing of Material and Equipment**

• 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 of shared playground equipment in favor of physical activities that require less contact with surfaces.

• Limit sharing of objects and equipment, such as toys, games, and art supplies to the extent practicable. But where allowed, clean and disinfect between uses.
Pillar Two: Face Coverings

Centers for Disease Control and Prevention (CDC), California Department of Public Health (CDPH), and San Mateo County Public Health (SMCPH) state that wearing a face covering, when combined with physical distancing of at least six feet and frequent hand washing, significantly reduces the risk of transmitting coronavirus when in public. The current Face Covering Order in San Mateo County will remain in force for an extended period of time.

To ensure the safest environment possible, staff as well as students from kindergarten through transition (age 22) are required to wear a face covering in all outdoor areas and common spaces on campus. In the case of a mixed Transitional Kindergarten/Kindergarten (TK/K) class, the face covering policy should apply to every child in the class, regardless of specific age.

Per San Mateo County’s Health Officer, a “Face Covering” means a covering made of cloth, fabric, or other soft or permeable material, without holes, that covers only the nose and mouth and surrounding areas of the lower face. A Face Covering may include a scarf or bandana or a homemade covering made from a t-shirt, sweatshirt, or towel, held on with rubber bands or otherwise. A face-covering should not be medical-grade or use a valve device. A “Face Covering” should be considered essential clothing that is laundered at home by hand or machine washing and worn to school each day.

Face Coverings: School Practices

- Although the safe return to on-campus learning requires that students and staff alike wear face coverings while on campus, CDC guidelines indicate face coverings should not be placed on anyone who has trouble breathing, or is unconscious, incapacitated, or otherwise unable to remove the face covering without assistance. People with autism or other sensory processing disorders may not be able to safely wear a face covering.

- Unless compromised as described above, students from kindergarten through twelfth grade, students in transitional programs, all staff, and all campus visitors must wear a face covering to school, while walking across school grounds, and in common areas of the campus.

- Wearing a face covering in the classroom is highly encouraged for students and staff alike, although some children may not have tolerance for wearing the face
covering over the long duration of a school day. Staff who work in close proximity with students whose special needs require feeding, toileting, and performing nebulizer treatments are recommended to wear a face shield for additional protection. Otherwise, there should be no substitutions or alternative equipment used for face coverings.

- Teachers are encouraged to develop activities and classroom protocols to help students understand the rationale for wearing face coverings and to develop classroom culture that supports face coverings. Teachers are also encouraged to follow an incremental implementation for wearing face coverings during class time. The suggested implementation is below:
  - 25% of instructional time: TK/Kindergarten students
  - 50% of instructional time: First grade students
  - 75% of instructional time: Second grade students
  - 90% of instructional time: Third – twelfth grade students

- For instructional purposes, teachers may work with students side by side as necessary, as long as both student and teacher are wearing a face covering.

- All staff should use cloth face coverings unless Cal/OSHA standards require respiratory protection. Teachers can use face shields, if available, which enable younger students to see their teachers’ faces and to avoid potential barriers to phonological instruction. Face shields should include a cloth drape attached across the bottom and tucked into the shirt.

- Microphone systems are available to assist teachers and staff who wear a face covering in the classroom while teaching. See here for a sample system.

- Additional guidance on face coverings is available from Minnesota’s Department of Public Health: Masking Recommendations for Child Care and Schools

Some staff members may not “believe” in the efficacy of face coverings to slow the spread and resist the requirement. Likewise, some students may struggle acclimating to a face covering and become overly distracted as a result. Despite these factors, wearing face coverings is strongly endorsed by the seven Bay Area health officers who are collaborating on regional decision making in the COVID-19 pandemic, and there is widely accepted research that wearing a face covering is highly effective in reducing community spread of COVID-19.
Atul Gawande, a surgeon and public-health researcher, recently reported in *The New Yorker* that, “an extensive review of the research from an international consortium of scientists suggests that if at least sixty per cent of the population wore masks that were just sixty-per-cent effective in blocking viral transmission—which a well-fitting, two-layer cotton mask is—the epidemic could be stopped. The more effective the mask, the bigger the impact.”

**Pillar Three: Physical Distancing**

According to the [Centers for Disease Control and Prevention](https://www.cdc.gov) (CDC), *Physical Distancing* is one of the most effective tools to avoid exposure to the COVID-19 virus and slow its spread. Proper physical distancing requires people to stay at least six feet (or two arms’ length) away from other people, avoid gathering in groups, and stay out of crowded places. Accomplishing physical distancing in a school requires a number of planning assumptions that must be addressed in the return to school plan. These assumptions include:

- Physical distancing reduces the number of in-person contacts per teacher and is an essential practice in ensuring a safe school environment.

- All activities, instructional or otherwise, must support physical distancing and be implemented across the campus at all times.

- This framework provides a continuum of instructional strategies to support the most effective educational program for students and staff while following physical distancing requirements.

- School planning teams should identify all locations and times of day where students are in close contact and develop strategies to reorganize those locations and activities to maintain students at six feet apart. School modifications may include altering bell schedules, staggering start times, implementing a block schedule, creating multiple recess and lunch periods, and creating multiple meal distribution points to reduce student movement during the day and cross contamination of classrooms.

- Preschoolers and early elementary grade students will need extra support to learn and follow physical distancing protocols.

- Consider assigning restrooms to specific classes in alignment with campus layout.
Physical Distancing: Cohort Models

Bubble Cohort

The Bubble Cohort follows the current state and county guidelines for emergency child care which require that a group of no more than 12 children, plus classroom teachers and assistants, exist within a defined location with no mixing between any other groups or individuals for a period of three weeks. Teachers and staff must remain solely with their Bubble Cohort, and if a child is absent, their space may not be filled by another child new to the cohort. If a bubble is intact, then children do not need to wear face coverings or practice physical distancing; children may engage with each other as in typical play.

The Bubble Cohort is most readily applicable to early learning and childcare settings, but may also serve as an effective model for students with special needs whose smaller personalized settings and instructional support teams can function as a Bubble Cohort with reduced risk of infection.

Stable Cohort

A Stable Cohort refers to a defined group of students whose size is dictated by the ability to implement physical distancing within the classroom or primary learning setting. When creating around the Stable Cohort, think about halves. Reduce mixing by half. Plan for half a class of students or half the student body on campus for in-person learning at a time.

Like a Bubble Cohort, a Stable Cohort aims to minimize mixing of the group members with others, but allows for necessary and practical considerations in a student’s educational program.

For example, a Stable Cohort may have more than one teacher during the instructional day, and students, though assigned to a particular area of campus, may move to classrooms as necessary to access required courses. The intent of the Stable Cohort is to create as stable an environment as is practicable by reducing numbers of students and the movement of students across campus.

School leaders might consider assigning students to use a specific restroom facility that may also be shared with a limited number of other stable groups. In the Stable...
Cohort model, service providers and specialists may use outdoor learning spaces for one-on-one or small group work, or the plan may choose to rely on a strict cleaning protocol between sessions if the specialist works with students one-on-one in designated learning spaces. Implementing a strong Stable Cohort model requires adherence to the Four Pillars and a commitment to the overall health and safety of the entire student body.

<table>
<thead>
<tr>
<th>Bubble</th>
<th>Stable</th>
</tr>
</thead>
<tbody>
<tr>
<td>12 Students</td>
<td>About Half</td>
</tr>
<tr>
<td>No mixing for a period of three weeks</td>
<td>Reduces mixing as much as is practical</td>
</tr>
<tr>
<td>No physical distancing or face coverings required</td>
<td>Physical distancing and face coverings required</td>
</tr>
<tr>
<td>Allows for effective contact tracing and response in event of positive COVID-19 case</td>
<td>Still enables contact tracing, though not as cleanly</td>
</tr>
</tbody>
</table>

Physical Distancing: Review and Restructure Activities

As COVID-19 remains a concern to our community, activities will need to be restructured to provide for physical distancing and minimizing the use of shared objects. A methodical approach to identifying and evaluating these activities in advance is required and should address the following:

- Establish the criteria that will be used to evaluate and restructure activities, including those before, after, and during school hours.

- Analyze all aspects (practices, locker rooms, transportation, contests/performances) of each program to determine where/when physical distancing will be a problem.

- Where possible, develop adaptations to include physical distancing.
• Consider marking off designated space for the teacher in the classroom and do not allow students in this teacher area.

• When necessary, develop alternative practices and contests using components of the original activity.

• Where possible, consider virtual contests/performances as an alternative to events that require travel.

• Consider adding digital or electronic extracurricular programs to engage more students.

Extending a Cohort to Transportation

Physical distancing protocols also apply to home-to-school transportation. Both the Bubble Cohort and the Stable Cohort concepts can be extended to the bus, but not at the same time. (See Transportation Guidelines) Guidelines for transportation are being developed and vetted by the health officers.

Physical Distancing: Logistical Considerations

• Lower student/teacher ratio as much as possible.

• Use floor markings or visual cues to demonstrate physical spacing.

• Consider closing off common spaces like the library, technology lab, or cafeteria or developing a cleaning protocol between rotation of classes.

• Organize common areas for staff gathering that meet physical distancing requirements.

• Utilize outdoor space for instructional purposes whenever possible.

• Use multiple entrances into the school to avoid crowding at a single point of entry; ensure daily health screenings occur inside the classroom or at each entry point.

• Consider delivering meals to classrooms or to designated outdoor areas on campus for each class where students will be eating in order to reduce mixing of students.

• Consider using privacy boards or clear screens.
Pillar Four: Limiting Gatherings

Because COVID-19 is primarily spread from person to person, it is essential to limit gatherings of people. Note, the instruction of students at school is not considered a gathering. The following are considerations for limiting and/or finding alternatives to gatherings.

- Identify “Required” vs “Not Required” school activities and develop policies that align with a step-by-step approach.
- Acknowledge that activities deemed “Not Required” also play an important role in serving the social, emotional, and mental health needs of students and may be supported through remote models.
- Consider ways that technology can be utilized to support drama, music, and other performance-based activities.
- Plan for staff and other meetings to be held remotely.
- Until a vaccine is introduced, large-scale events that bring together crowds of people will not be possible.
- Establish policies for extracurricular and athletic activities that follow the step-by-step approach to allowing close-contact sports, equipment sterilization, and the allowance of spectators based on CDC and local health department guidance and the determinations of state agencies like California Interscholastic Federation (CIF).
- Limit Physical Education to noncontact activities that do not require shared equipment and can be conducted with required physical distancing

Four Pillars and Outside Organizations

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.
C. Testing and Contact Tracing

Schools are not expected nor allowed to diagnose or treat students or staff for any medical condition, including COVID-19. Local health officials will provide guidance and support to individuals within a school community who test positive for COVID-19. Additionally, local health officials will conduct contact tracing to help identify individuals who may have been in close contact with a confirmed case per CDC Guidance.

- **Testing**
  According to the California Department of Public Health (CPHD) readily available testing for COVID-19 can help protect vulnerable groups and help us understand the spread of COVID-19 in our communities. Beginning Monday, May 18, Verily expanded the number of COVID-19 testing sites it operates in San Mateo County.

  Testing is free and available without restriction to anyone, though an appointment is required in advance. The County of San Mateo aims to administer about 1,200 tests per day, through hospitals, private testing companies, and the free program available through Verily.

Testing and Contact Tracing

Case, Contact, Contacts to Contact

Public health uses the words Case, Contact, and Contacts to Contact to mean the following within a pandemic context, which applies to the current COVID-19 situation:

- **Case:** A Case refers to a person who tests positive
- **Contact:** A Contact refers to a person who has come in close contact with a Case
- **Contacts to Contact:** Contacts to Contact are people who may have been in proximity to a Contact
Cases and Contact Tracing in the School Community

In general practice, if students, teachers, and staff present with symptoms of fever and/or respiratory infection, send them home immediately. Separate them from others in an isolation space or “sick room” established on campus until they go home.

When a school has a confirmed Case: San Mateo County Health recommends school administrators take the following steps if one student, teacher, or other staff member is confirmed positive for COVID-19:

- Provide the district/school leader with a formal exposure notice
- Work with the infected individual to confirm they are under medical care and have a plan to self isolate according to County Health’s protocol
- Confirm that other members of the household who are also part of the school community remain at home in self-quarantine per County Health guidelines
- Take immediate measures to sanitize and disinfect the school property impacted by the case
- Determine whether cleaning measures can be implemented without temporarily closing the school campus or if temporary closure is necessary
- Consult with County Health officials if needed
- Communicate with the school community that a confirmed Case has been identified and outline the actions being taken to ensure a safe return to school
- Maintain privacy of health and medical information for all individuals at all times per the ADA and FERPA laws
- Once steps of the protocol are completed, resume school operations

When a school community has a confirmed Contact: San Mateo County Health recommends school administrators take the following steps if one student, teacher or staff member is confirmed to have been in direct and close Contact with someone who is confirmed positive for COVID-19:

- Work with the County Health and the Contact Tracing team to confirm the Contact will remain at home in self-quarantine per County Health guidelines
• Take immediate measures to sanitize and disinfect the school property impacted by the Contact
• Determine whether cleaning measures can be implemented without temporarily closing the school campus or if temporary closure is necessary
• Consult with County Health officials if needed
• Communicate with the school community that a confirmed Contact has been identified and outline the actions being taken to ensure a safe return to school
• Maintain privacy of health and medical information for all individuals at all times per the ADA and FERPA laws
• Prevent discrimination against students who (or whose families) were or are diagnosed with COVID-19
• Once steps of the protocol are completed, resume school operations

When a school community has individuals who suspect they may be Contacts to a Contact: San Mateo County Health recommends the following steps:

• The school principal or district administrator should gather enough information from the individual to confirm their status as a Contact to a Contact
• Advise the individual identified as a Contact to Contact to continue practicing hygiene protocols and to closely monitor their health, staying alert to onset of fever or flu-like symptoms
• If the person is not feeling well or is experiencing cold, flu, or other symptoms, they should stay home from school or work and contact their primary care provider

Send students, teachers, and staff who present with fever and/or respiratory infection symptoms home immediately. Separate them from others until they go home. When feasible, identify a “sick room” through which others do not regularly pass.

Communication Structure
The communication structure in the appendix has been developed with San Mateo County Health to manage communication between schools and the health department.
concerning cases of COVID-19 in school communities. Please note that due to the volatile nature of COVID-19 and the possibility of community disruption, this reporting structure supersedes the usual protocol for reporting on communicable diseases within the school community.

D. Health and Safety Considerations for Staff

Although evidence indicates that children and young adults have less risk of COVID-19 infection, there remains some measure of risk to adults who return to work and community. In order to ensure the safest working environment possible for school employees, collaboration with employee associations when developing plans is critical. Safe practices should be implemented for all school employees, including custodians, school nurses and health aides, food service workers, support staff, paraeducators, bus drivers, teachers, administrators, and others.

Additionally, expect partner agencies such as bus vendors to be able to produce documents outlining their cleaning/disinfecting protocols, and screening of drivers.

The San Mateo County Pandemic Recovery Framework for Schools identifies safe conditions for reopening schools and offers example scenarios for how schools can provide a continuum of learning models to meet student learning needs and leverage staff skills; reflects health conditions as understood and determined by San Mateo County Health officials and is clear on the hygiene measures necessary for keeping children, students and staff safe and healthy; and describes the necessary Essential Protective Equipment (EPE) as recommended by CDC and local health officials and clarifies the implementation of procedures across the campus and throughout the school day.

Guiding Questions for Staff Collaboration and Planning

- What support and training will be available to guide how teachers maintain classroom cleanliness throughout school day?

- Considering schools are likely to develop blended instructional models including distance learning at scale, how might teachers uniquely engage learners—calling students by phone, sending tutorial videos, and allowing students to demonstrate understanding of content through varied methods?
● How will the availability of local testing, including antibody tests, play a role in strengthening employee confidence about their own personal health status?

● Under what conditions might California Government Code, Sections 3100 – 3109 be invoked directing public employees to serve as Disaster Services Workers “subject to such disaster service activities as may be assigned to them by their superiors or by law.”

● Will you offer teachers and staff timely, factual information regarding safe work conditions through training provided by district nurses, county office of education staff, or through resources provided by San Mateo County Schools Insurance Group (SMCSIG)?

● Consider having site administrators consult district or county nursing staff to develop and implement procedures to send sick persons home from school, including notifying the individuals with whom the ill employee had contact and ensuring cleaning and disinfecting areas used by the ill employee.

● Will site administrators develop a flowchart that clearly maps the accommodation procedures in the event an employee does not want to leave home isolation?

● How will the community impact of COVID-19 influence staff shortages, employee absences, resignations, retirements, and needs for increased wellness and mental health services?

● What process will be used to determine how employees working remotely are assigned?

● How will you plan for “Specialist” teachers who work with groups of students in subjects such as art, music, library, and PE, etc. to interact or instruct students in outdoor settings or through remote instruction?

● How will you plan for support and intervention teachers, such as reading specialists, physical therapists, speech therapists, etc., to work with individual students in outdoor spaces? Or, if they must be indoors, plan for them to provide instruction from behind a plexiglass barrier and wear a face covering unless it interferes with teaching and learning.

● Who will serve as 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. 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.
IV. District Planning Considerations

School district leaders will plan, coordinate, and lead the local district process to launch a safe and smooth opening to the 2020–21 school year. These considerations address attendance, nutrition services, transportation, and other key steps for safely and smoothly reopening schools.

A. Attendance

- Some parents may choose to keep their students at home and participate in distance learning programs as it is perceived as a safer and more stable alternative to classroom-based instruction while COVID-19 is in circulation.

- In an effort to serve all students, schools may choose to offer a continuum of learning options that includes on-campus instruction, at-home learning, or a hybrid of both.

- Depending on the learning models adopted in the school, district administrators should assess, update, and communicate any student enrollment or attendance policy changes.

- Despite all safety measures in place, student and employee attendance rates are likely to decline in 2020–21. Reduced enrollment makes physical distancing more possible.

- Students and staff who become infected with COVID-19 and those who are directly exposed, may miss two or more weeks of school during the required quarantine and recovery. In some households, children may miss school for an extended period if the virus spreads through the family household.

- Fear and rumors are also likely to negatively impact student and employee attendance rates reinforcing the importance of parent and family education about how COVID-19 spreads in a community.

- Temporary employees, including substitutes, may be in more demand as employee absences rise. It is important these staff members receive training in school mitigation strategies and health protocols.
B. Nutrition Services

- School nutrition programs will be needed by more students and will represent a more significant portion of their food intake.

- Accommodations to provide continued access to meals for children who are ill or required to self-isolate may be necessary if COVID-19 is uncontrolled.

- If shelter-in-place orders are in place, consider using bus services or other district transportation resources to provide meals if deemed necessary.

C. Transportation

- Under the restricted conditions necessitated by physical distancing, SamTrans may be limited in its ability to provide school transportation during the 2020–2021 school year.

- Under these restricted conditions, there may be more expectations on parents to transport their students to school.

- Current physical distancing requirements require that a 40-foot long SamTrans bus be limited to eight to ten passengers.

- SamTrans Operations Planning requires all bell schedule change requests and other suggestions by the end of May or early June. SamTrans school-related service will aim to resume on August 3, 2020 or later.

- For school district-operated transportation, the pillars of COVID-19 safety including hygiene and cleaning, face coverings, and physical distancing should be strictly applied to the school bus environment.

- Bus drivers should practice all safety actions and protocols as indicated for other staff (e.g., hand hygiene, cloth face coverings). To clean and disinfect school buses or other transport vehicles, see the CDC’s guidance for bus transit operators.

- Further information about student safety and health on public or school bus transportation may be available through the recovery planning process conducted by San Mateo County and IEM Consultants.
• 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.

• School districts can encourage families and students who live within one–half mile of school to walk or bike to and from school. The SMCOE Safe Routes to School program has resources and support available to help schools in promoting and encouraging safe walking/rolling to school practices, such as implementing a Walking School Bus.

D. District Actions

School district leaders will plan, coordinate, and lead the local district process to launch a safe and smooth opening to the 2020–21 school year.

District Actions: Do First

• Launch a Return to School Committee and name a leader who is ultimately responsible for the outcome.

• The Return to School Committee should include staff who have oversight of the essential operations of the district including curriculum and instruction, facilities, human resources, technology, student services, business, preschool –if relevant, and student health and wellness, as well as a representative from each school in the district

• Meaningfully involve students and parents in the Return to School planning:
  - conduct virtual focus group meetings and/or surveys to better understand needs and concerns and to provide ongoing input
  - incorporate strategies to query all parents on family needs and then schedule students accordingly
  - strive to keep siblings on the same attendance schedule
  - be sensitive to childcare and transportation needs
  - work closely with bus service provider and consider providing communication support in order to build trust with families
  - empower and engage youth in problem solving and prevention work
• Designate a staff person to be responsible for responding to COVID-19 concerns (e.g., school nurse). All school staff and families should know who this person is and how to contact them.

• Develop plans to restore operations in phases that align with health conditions and orders. Returning to full operations will require careful identification of all activities typical of a regular school program and the order in which they should be implemented. Create timelines and communications plans to support each phase.

• Articulate a vision reflecting the district’s core values and community needs and communicate this vision with all district stakeholders.

• Define and assign roles and responsibilities of Return to School Committee members. This may include creating subcommittees to address various operations.

• Assess how external partners can best support the Return to School plan and develop strategies for collaboration and securing additional funding.

**District Actions: Do Before School Opens**

• Establish/reestablish a district-level Pandemic Response Committee and name a leader who is ultimately responsible for outcomes
  
  ○ The Pandemic Response Committee should include representative stakeholders, such as administrators, teachers, parents, and subject matter experts, and leaders of on-site childcare, preschool, and afterschool programs.
  
  ○ Define and refine the work plan of the Pandemic Response Committee including, operations, planning, logistics, and finance/administration.
  
  ○ Meet with key stakeholders to understand their expectations for return to school across issue areas (e.g., certificated and classified unions).

• Amend existing District Pandemic Response and Recovery Plans based on lessons learned from the March 2020 COVID-19 outbreak to inform responses to an anticipated second wave of COVID-19.

• Conduct scenario planning with the Pandemic Response Committee and Return to School Committee. Create and consider multiple scenarios
○ Example from Denmark: “Denmark reopened schools, for lower grades only, on April 15 after a four-week shutdown. There are only 10 students in a classroom, with just one teacher. Specialists, such as the art teacher, offer their lessons remotely via video chat. And just five children are allowed on the playground at a time.” (NPR)

**District Actions: Do When Schools are Open and Operating**

- Continue District Pandemic Response Committee workflows based on community pandemic-response alert level.
- Provide consistent updates on Return to School and pandemic response planning with community stakeholders.
- Conduct a debrief of the Return to School Committee’s work and codify recommendations for future planning.
V. School Site Planning Considerations

School site leaders have much to consider in preparing a safe and smooth opening to the 2020–21 school year. Consider the following while planning school site operations:

**Space**

- How can desks and learning centers be arranged in the classroom to meet physical distancing requirements? Arrange desks in a way that minimizes face-to-face contact.

- How should lockers be assigned or utilized?

- What procedures will ensure safe and healthy use of bathrooms?

- How can lunch rooms and outdoor eating areas be reconfigured to meet physical distancing requirements?

- How can staff lounges be reconfigured to ensure safe health conditions and meet physical distancing requirements?

- Determine distance and flow paths through the facility, mark flooring and walls with visual cues.

- Post signage displaying proper hygiene practices around campus, including restrooms.

- Install physical barriers, such as sneeze guards and partitions, particularly in areas where it is difficult for individuals to remain at least six feet apart (e.g., reception desks). These barriers do not protect against viral particulates.

- What elements must be in place for the school’s sick room to provide proper isolation and safety for all?

- Consider using outdoor space or existing school gardens to create outdoor classrooms. Outdoor spaces can provide added physical space, fresh air, and equitable access to the outdoors for students. Local resources are available to support this effort. More information can be found here or contact SMCOE’s Environmental Literacy and Sustainability Initiative.
Schedule

- Work with all bargaining units to agree on changes to start dates and times, etc.
- How will student arrival times be staggered?
- How will daily health screenings be integrated into the school day schedule?
- How will end-of-day dismissal be organized to ensure physical distancing?
- How will the daily schedule support safe implementation of brunch, lunch, and/or recess?
- Consider if additional time is necessary for passing periods, student breaks, or recess to accommodate all cohorts.
- Develop a daily schedule to minimize students mixing outside of their main cohort or group.

Visitors

- Limit nonessential visitors, volunteers, and activities involving external groups or organizations – especially individuals who are not from the local geographic area.
- Consider requiring all visitors, including parents to remain outside school buildings through early phases of reopening.
- Pursue virtual activities and events in lieu of field trips, student assemblies, special performances, school-wide parent meetings, and spirit nights, when possible.

Supplies and Cleaning

- What supplies should be on hand before students arrive?

Communication

- Develop a communication and outreach plan for students and parents.
- Provide clear information on any new academic and attendance policies for students, parents, and staff.
- Provide clear and repetitive communication on proper hygiene techniques for teachers, staff, and students.
- 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.

Classrooms

- Consider providing individually assigned bins for student supplies.
- 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.
- Consider how to use outdoors or larger spaces such as gymnasiums, auditoriums, and lunchrooms for additional learning space.
- Consider how specialist teachers (e.g., music, art, physical education) can provide instruction to student groups through remote means.
- Consider utilizing outdoor/open air spaces for providing individualized intervention and support services to students, including unique special education services.
- Implement procedures for turning in assignments to minimize contact.

Training

- Provide training to all staff on supporting students’ mental health.
- Prioritize professional development on skills relevant to distance learning.
- Consider conducting staff meetings virtually or in a large enough space to accommodate physical distancing.
- Provide training to all staff on proper cleaning, disinfecting, and sanitizing.

Physical Education and Athletics

- Deliver physical education instruction remotely or through individual workouts, but ensure there is no sharing of equipment.
- Consider competitive sports that allow physical distancing, especially in the first weeks after returning to school.
VI. Continuum of Learning Options

Districts may consider developing a continuum of options for blending on-campus and at-home learning as an alternative to school closures. The following are possible models for student learning that are based on current conditions and information available at this time. Each district will need to develop its own plan, taking into account all health and safety conditions outlined in this framework.

A. Instructional Models

Explore and understand the following menu of learning structures and then select and combine structures to create multiple options for meeting students’ learning needs:

- At-School Learning
- Digital Synchronous – Learn online together
- Digital Asynchronous – Learn online independently
- Phone Synchronous – Learn together on the phone
- Phone Asynchronous – Learn offline independently
- Independent Study
- HomeSchool – Districts that do not currently run a Home School program can use CDE models
- Hybrid/Blended Learning – Learn online together and work offline independently
- Extension
- Learning Center – Supports student learning via virtual appointments

B. Structures that Support the Continuum of Learning

District and school leaders must balance an array of factors and conditions to determine the most effective instructional models for their students and school community. Districts may develop an alternative or blended model that conforms with physical distancing standards set by the County Health Officer. Considerations are summarized below.

Schedule Considerations

- Limit schedule variances within the district. Avoid having schools in the same district establish different schedules.
Consider partnerships between elementary and high school districts with local childcare centers to align schedules and services.

Attempt to create schedules that can accommodate smooth transitioning to 100% in-person or 100% at-home learning.

Select schedules that support students’ academic, behavioral, and social-emotional success.

Consider schedules that support re-teaching and remediation.

Schedule Options

- Staggered starts
- A/B groupings or alternating days
- Block scheduling
- 4x4 block schedules; 3x3 block schedules
- Pair middle and high school schedules
- Integrate multiple lunch, brunch, and recess times into the school day
- AM/PM splits (requires deep cleaning each day between AM/PM sessions)
- AM or PM in-person learning with other half of day for distance learning/instruction

Space Considerations

- Assess classroom/learning space square footage
- Consider how to utilize common spaces to support learning
- Consider how to utilize outside space to support learning
- Ensure physical distancing in all settings
- Use visual reminders/markers to support physical distancing
- Assign seats to students to ensure physical distancing

Ways to Limit the Number of Students on Campus

- Alternating days
- Staggered start/end time
- Hybrid blend of in-school and at-home learning
C. Design Options to Support Learning for TK-12 Settings

- **Option One:**
  - Limit the number of students on campus to 50% of typical enrollment.
  - Divide all classes into two equal groups and schedule groups to attend in-person learning on alternating days in the week.
  - Provide each group with two days of direct instruction and support, and three days of assignments/activities to complete at home each week.
  - Provide take-home meals for each eligible student before they leave each day.

- **Option Two:**
  - Limit the number of students on campus to 25% of typical enrollment.
  - Divide all classes into four equal groups – one for each day of the week.
  - Provide each group with one day of direct instruction and support and four days of assignments/activities to complete at home.
  - Provide take-home meals for eligible students before they leave each day.
  - Use Fridays for teachers to provide individual or small-group support by appointment or to prepare packets for the next week.

- **Option Three:**
  - For districts that can provide universal internet access, pair Option One or Option Two with a classroom webcast to provide direct instruction five-days per week.

- **Additional Options**
  - For students who are best served through an at-home learning model and for teachers who are qualified to teach distance learning, develop a robust distance learning curriculum, provide ongoing professional development, and build out family engagement and support strategies.
  - Districts may opt for an AM/PM minimum-day schedule with a waiver filed with CDE to waive the state minimum number of minutes.
  - Districts may opt for a blended learning program that alternates students between on-campus and distance learning each day/week.
○ Consider the use of learning centers to support student learning with weekly in-person and virtual appointments for support.
○ Develop the capacity to provide Home and Hospital Instruction (EC 48206.3) via remote technology to assist students who are ill, under quarantine, or in self-isolation.
○ Develop the capacity to provide synchronous interactive distance learning as a means of providing instruction for students who cannot physically participate in classroom instruction.

● Independent Study
  ○ Develop robust independent study (IS) programs as an alternative for parents who want this option. Include a variety of options that allow IS students to participate in campus life.
  ○ Consider a countywide program operated by SMCOE to consolidate outlay of resources.

● Grade Span Planning
  ○ For districts with preschool programs, consider whether the schedule will be the same as that of school-age students.
  ○ For high school students, encourage dual enrollment in college and community colleges.
  ○ For high school students, consider different attendance policies for ninth and tenth graders vs eleventh and twelfth graders.
  ○ In high school settings, consider online instruction for ELA, Math, History, etc. and hold activity and intervention classes on-campus.
VII. Serving Students with Special Needs

District and special education administrators should work together with families of students with special needs. In this COVID-19 environment, the Least Restrictive Environment (LRE) might look different for different students. District teams may consider alternative settings located away from the central campus that may support classrooms with sinks, bathrooms, and unfettered access to outdoor areas. Such environments may also support students who are immunosuppressed or have significant health challenges.

Supporting Students with Fragile Health

It is critical to consider the needs of students with fragile health during return-to-campus planning. School teams should:

- Be vigilant about identifying these students’ needs at the start of the planning process.
- Consider whether in-person or at-home learning best supports a student’s needs.
- Support special education staff by providing additional EPE such as gowns for diapering and feeding, face shields, and access to sinks with hot and cold water.
- Train staff in the proper use of EPE and health and hygiene protocols within the context of COVID-19.
- Engage school/district nurses in supporting student learning plans and needs.

Supporting Students with Limited Communication and/or Moderate–Severe Disabilities

School staff should consider the use of icons and social stories that can be loaded on an iPad in multiple languages for digital access or printed to educate students about the Four Pillars and the context around modified school operations.
VIII. Mental Health Supports

Students and staff may return to school having experienced some type of loss due to COVID-19 or as a result of sheltering in place. It is important for school staff to be aware of the various types of trauma students and staff may be experiencing, how that trauma might manifest itself in words or behavior, and how to best support students and other school staff experiencing mental health challenges.

Types of Trauma
Large scale disasters, such as a global pandemic, can cause trauma in students even if they are not directly affected by a COVID-19 death. The loss of connection with school and peers, for example, can impact a student negatively. Students’ families may have experienced the loss of financial stability or housing during the shelter in place. Even the loss of opportunities for learning may cause students stress and anxiety, resulting in trauma symptoms.

Recognize the Signs
Well-informed teachers and school personnel can be a source of support for students and each other. Recognizing signs of stress in students, colleagues, and one's self can help facilitate the healing process after a disaster or traumatic event.

School counselors, school nurses, school psychologists, and school social workers can help teachers identify risk factors and signs of distress that may indicate the need for mental health services above what is offered at school. As with any counseling services, parents should be notified if additional services are recommended.

Please see the companion document, Mental Health Supports for Students and Staff Returning to School During or after a Pandemic, for more information.
IX. Parent Engagement, Education, and Communication

There will continue to be a broad spectrum of opinions in the community regarding government and school responses (from overreacting to under reacting) to COVID-19. To help address the fears and lack of information that may underlie these opinions, consider taking the following steps:

- Survey parents on preferred learning options for their students. Inquire about willingness to return children to campus or keep them at home. Provide information on school’s plans that addresses concerns identified.

- Engage in a robust information campaign on school/public health issues, including well-child checks, immunization requirements for school enrollment, and flu vaccination as a proactive measure parents and employees can take to lessen the likelihood of school closures due to the combined impact of seasonal influenza and COVID-19.

- Encourage the school PTA to support communication and outreach efforts.

- Consider providing parent education in multiple languages in order to better support distance learning and social emotional health for students.

- Develop a proactive communications plan:
  - Provide regular communication to families.
  - Consider the needs of dual language learners and families with low-literacy rates when developing family communications.
  - Use simple language, key message bullets, and clear formatting that highlights key information.
  - Consider providing a way for families to access information through recordings via school messenger systems, etc.
  - Create and share timelines for expected communication.
  - Use a consistent messaging format.
  - Use a variety of communication tools (email, texts, social media) to direct parents to a website or other official source of information.
  - Define and use common terms, while avoiding acronyms and jargon.
  - Manage expectations.
- Promote ways for parents to engage virtually (e.g., evening Zoom meetings).
X. School Board Leadership and Policy Considerations

Board-Level Actions
School district governing boards play a critical role during any emergency event. In a pandemic recovery, these duties may include:

- Developing policies (grades, graduation, promotion, retention, instructional days, instruction minutes, period per day, etc.)
- Advocating for resources and support for the district
- Supporting staff decisions
- Maintaining clear boundaries between board and staff roles
- Staying informed (e.g., reading board packet, minutes, weekly communication, etc.)
- Ensuring school policies are supportive of students and staff staying home when sick and offer options for people who are at high risk of developing serious symptoms associated with COVID-19
- Exploring opportunities for staff who cannot be at school due to their own high-risk conditions or those of their family members to complete work utilizing alternate spaces (e.g., telecommute)

Needed Board Policies
Governing boards should also take time to review and update policies as needed, including the following:

- Board's privacy policy
- Policies concerning annual physicals and vaccinations
  - Local pediatricians and the County Health Officer have requested schools relax the annual student physical requirements to reduce the burden on the healthcare system during the COVID-19 health emergency.
  - Student health/dental screenings and proof of immunizations are still required for school enrollment. However, electronic records may be submitted to reduce the impact to the healthcare system.
School Board Leadership and Policy Considerations

- A physical once every two years is sufficient for children and teens who are otherwise healthy. This is in accordance with current American Academy of Pediatrics guidelines. Consider a COVID-19–based waiver or change of timeline.

- An in-person physical is not required to allow students to participate in school athletics. A district may accept a healthcare provider’s certification that a student is cleared to participate in school athletics even if the appointment was conducted through tele-medicine. However, CIF still requires an annual physical.

- In early June, CIF will issue a 60–day waiver of the annual physical requirement, allowing students to begin playing school athletics for up to 60 days before submitting proof of an annual physical.

- Liability considerations
  - There is no course of action that will guarantee a district will not experience COVID-19 related claims by employees, volunteers, students, or members of the public.
  - Legislation is anticipated in the next year that creates highly specialized liability rules for exposure–related claims. It is expected to extend more protection to school districts.
  - The best protection from COVID-19 related claims is strict adherence to regulations and guidelines issued by local health officials. Any departure from those guidelines can be leveraged as evidence that the district violated its own established standard of care.
Appendix

Communication Structure

Glossary

Sources

SMC Pandemic Recovery for Schools Framework Companion Documents

- Cleaning and Disinfection Procedures Manual
- Mental Health Response and Recovery Plan [to come]
Communication Structure

The communication structure to the right has been developed with San Mateo County Health to manage communication between schools and the health department concerning cases of COVID-19 in school communities. Please note that due to the volatile nature of COVID-19 and the possibility of community disruption, this reporting structure supersedes the usual protocol for reporting on communicable diseases within the school community.

Do not skip steps in the structure in either direction unless they are not relevant given district size or type of school (e.g., private, charter).

To facilitate communication along the structure, post FAQ and make available for all school and district members of the communication structure. Continue to add new questions and answers to the school or district FAQ.

Encourage parents, teachers, and other community members to follow this structure as it provides for a faster response than reaching out to San Mateo County Health directly. The Health Office directs questions it receives about schools to the San Mateo County Office of Education.
Sample message to a school community when a student, teacher, or staff member has been identified as a case.

Dear members of the ### school community,

We have learned that a staff member/student of ### school has tested positive for COVID-19. The staff member/student did not display any symptoms of illness while on campus.

While we know this news can be concerning, I wanted to reassure you that we are following our established protocol for addressing cases in the school community, which includes the following:

- We/County Health have been in touch with those people who are considered contacts of the individual with COVID-19 and those individuals have been instructed to self-quarantine for 14 days.
- [Outline cleaning routine followed and other steps in district/school’s response protocol.]
- [Provide information on schedule changes – closing/reopening for cleaning.]

Consistent with privacy laws and our own policies, we are not able to share more specific information concerning the individual who has tested positive. As members of a compassionate and caring community, I ask everyone to respect each other’s privacy, especially around health information.

Finally, there are concrete things we all can do to keep ourselves and families healthy and safe: practice good hygiene, wear face coverings and practice social distancing when outside of your home, and avoid public gatherings. [Share a link or page with guidance on each of these]

Thank you for your continued support.

Sincerely,

xxxxx
**Glossary**

**Bubble Cohort:** Following state and county guidelines for emergency child care, a group of no more than 12 children, plus classroom teachers and assistants, that exists within a defined location and does not mix with other groups or individuals for a period of three weeks. Teachers and staff must remain solely with their Bubble Cohort, and if a child is absent, their space may not be filled by another child new to the cohort. This is the highest level of restriction in a childcare or school setting.

**Case/Contact/Contacts to Contact:**
- **Case:** A person who tests positive for a disease.
- **Contact:** A person who has come in close contact with a case.
- **Contacts to Contact:** People who may have been in proximity to a contact.

**Cleaning:** The removal of dirt and impurities, including germs, from surfaces. Cleaning alone does not kill germs. By removing the germs, cleaning decreases their number and therefore reduces the risk of spreading infection.

**Community facilities:** Schools, daycare centers, and business properties that comprise most non-healthcare settings visited by the general public outside of a household.

**Disinfecting:** The use of chemicals, for example EPA-registered disinfectants, to kill germs on surfaces. Disinfecting does not necessarily clean dirty surfaces or remove germs. But killing germs remaining on a surface after cleaning further reduces the risk of spreading infection.

**Essential Protective Equipment:** Sometimes referred to as "EPE", equipment worn and used to minimize exposure to hazards that cause serious workplace injuries and illnesses. In response to COVID-19, essential protective equipment may include items such as face coverings, gloves, handwashing supplies including hand sanitizer, and safety glasses for some workers. Sometimes referred to as PPE.
**Face Covering:** a covering made of cloth, fabric, or other soft or permeable material, without holes, that covers only the nose and mouth and surrounding areas of the lower face.

**Fomites:** Objects or materials that are likely to carry infection, such as clothes, utensils, and furniture.

**Herd Immunity:** A situation in which a sufficient proportion of a population is immune to an infectious disease (through vaccination and/or prior illness) to make its spread from person to person unlikely. Even individuals not vaccinated (such as newborns and those with chronic illnesses) are offered some protection because the disease has little opportunity to spread within the community. Also known as community immunity.

**Stable Cohort:** A defined group of students whose size is dictated by the ability to implement physical distancing within the classroom or primary learning setting. A Stable Cohort aims to reduce mixing of the group members and staff with others, but allows for necessary and practical considerations in a student’s educational program.
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