

**San Mateo County Coalition  
for Safe Schools and Communities**

# **Pandemic Recovery Framework**

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

**September 15, 2020**



**Coalition for  
Safe Schools &  
Communities**



**SAN MATEO  
COUNTY  
OFFICE OF  
EDUCATION**

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The Framework was developed in consultation with San Mateo County Health, and reflects the guidance in the California Public Health Department's (CDPH) Guidance for Schools, [COVID-19 Industry Guidance: Schools and School-Based Programs](#) as well as CDE's [Stronger Together, a Guidebook for the Safe Reopening of California's Public Schools](#).

# **San Mateo County Office of Education COVID-19 Response Team**

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*Please note: As conditions and public health orders change, the content and guidance in this framework may change as well.*

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## I. Laying the Foundation for Recovery

As COVID-19 took hold and spread within San Mateo County in March 2020, the county's Health Officer issued two orders that significantly impacted how schools operated. 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.

After the State approved its request for a variance on June 16, San Mateo County became eligible to move more quickly through Stage 2 of the [California Resilience Roadmap](#) and align itself with the State guidance.

On July 17, 2020, Governor Newsom set forth conditions for the reopening of schools as well as guidance on when school campuses that are open might close again to in-person instruction. This guidance was anchored to the state's monitoring list for counties. Counties placed on the monitoring list were required to conduct all instruction through distance learning until the county has been off the monitoring list for at least 14 days.

On August 28, 2020, Governor Newsom released the "Blueprint for a Safer Economy," which replaced the monitoring list structure with a four-tiered, color-coded system that tracks counties by the number of COVID-19 cases recorded each day and percentage of positive cases out of the total number of tests administered, both averaged over seven days.

Despite these requirements, districts and schools serving students in TK-6th grade may pursue a waiver with local and state health authorities if the school or district has a clearly developed plan that implements the Four Pillars and addresses other local and state requirements. A waiver may only be granted if it is requested by the superintendent (or equivalent for charter or private schools), in consultation with labor, parent, and community organizations. County health officials must review local community epidemiological data, consider other public health interventions, and consult with the California Department of Public Health (CDPH) when considering a waiver request.

This Framework reflects California's current health orders and guidance as provided by CDPH and the California Department of Education (CDE).

## A. State Indicators for Reopening

Based on the premise that COVID-19 will pose the threat of community spread for the foreseeable future, the Governor provided six key factors that will guide state level decision making at the state level. Three of these six factors are particularly relevant to schools:

- 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 August 28, with the release of the “Blueprint for a Safer Economy,” schools and school districts may reopen for in-person instruction at any time if they are located in a local health jurisdiction (i.e. San Mateo County) that has been in the red-colored tier for a minimum of 14 consecutive days. As stated above, if the county is in the purple, or most restrictive tier, a waiver may be granted by the local health officer for elementary schools to open for in-person instruction.

In making a decision about which colored tier a county falls, the State will consider data around the following metrics:

- New cases over seven-day average per 100,000
- Positivity rate

County Risk Level	New Cases	Positive Tests
<b>WIDESPREAD</b> Many essential indoor business operations are closed	<b>More than 7</b> daily new cases (per 100k)	<b>More than 8%</b> positive tests
<b>SUBSTANTIAL</b> Some non-essential indoor business operations are closed	<b>4 - 7</b> daily new cases (per 100k)	<b>5 - 8%</b> positive tests
<b>MODERATE</b> Some indoor business operations are open with modifications	<b>1 - 3.9</b> daily new cases (per 100k)	<b>2 - 4.9%</b> positive tests
<b>MINIMAL</b> Most indoor business operations are open with modifications	<b>Less than 1</b> daily new cases (per 100k)	<b>Less than 2%</b> positive tests

For more specific and up-to-date information, visit [California’s reopening data map](#).

# Laying the Foundation for Recovery

## Providing In-Person Targeted, Specialized Support and Services for Students at School

On September 4, 2020, the California Department of Public Health (CDPH) issued updated [cohorting guidance](#) to allow in-person child supervision and limited instruction, targeted support services, and facilitation of distance learning in small group environments for a specified subset or cohort of children and youth. The guidance applies to schools that cannot reopen for in-person instruction because their county is in Tier 4 – Purple (COVID-19 is widespread), and includes elementary schools in those jurisdictions that have not received an elementary school waiver through the local public health office.

Under this new guidance, schools can bring in students for in-person targeted, specialized support and services in stable cohorts when the school is able to satisfy all of the conditions detailed in the guidance, including limiting cohort size, restricting cohort mixing, and maintaining proper physical distancing, masking, cleaning and other safety measures. Schools bringing students back on campus in San Mateo County should follow the Four Pillars to ensure the greatest safety for students and staff.

Please note: The cohorting guidance is distinct from CDPH guidance authorizing schools serving students in TK-6th to apply for a waiver to reopen for in-person instruction. Schools that receive a waiver must adhere to the [industry guidance for K-12 schools](#), which is reflected in the Pandemic Recovery Framework, and any applicable order or directive of the local public health office.

## B. Targeted Audience for Framework

The primary audience for this Framework is local education agencies (LEAs) and private schools serving children in grades preschool to twelfth grade. 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](#) and the [Licensed Early Learning and Care Companion Document](#) associated with this Framework.

## C. Districts and Schools

School districts and school programs, including early childcare, must ensure that public health conditions as determined by local and state 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 the 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 and disinfecting practices as described in the Four Pillars
- 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 using 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

## D. 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.

## E. Focus on Equity

The COVID-19 pandemic has further exposed pre-existing and untenable inequities in California's education system that leaves 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

## Laying the Foundation for Recovery

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 conduct planning for return to school and continuity of learning in a way that prioritizes students with the most urgent needs.**

By implementing physical distancing on school campuses, it is unlikely that all students are 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.

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 care 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 and parents 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 families' multiple needs 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
- 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.

## **F. 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 regardless of whether that is at the start of the school year or at some later point.

## Laying the Foundation for Recovery

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 support the flexible delivery of education amid further possible restrictions to in-person learning 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, San Mateo County Health, and San Mateo County Counsel. Additional technical review was provided by San Mateo County’s Coalition for Safe Schools and Communities Steering Committee. The Framework is aligned with State and County orders as well as guidance provided by the California Department of Public Health and the California Department of Education.

### **G. 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 many Americans have followed strict guidelines including sheltering at home, nearly 100,000 Americans died from COVID-19 in the first five months of 2020. By mid-July, that number had climbed to more than 140,000.

Scientists continue to learn more every day about this virus, but what seems clear at this time is 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 included 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.

### **H. A Step-by-Step Approach**

Incremental implementation of the district's return to school plan is well supported by international examples and mirrors county and statewide processes for reopening society. These incremental steps provide a careful approach to returning students and staff to in-person learning. 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. An in-depth description of the framework steps is included in section III, **General Planning Assumptions**.

## 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, honor those boundaries, and trust and offer support to their partner agencies. This section reviews the scope of authority of various 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.

School district officials will follow state and local health guidance and data in monitoring the threat of COVID-19, promoting strategies to prevent disease transmission, and preparing and implementing modified school operations.

During a COVID-19 outbreak, the district will continue all prevention strategies and will take direction from the state and local health authorities 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 and at the direction of state and local public health authorities.

- **Public Employees are Disaster Service Workers**

California Government Code – [Sections 3100 – 3109](#) – compel all public employees, including school administrators, teachers, and classified staff, 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 these 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**

A sample COVID-19 mitigation board policy, which aligns with State guidance provided on July 17, 2020, [can be accessed here](#).

- **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.

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).



In a pandemic response, San Mateo County Health will be the lead local 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. California 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.”

Please note, 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. Given County Health's expanded contract tracing team and the continued interest in streamlining communication, SMCOE and San Mateo County Health updated the communication structure with schools beginning September 8. Schools with confirmed cases of COVID-19 in their school community will now contact County Health immediately and directly using a designated phone number that will be shared with school leaders for their use, or their designee's use, in reporting cases.

As part of this updated system, schools will continue to notify SMCOE of cases so that it can continue to serve as technical support to school leaders and maintain an understanding of the impact of COVID-19 in San Mateo County schools.

## 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 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.
- Providing guidance for the safe operation of schools.

### **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 planning and preparing 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 with modifications that implement the Four Pillars described in this Framework proceeding in 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

### State Four-Tiered Color System for Monitoring

On August 28, 2020, Governor Newsom provided an updated direction about the reopening protocols for businesses. This system was not directly aimed at campus reopening, but school decision-making was folded into the model.

This monitoring list narrows the metrics to two measures:

- Elevated Disease Transmission
  - Case rate per 100,000
  - Positivity rate

### State's Criteria for Closing a School Campus Once it is Open

The decision to close an individual school will be based on the number of cases in the

school and the percentage of the teacher/students/staff who are positive for COVID-19. It will be made following consultation with San Mateo County Health.

The closure of a school may be appropriate when there are multiple cases in multiple cohorts at a school or when at least 5 percent of the total number of teachers, students, and staff are identified as cases within a 14-day period, depending on the size and physical layout of the school. San Mateo County Health may also determine whether school closure is warranted for other reasons, including results from a public health investigation or other local epidemiological data.

Once closed, a school may typically reopen after 14 days and the following have occurred:

- Cleaning and disinfection
- Public health investigation
- Consultation with San Mateo County Health

### **State's Criteria for Closing School District Campuses Once Open**

The superintendent should close a school district if 25 percent or more of the schools in the district have closed due to COVID-19 within 14 days. This decision should be made in consultation with San Mateo County Health. The district may typically reopen after 14 days, but again, in consultation with San Mateo County Health.

Whether or not a school is open to on-campus learning, the Governor made it clear that the education of students is non-negotiable and schools would have to provide that education through whatever means available.

### **A. 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.

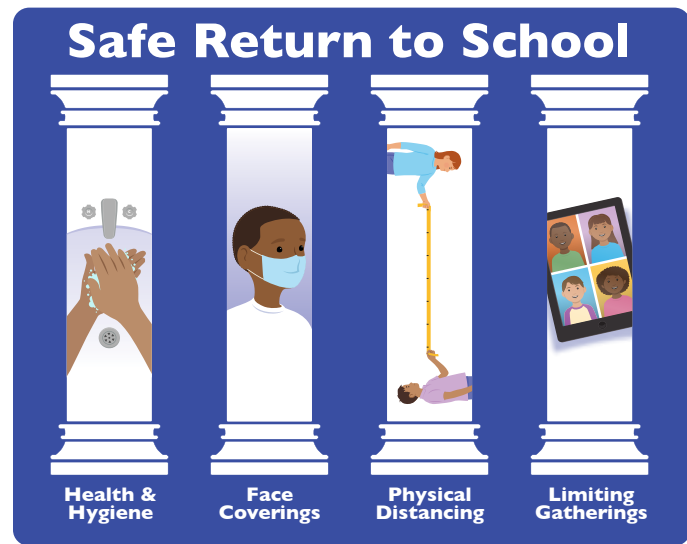
# General Planning Assumptions

## 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.
- Post signs at each school entrance instructing students, families, and staff not to enter campus if they have any COVID-19 symptoms.
- 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.
- Provide ethyl alcohol-based no-touch hand sanitizer that is at least 60 percent ethyl alcohol in each classroom, in any other indoor space used by



students or staff, at building entrances/exits, and at locations designated for students or staff to eat. Students under the age of 9 should use hand sanitizer only under adult supervision. If consumed, call Poison Control at 1-800-222-1222.

- Ethyl alcohol-based hand sanitizers are preferred and should be used when there is the potential of unsupervised use by children. Isopropyl hand sanitizers are more toxic when ingested or absorbed in skin. Do not use hand sanitizers that may contain methanol which can be hazardous when ingested or absorbed.
- Ensure adequate supplies to support healthy hygiene behaviors, including tissues, soap, no-touch hand sanitizers for staff and students who can safely use it, no-touch trashcans, and face coverings.
- Teachers should build classroom routines for handwashing upon entering and leaving the classroom and create regular cleaning practices for desks, equipment, writing utensils, and other classroom materials.
- Minimize staff's and students' contact with high-touch surfaces (e.g., by propping open building or room doors, particularly at arrival and departure times).
- Provide incentives (e.g., classroom recognition or special responsibilities) for proper and thorough handwashing 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.

### Check for Signs and Symptoms

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

## General Planning Assumptions

- Implement screening and other procedures for all staff and students entering the facility.
- Conduct visual wellness checks of all students or establish procedures for parents to monitor at home. If checking temperatures, use a no-touch thermometer.
- Ask all individuals if they or anyone in their home is exhibiting COVID-19 symptoms. See [San Mateo County Health guidance](#) for screening questions.
- Students and staff exhibiting symptoms of COVID-19 should not be allowed to enter the school campus.
- Document/track incidents of possible exposure and notify staff and families immediately of any exposure to a positive case of COVID-19 at school while maintaining confidentiality, as required under FERPA and state law related to privacy of educational records.
- Monitor staff and students throughout the day for signs of illness; send home students and staff with a fever of 100.4 degrees or higher, cough, or other COVID-19 symptoms.
- Educate families about COVID-19 related health protocols to conduct at home, including keeping students home when showing signs of illness.
- If a student is exhibiting symptoms of COVID-19, staff should communicate with the parent/caregiver immediately and isolate the student away from others while awaiting parent/caregiver pickup.

### Health and Hygiene Protocols: Temperature Taking

- Schools should implement policies and guidelines for health checks, including temperature taking for students, staff, and visitors 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.
- Screening stations should be set up at least six feet apart from each other.



- If a barrier cannot be put in place, the person measuring temperatures should be trained and wear appropriate personal protective equipment (PPE) including a face mask, eye protection, and disposable gloves.
- Contact-less thermometers must be properly cleaned and disinfected according to the manufacturer's recommendations.
- 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, once they are allowed on campus.

### **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 Essential Protective Equipment (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.

## General Planning Assumptions

- 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 recommend handwashing as the most effective measure against the spread of COVID-19 over the routine use of gloves.
- 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 and Disinfecting

- Develop an explicit and detailed cleaning and disinfecting 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 coverings and other safety equipment.
- Staff should clean and disinfect frequently-touched surfaces at school and on school buses at least daily and, as practicable, these surfaces should be cleaned and disinfected frequently throughout the day by trained custodial staff. Frequently touched surfaces in the school include, but are not limited to:
  - Door handles
  - Light switches
  - Sink handles
  - Bathroom surfaces
  - Tables
  - Student Desks
  - Chairs
- When choosing disinfecting products, use those approved for use against COVID-19 on the Environmental Protection Agency (EPA)- approved list “N” and follow product instructions.
- 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.
- To reduce the risk of asthma and other health effects related to disinfecting, programs should select disinfectant products on list N with asthma-safer ingredients (hydrogen peroxide, citric acid or lactic acid) as recommended by the US EPA Design for Environment program.
- Avoid products that contain peroxyacetic (peracetic) acid, sodium hypochlorite (bleach) or quaternary ammonium compounds, which can cause asthma.
- Follow label directions for appropriate dilution rates and contact times. Provide workers training on the chemical hazards, manufacturer's directions, Cal/OSHA requirements for safe use, and as applicable and as required by the Healthy Schools Act.
- 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 and disinfecting, 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. Periodically replace and check air filters and filtration systems to ensure optimal air quality.
- Ensure a safe and correct application of disinfectants using EPE 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](#) about cleaning and disinfection after persons suspected/confirmed with COVID-19 have been in the facility.

# General Planning Assumptions

## Health and Hygiene Protocols: Indoor Ventilation

- If the school facility is equipped with an HVAC system, begin each school term by installing new air filters.
- 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 or portable air filters in classrooms to maintain healthy airflow and air quality.
- Use air conditioning to keep rooms comfortable.
- 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.

## When Outdoor Air Quality is Poor

- If outside air quality is poor, doors and windows should be shut. Schools holding classes outside should be relocated inside.
- If the HVAC filter was upgraded (HEPA or MERV-13 or higher is recommended), set the central system's circulating fan to operate continuously (set to "ON" rather than "AUTO"). HVAC, air conditioning wall units, and fans without upgraded filters should be turned off.
- Use a portable air cleaner in one or more rooms. Portable air cleaners work best when run continuously with doors and windows closed.
- When air quality improves, even temporarily, "air out" buildings to reduce indoor air pollution.
- Damp mop, dust, and clean with a high efficiency particulate air [HEPA] filter-equipped vacuum.
- School site may consider student dismissal and begin distance learning until air quality improves and proper ventilation on indoor classrooms/common areas can resume.

- For resources and guidance on air quality visit the San Mateo County Office of Education's [Air Quality Resources page](#).

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

- Suspend or modify the use of site resources that necessitate sharing or touching items. For example, suspend the use of drinking fountains and instead encourage the use of reusable water bottles.
- Limit the 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

The 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 handwashing, significantly reduces the risk of transmitting coronavirus when in public.

The State requires face coverings be worn by staff and students in third grade and above. Face coverings are strongly encouraged for children between two years old and second grade, if they can be worn properly. A face shield is an acceptable alternative for children in this cohort who cannot wear a face covering properly.

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 washed and worn to school each day.

## Face Coverings: School Practices

- According to the CDPH, the following individuals are exempt from wearing a face covering: persons younger than two years old, anyone who has trouble breathing, anyone who is unconscious or incapacitated, and anyone who is otherwise unable to remove the face covering without assistance.

## General Planning Assumptions

- A cloth face covering or face shield should be removed for meals, snacks, naptime, or outdoor recreation, or when it needs to be replaced. When a cloth face covering is temporarily removed, it should be placed in a clean paper bag (marked with the student's name and date) until it needs to be put on again.
- In order to comply with this guidance, schools must exclude students from campus if they are not exempt from wearing a face covering under CDPH guidelines and refuse to wear one. Schools should develop protocols to provide a face covering to students who inadvertently fail to bring one to school to prevent unnecessary exclusions. Schools should offer alternative educational opportunities for students who are excluded from campus.
- All staff must use face coverings in accordance with CDPH guidelines unless Cal/OSHA standards require respiratory protection.
- In limited situations where a face coverings cannot be used for pedagogical or developmental reasons (i.e. communicating or assisting young children or those with special needs), a face shield can be used instead of a cloth face covering while in the classroom as long as the wearer maintains physical distance from others, to the extent practicable. The shield should include a cloth drape attached across the bottom and tucked into the shirt. Staff must return to wearing a face covering outside of the classroom.
- 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
- Students in Transitional Kindergarten (TK) should wear face coverings

outdoors while entering and exiting campus. TK students wear face coverings indoors if they are in a combination TK/K clas.

- 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.
- 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](#)
- Information contained in the [CDPH Guidance for the Use of Face Coverings](#) should be provided to staff and families. The document addresses the circumstances in which face coverings must be worn and the exemptions, as well as any policies, work rules, and practices the employer has adopted to ensure the use of face coverings.

Some staff members may not “believe” in the efficacy of face coverings to slow the spread and may resist wearing them. Likewise, some students may struggle acclimating to a face covering and become overly distracted as a result. Despite these factors, the State requires the wearing of face coverings for adults and students in third grade and above, 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](#) (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

## General Planning Assumptions

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.
- Students should remain in the same space and in cohorts or groups as small and consistent as feasible, including for recess and lunch.
- Limit face-to-face interactions between cohorts, including face-to-face interactions between staff assigned to different cohorts.
- Do not combine groups or cohorts of students for activities. Stagger use of shared spaces, properly space occupants, and disinfect in between uses.
- This Framework provides a continuum of instructional strategies to support the most effective educational program for students and staff while following physical distancing guidance.
- 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.
- If applicable, instruct drivers dropping-off or picking-up students to remain in their vehicles to the extent possible.



## Physical Distancing: Cohort Models

### Bubble Cohort

The *Bubble Cohort* provides for a smaller group of young children or students (up to 14), plus classroom teachers and assistants, to 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. An additional staff member certified to serve as a substitute should be included as part of the Bubble.

The Bubble Cohort is most readily applicable to early learning (up through grade two) 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.

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, if utilizing an indoor space, may choose to rely on a strict disinfecting protocol between sessions. 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.

## General Planning Assumptions

Bubble	Stable
Approximately 12 - 16 Students	Depends on ability to maintain physical distancing
No mixing for a period of three weeks	Reduces mixing as much as is practical
Physical distancing and face coverings required	Physical distancing and face coverings required
Allows for effective contact tracing and response in event of positive COVID-19 case	Still enables contact tracing, though not as cleanly

### 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 (athletic 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 for transportation are being developed and will be released once completed and vetted by health officials.

### Physical Distancing: Logistical Considerations

- Lower the 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 rotating classes.
- Organize common areas for staff gathering that meet physical distancing guidelines.
- Minimize movement of students and teachers or staff as much as practicable. For example, consider ways to keep teachers with one group of students for the whole day. In secondary schools or in situations where students have individualized schedules, plan for ways to reduce mixing among cohorts and to minimize contact.
- Prioritize the use and maximization of outdoor space for activities where practicable.
- Use multiple entrances into the school to avoid crowding at a single point of entry; ensure that 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.

## General Planning Assumptions

- Consider using privacy boards or clear screens.
- Activities where there is increased likelihood for transmission from contaminated exhaled droplets such as band and choir practice and performances are not permitted. Activities that involve singing must only take place outdoors.
- Implement procedures for turning in assignments that minimize contact.

### **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 virtual strategies.
- 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 the California Interscholastic Federation (CIF).
- Limit Physical Education to noncontact activities that do not require shared equipment and can be conducted with recommended 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.

## B. A Step-by-Step Approach

Incremental implementation of the district's return to school plan is well supported by examples from schools in countries whose society opened after stay at home restrictions as well as our own county and state. This step-by-step approach provides a careful implementation for returning students and staff and enables schools to be nimble in responding to current and changing conditions. 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.

### Three Steps:

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 any consideration of advancing the school community to the next one. In determining a move forward to the next step, school leaders should apply the statewide indicators as practicable and consult with the County Superintendent and county health authorities as needed. Additionally, implementation of the Pandemic Recovery Framework and the Four Pillars should be smooth and consistent across the entire school or district before advancing to the next step.

The step-by-step approach provides clear boundaries that schools may need to step back to 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:

# General Planning Assumptions

## Step One (Minimum of three weeks)

- Allow no on-campus visitors including volunteers; parents who support direct instruction in preschool classrooms are exempt
- Pause all on-campus 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)

- The school community has successfully implemented the Four Pillars and all associated modifications intended to reduce the spread of the virus for a minimum of three weeks with no or only sporadic and isolated cases
- 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 instruction, with expectations that any in-person activities will honor the Four Pillars
- Restrict gatherings to only essential activities with no larger than four people
- Convene most meetings remotely, specifically any that include groups larger than ten

## Step Three: (Minimum of three weeks)

- The school community has successfully implemented the Four Pillars and all associated modifications intended to reduce the spread of the virus for a minimum of three weeks with no or only sporadic and isolated cases
- 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

- 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. 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 in-person learning for the 2020-21 school year is to maximize instructional time and provide the highest quality academic intervention that supports the educational success of all students.

### 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.

#### Ongoing Testing in Schools

According to guidance provided by the California Department of Public Health on August 3rd, 2020, school staff should be tested, including teachers, paraprofessionals, cafeteria workers, janitors, bus drivers, or any other school employee that may have contact with students or other staff. School districts and schools should ensure that staff are tested periodically by their primary care provider or by referring teachers to a community testing site, as testing capacity permits and as practicable. Examples of recommended frequency include all staff being tested over 2 months, where 25% of staff are tested every 2 weeks, or 50% every month to rotate which staff members are tested over time.

When a school or school district reopens to in-person instruction, but the county is later placed in the widespread (purple) tier or if epidemiological data indicates concern for widespread or increasing community transmission, schools should increase testing of staff to detect potential cases. The schools are not required to close under this scenario.

# General Planning Assumptions

## Case, Close Contact, Indirect Contact

To understand the continuum of health concern for members of the public regarding the contracting of COVID-19, the Pandemic Recovery Framework uses the terms Case, Close Contact, and Indirect Contact to mean the following within a pandemic context:

- Case: A *Case* refers to a person who tests positive
- Close Contact: A *Close Contact* refers to a person who is within 6 feet of a confirmed case for more than 15 minutes, regardless of face covering use.
- Indirect Contact: *Indirect Contacts* are people who may have been in proximity to a *Close Contact*



## Cases and Contact Tracing in the School Community

**Table 1: Steps to Take in Response to Confirmed or Suspected COVID-19 Cases and Close Contacts to Known COVID-19 Cases**

Scenario	Immediate Actions
<p><b>Scenario 1:</b> A student or staff member either exhibits COVID-19 <b>symptoms</b>, answers “yes” to a <b>health screening question</b>, or has a temperature of 100.4°F or above</p>	<ul style="list-style-type: none"> <li>• Send home</li> <li>• Recommend testing (If positive, see Scenario 3; if negative, see Table 2)</li> <li>• School/classroom remain open</li> </ul>
<p><b>Scenario 2:</b> A family member of a student or staff member OR someone in close contact with a student or staff member (outside the school community) tests positive for COVID-19</p>	<ul style="list-style-type: none"> <li>• Send home</li> <li>• Contacts should be quarantined for 14 days from the last exposure to the case</li> <li>• Testing can be considered but will not shorten 14-day quarantine. <i>One cannot test out of quarantine.</i></li> <li>• School/classroom remain open</li> </ul>



Scenario	Immediate Actions
<p><b>Scenario 3:</b> A student or staff member tests positive for COVID-19</p>	<ul style="list-style-type: none"> <li>• <b>The school Principal or designee must immediately notify SMC CD Control</b></li> <li>• Case should be isolated and excluded from school for at least 10 days after symptoms first appeared and at least 3 days (72 hours) after recovery, or date of positive test if case is asymptomatic</li> <li>• <b>Quarantine and exclude the affected cohort/pod</b> for 14 days after the last day the case was present at school while infectious. Specific questions should be directed to SMC CD Control.</li> <li>• Testing of contacts can be considered. Symptomatic contacts should be prioritized for testing (but a negative test will not shorten 14-day quarantine)</li> <li>• Thorough cleaning and disinfecting of classroom and primary spaces where case spent significant time</li> <li>• Other cohorts/pods continue in-person instruction. I.e., <b>the entire school does not need to close.</b></li> <li>• Send notification to affected cohort/pod</li> </ul>

**Table 2: Steps to Take in Response to Negative Test Results**

Scenario	Immediate Actions
<p>A <b>symptomatic</b> student or staff member tests negative for COVID-19 and was a <b>household contact</b> to a case</p>	<ul style="list-style-type: none"> <li>• Student/staff must remain in quarantine for a full 14 days after the COVID-19 positive household member completes his/her isolation. One cannot test out of quarantine.</li> </ul>
<p>A <b>symptomatic</b> student or staff member tests negative for COVID-19 and was a <b>non-household close contact</b> to a case</p>	<ul style="list-style-type: none"> <li>• Student/staff must remain in quarantine for a full 14 days after the date of last exposure. One cannot test out of quarantine.</li> </ul>
<p>A <b>symptomatic</b> student or staff member tests negative for COVID-19 <b>without close contact</b> to a case</p>	<ul style="list-style-type: none"> <li>• Student/staff may return to school 72 hours after resolution of symptoms</li> </ul>

# General Planning Assumptions

Scenario	Immediate Actions
An <b>asymptomatic</b> student or staff member tests negative for COVID-19 and was a <b>household contact</b> to a case	<ul style="list-style-type: none"> <li>• Student/staff must remain in quarantine for a full 14 days after the COVID-19 positive household member completes his/her isolation. One cannot test out of quarantine.</li> </ul>
An <b>asymptomatic</b> student or staff member tests negative for COVID-19 and was a <b>non-household close contact</b> to a case	<ul style="list-style-type: none"> <li>• Student/staff must remain in quarantine for a full 14 days after the date of last exposure. One cannot test out of quarantine.</li> </ul>
An <b>asymptomatic</b> student or staff member tests negative for COVID-19 <b>without close contact</b> to a case	<ul style="list-style-type: none"> <li>• Can return to school/work immediately.</li> </ul>

Scenario	Immediate Actions
A symptomatic student or staff member who is <b>not a close contact</b> to a known COVID-19 case tests negative for COVID-19 after <b>Scenario 1</b>	<ul style="list-style-type: none"> <li>• Student/staff may return to school 72 hours after resolution of symptoms</li> </ul>
A symptomatic or asymptomatic student or staff member who is a <b>close contact</b> to a known COVID-19 case tests negative after <b>Scenario 2</b>	<ul style="list-style-type: none"> <li>• Student/staff must remain in quarantine for a full 14 days after:               <ol style="list-style-type: none"> <li>1. date of last exposure to COVID-19 positive non-household close contact OR</li> <li>2. date that COVID-19 positive household member completes his/her isolation. One cannot test out of quarantine.</li> </ol> </li> </ul>
A staff member tests negative after routine surveillance testing (no symptoms and no close contact to a confirmed COVID-19 case)	<ul style="list-style-type: none"> <li>• Can return to school/work immediately.</li> </ul>

## Response to Suspected or Confirmed Cases and Close Contacts

### Suspected COVID-19 Case(s):

In general practice, if students, teachers, and staff present with fever, respiratory infection, or other **COVID-19 symptoms**, send them home immediately. Separate them from others in an isolation room established on campus until they go home.

- Plan ahead with the Principal, nurses, and other healthcare providers (if any) to identify an isolation room or area to separate anyone who exhibits COVID-19 symptoms during the school day.
- Recommend students and staff to get tested as soon as possible after they develop one or more COVID-19 symptoms. Require that parents/guardians and staff notify the Principal/school administration immediately if the student or staff tests positive for COVID-19.
- Students or staff who are not already wearing a face covering and are now exhibiting symptoms should immediately wear one and wait in an isolation area until they can be transported home or to a healthcare facility. For serious illness, call 9-1-1 without delay.
  - Keep students who are waiting to be picked up in a previously designated isolation room in an area that others do not enter or pass through. Make sure that students keep their face coverings on.
  - If possible and safe, when parents or guardians arrive to pick up a sick student, have the student meet them outside instead of allowing the parents or guardians into the building.
- Close off areas used by any sick person and do not use before thoroughly cleaning and disinfecting. To reduce the risk of exposure, ideally wait 24 hours before cleaning and disinfecting. If it is not possible to wait 24 hours, wait as long as practicable. Ensure a safe and correct application of disinfectants with proper PPE and ventilation.
- Find alternative locations for students and teachers whose regular classroom is being cleaned or disinfected.

## General Planning Assumptions

### Confirmed COVID-19 Case(s):

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:

- The school Principal or designee should immediately notify SMC CD Control of any positive COVID-19 case.
- District designee will notify the Office of the County Superintendent.
- School and district staff will communicate with the infected individual to confirm they are under medical care and have a plan to self isolate according to the CDC'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.
- Notify staff and families of the affected cohort/pod of the positive COVID-19 case while maintaining confidentiality as required by state and federal laws. Quarantine and exclude the affected cohort/pod for 14 days after the last day the case was present at school while infectious. Information concerning confidentiality [can be found here](#).
- Close off areas used by any sick person and do not use before thoroughly cleaning and disinfecting. To reduce the risk of exposure, ideally wait 24 hours before cleaning and disinfecting. If it is not possible to wait 24 hours, wait as long as practicable. Ensure a safe and correct application of disinfectants with proper PPE and ventilation. Keep disinfectant products away from students.
- Find alternative locations for students and teachers whose regular classroom is being cleaned or disinfected.
- Advise sick staff members and students with confirmed COVID-19 not to return to school until they have met the discontinuation of home isolation criteria, usually at least 10 days after symptoms first appeared and at least 3 days (72 hours) after recovery, defined as resolution of fever without the use of fever-reducing medications if fever was present and improvement in other symptoms.
- Because a test can remain positive long after an individual is no longer infectious, proof of a negative test should not be required prior to returning to the workplace after documented COVID infection.

- Determine whether disinfecting measures can be implemented without temporarily closing the school campus or if temporary closure is necessary.

### Close contacts to confirmed COVID-19 Case(s):

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

- Close contacts (household or non-household) of confirmed COVID-19 cases should be sent home. Because one cannot test out of quarantine, they should, even if they test negative, remain in quarantine for a full 14 days after
  1. date of last exposure to COVID-19 positive non-household contact OR
  2. date that COVID-19 positive household member completes his/her isolation.
- While a negative test will not shorten the duration of quarantine, students or staff with close contact to a confirmed case should be encouraged to get tested to help inform appropriate isolation/quarantine periods.
- Take immediate measures to sanitize and disinfect the school property impacted by the *Close Contact*.
- There is no need to document evidence of a *Close Contact* with County Health, but continue to consult with the County Superintendent and County Health officials as needed.
- 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.
- No actions need to be taken for persons who have not had direct contact with a confirmed COVID-19 case but were contacts to a contact. For example, if a student is under quarantine due to contact with a household member who is a confirmed case, the student's cohort can continue with in-person instruction.
- Those who test positive should not return until they have met criteria to discontinue home isolation (see box above for Confirmed COVID-19 Case(s)).

### Return to Campus Criteria:

- Symptomatic individuals who test positive for COVID-19 should not return

## General Planning Assumptions

until they have met the discontinuation of home isolation criteria, usually at least 10 days after symptoms first appeared and at least 3 days (72 hours) after recovery, defined as resolution of fever without the use of fever-reducing medications if fever was present and improvement in other symptoms.

- Asymptomatic individuals who test positive for COVID-19 can usually return 10 days after the collection date of their positive test result.
- Symptomatic individuals who test negative for COVID-19 can usually return 72 hours after resolution of symptoms as long as they were not contacts to a known case of COVID-19.
- Anyone (symptomatic or asymptomatic) who tests negative for COVID-19 and who is a non-household close contact or a household contact to a confirmed case of COVID-19 should not return to campus until completion of a full 14-day quarantine after
  1. date of last exposure to COVID-19 positive non-household close contact or
  2. date that COVID-19 positive household member completes his/her isolation.

See [San Mateo County Health's website](#) for complete information in responding to cases and close contacts in the school community.

### Table Definitions

A **close contact** is defined as a person who was less than 6 feet from a case for more than 15 minutes regardless of whether a face covering was worn. In some school situations, it may be difficult to determine whether individuals have met this criterion and an entire cohort, classroom, or other group may need to be considered exposed, particularly if people have spent time together indoors.

A **cohort** is a stable group with fixed membership that stays together for all courses and activities (e.g., lunch, recess, etc.) and avoids contact with other persons or cohorts.

### 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.

## 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 is critical. Training should be provided to all staff so that safe practices are 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 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. Additionally, the Framework reflects health conditions as understood and determined by state and local health officials and is clear on the hygiene measures necessary for keeping children, students, and staff as safe and healthy as possible. The Framework 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 hybrid 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 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?”

## General Planning Assumptions

- 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

- According to the recently released budget legislation in SB98, accountability for meeting daily instructional minutes can be met in any combination of in-person, live synchronous, and independent asynchronous work.
- Per Education Code 3501, for the 2020–21 school year, the minimum school day for a local educational agency is as follows:
  - (a) 180 instructional minutes in kindergarten.
  - (b) 230 instructional minutes in grades 1 to 3, inclusive.
  - (c) 240 instructional minutes in grades 4 to 12, inclusive.
  - (d, e, f) 180 for special dual enrollments.
- Districts need a written plan for re-engagement for students who are absent from distance learning for more than 3 days in a week.
- 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.
- 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

## District Planning Considerations

an extended period if the virus spreads through the family household.

- 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 will 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.
- Ridership on school district bus transportation should be organized around the concept of a Stable Cohort. Assign seats for prescribed riders, placing siblings in close proximity. Require health and hygiene procedures prior to entering the bus, implement physical distancing as much as is practicable, require face coverings for the bus driver and all students except those who are exempt, and consider lowering windows an inch or so for accelerated air flow.
- 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.
- Ensure each bus is equipped with extra unused face coverings for students who may have forgotten to bring one.
- [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

## District Planning Considerations

- 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 guidelines? Arrange desks in a way that minimizes face-to-face contact.
- How should lockers be assigned or utilized, if at all?
- What procedures will ensure safe and healthy use of bathrooms?
- Serve meals outdoors or in classrooms instead of cafeterias or group dining rooms where practicable. How can lunch rooms and outdoor eating areas be reconfigured to meet physical distancing guidelines?
- Can staff lounges be reconfigured to ensure safe health conditions and meet physical distancing guidelines requirements?
- How will staff understand the guidelines of the Four Pillars as they apply to staff breaks and mealtimes?
- 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 isolation 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.

## 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.

# School Site Planning Considerations

- 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. Disinfect between uses.
- 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.
- The CDPH's guidance does not permit team competition, but allows for



individual or team physical conditioning and training and physical education where physical distancing can be maintained and ideally outdoors. Indoor physical conditioning and training are allowed only in counties where gyms and fitness centers are allowed to operate indoors. Please see the [CDPH Youth Sports Guidance](#) for more details.

- Youth sports and physical education are permitted only when the following can be maintained: (1) physical distancing of at least six feet; and (2) a stable cohort, such as a class, that limits the risks of transmission (see [CDC Guidance on Schools and Cohorting](#)). Activities should take place outside to the maximum extent practicable.
- For sports that cannot be conducted with sufficient distancing or cohorting, only physical conditioning and training is permitted and ONLY where physical distancing can be maintained. Conditioning and training should focus on individual skill building (e.g., running drills and body weight resistance training) and should take place outside, where practicable. Indoor physical conditioning and training is allowed only in counties where gyms and fitness centers are allowed to operate indoors.
- Avoid equipment sharing, and if unavoidable, clean and disinfect shared equipment between use by different people to reduce the risk of COVID-19 spread.
- Consistent with guidance for gyms and fitness facilities, cloth face coverings must be worn during indoor physical conditioning and training or physical education classes (except when showering). Activities that require heavy exertion should be conducted outside in a physically distanced manner without face coverings. Activities conducted inside should be those that do not require heavy exertion and can be done with a face covering. Players should take a break from exercise if any difficulty in breathing is noted and should change their mask or face covering if it becomes wet and sticks to the player's face and obstructs breathing. Masks that restrict airflow under heavy exertion (such as N-95 masks) are not advised for exercise.
- Youth sports programs and schools should provide information to parents or guardians regarding this and related guidance, along with the safety measures that will be in place in these settings with which parents or guardians must comply.

# School Site Planning Considerations

## Singing and Playing Instruments

- Activities where there is increased likelihood for transmission from contaminated exhaled droplets—such as singing, yelling, chanting, blowing wind instruments —are not permitted.

# 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
- Home School - 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
- See the California Collaborative for Education Excellence's *Distance Learning Playbook* and the *Hybrid Learning Playbook* for additional ideas.

## 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.

# Continuum of Learning Options

## 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 (disinfect 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

## Continuum of Learning Options

- 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.

## D. Minimum Instructional Minutes

SB 98 set requirements on the minimum number of daily instructional minutes provided to students. These include:

- 180 min K
- 230 min 1-3
- 240 min 4-12

These minutes can be met in any combination of instructional models, from in-person to distance learning.

Districts need to offer in-person instruction to the greatest extent possible.

Daily live interaction between students, their peers, and teachers is required. If daily live interaction is not feasible, then the board needs to adopt a plan for frequent live interaction.

## E. Learning Continuity and Attendance Plans

By September 30, 2020, LEAs must adopt a Learning Continuity and Attendance Plan which describes how state, federal, and learning loss mitigation funds will be used to provide continuity of learning and address the impact of COVID-19 on pupils, staff, and the community in the following areas:

- Distance Learning
- Learning Loss
- Mental Health/ Social Emotional Well-being of Students and Staff
- Professional Development
- Pupil Engagement and Outreach
- School Nutrition

The plan must also include how LEAs are increasing or improving service in proportion to unduplicated students.

### 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, [Pandemic Recovery Framework: Mental Health Companion Document](#), for more information.

# IX. Parent Engagement 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
- Face covering exemption 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.

- 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.
- CIF issued a **waiver of its annual physical requirement**, allowing students to begin playing fall school athletics.
- 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

### **COVID-19 Funding**

### **Contact Tracing and Communication Protocol**

### **Glossary**

### **Sources**

### **SMC Pandemic Recovery for Schools Framework Companion Documents**

- [Cleaning and Disinfection Procedures Manual](#)
- [Pandemic Recovery Framework: Licensed Early Learning and Care Companion Document](#)
- [Pandemic Recovery Framework: Mental Health Companion Document](#)
- [Sample Board Policy: COVID-19 Mitigation Plan](#)

### **Outdoor Classrooms**

- [Division of the State Architect \(DSA\) Revised Bulletin: DSA Assistance During the COVID-19 Pandemic for Emergency School Facilities](#)

## COVID-19 Funding

### ESSER (Elementary and Secondary School Emergency Relief) - \$1.65B

- Allocation Formula: Based on Title I Part A received in FY 2019–20
- Allowable use: Activities authorized by the Elementary and Secondary Education Act of 1965 (ESEA), IDEA, the Adult Education and Family Literacy Act, the Perkins CTE Act, or the McKinney-Vento Homeless Assistance Act.
- Timeline: Allowable expenses incurred on or after March 13, 2020. Must be obligated by September 30, 2022.
- Availability: Funds will be available in FY 2020–21 once State Budget Act is signed into law. Generally accepted accounting principles for modified accrual basis accounting require that there be an appropriation of funds in order for revenue recognition to take place. Therefore, LEAs should not recognize ESSER Fund revenue until 2020–21.
- Application Process: <https://www3.cde.ca.gov/esserassurances/logon.aspx>
- SACS Resource code: RE 3210 is available to record expenditures for FY 2019–20

### GEER and CRF (Governor’s Emergency Education Relief & Coronavirus Relief Fund) - \$4.4B

- Allocation Formula: \$2.9B to LEAs based on their proportion of supplemental and concentration grant funding using 2019–20 P-2 apportionment certification. Balance \$1.5B would be distributed to all LEAs based on Fall 1 census enrollment of SWDs ages 3 to 22.
- Allowable use: extending the instructional school year, additional academic supports including devices for distance learning, or wraparound services.
- Timeline: for costs incurred between March 1 and December 30, 2020, CDE will be providing updates on this funding as they are available.

### SB 98 Education omnibus budget trailer bill (\$165 per student on average)

- Allocation Formula: Eligible LEAs LCFF entitlement determined as of 2019–20 second principal apportionment certification. This equates to

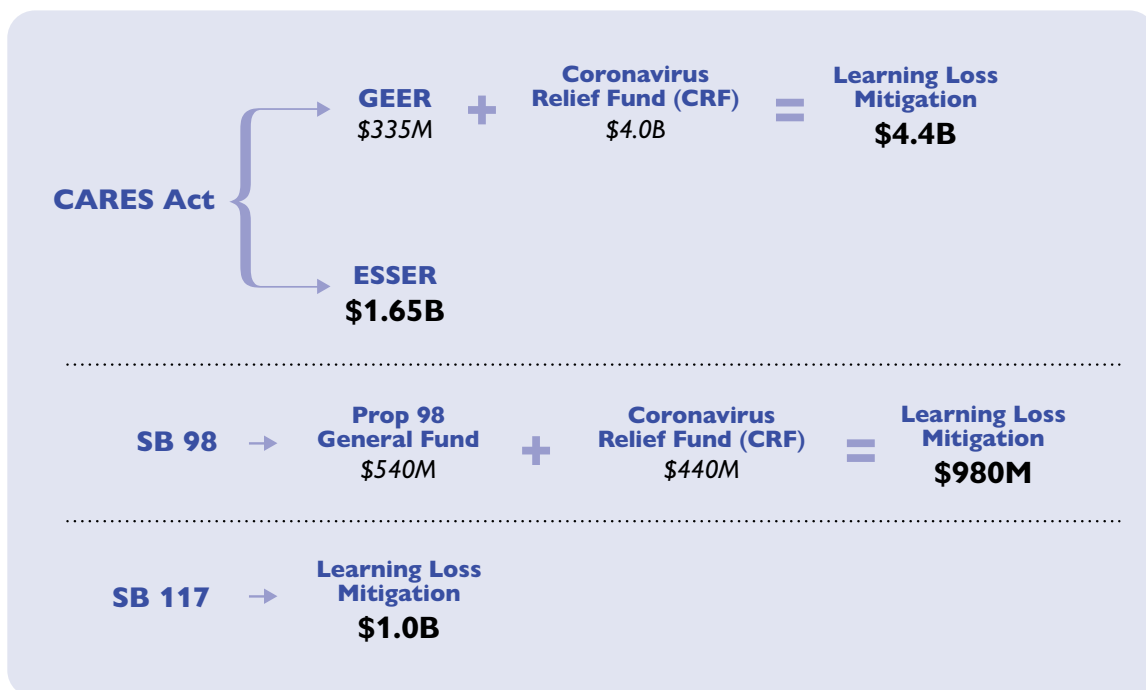
# Appendix

approximately \$165 per average daily attendance (ADA)

- Data for a locally funded charter school shall be included in the determination of the chartering authority funding.

Local education agencies (LEAs) receiving learning loss mitigation funds shall adopt an instructional continuity plan (Learning Continuity and Attendance Plan) by September 30, 2020, that describes the following:

- How the funds will be used to mitigate learning loss as a result of COVID-19.
- How the LEA will ensure that all students are provided devices and connectivity.
- How the effectiveness of the services or supports provided will be measured.



## Other resources:

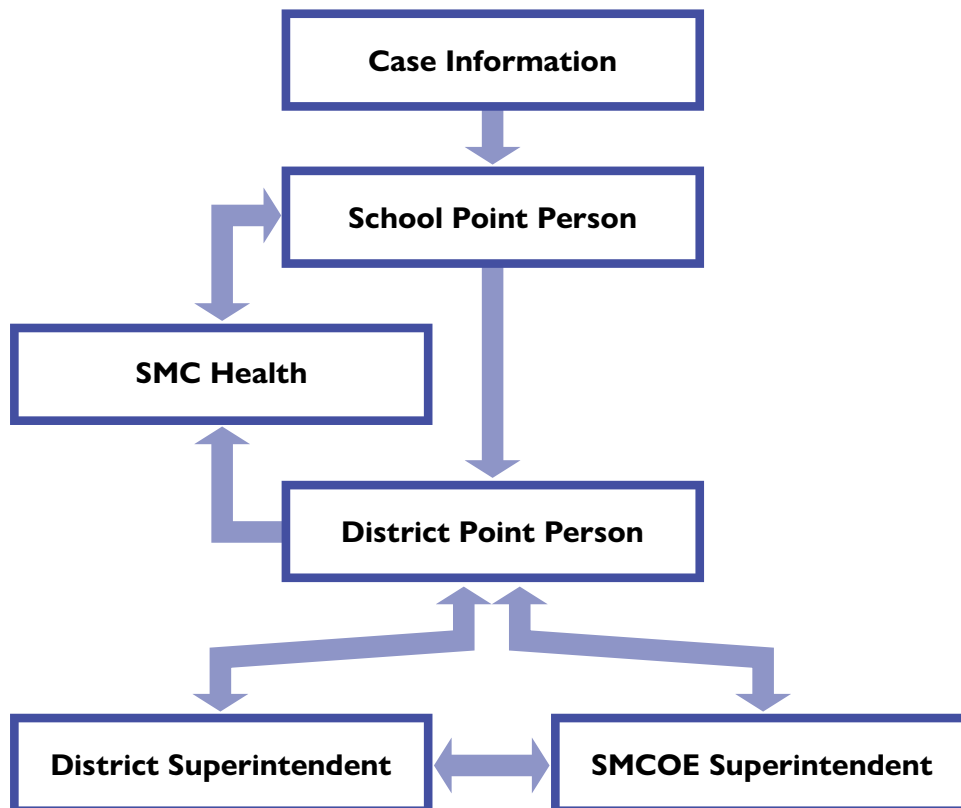
- CDE - ESSER Fund Frequently Asked Questions (CDE)  
<https://www.cde.ca.gov/fg/cr/esserfaqs.asp>
- CARES Act Funding - Finance & Grants (CDE)  
<https://www.cde.ca.gov/fg/cr/>



# Contact Tracing and Communication Protocol

## Do Now

- School districts and private schools should submit the name and contact information of each School and District COVID-19 Point Person to SMCOE and San Mateo County Communicable Disease Control Program (SMC CD Control) using [this form](#). The School and District COVID-19 Point Persons should be trained to coordinate the documentation and tracking of possible exposures in order to notify local health officials, staff, and families in a prompt and responsible manner.
- After submitting this information, the School or District Point person will be asked to submit a map/floor plan to SMC CD Control for each school, which would be used during discussions about contact tracing.



## **When District/Private School Has a Case of COVID-19**

- The School COVID-19 Point Person must report all COVID-19 cases and clusters of undiagnosed respiratory illness to SMC CD Control as soon as practicable (within 24 hours).
- The School Point Person should immediately notify the District Point Person of COVID-19 cases in the school community.
- The School COVID-19 Point Person and the assigned San Mateo County Health investigator will be in daily contact Monday – Friday, unless instructed otherwise by SMC CD Control.
- The District COVID-19 Point Person collects data from all schools and must complete a daily report for all new cases (a [line list](#)) and submit it via secure email daily by 10:00 a.m.
- The District COVID-19 Point Person or Superintendent/Private School Head should notify SMCOE at (650) 802-5515.

## **Responsibilities of San Mateo County Public Health**

- Conduct formal contact tracing
- Advise School Point Person on the school site response

## **Responsibilities of School COVID-19 Point Person**

- Report data on cases per the protocol
- Follow advice of San Mateo County Health
- Seek additional guidance as necessary from the District Point Person

## **Responsibilities of District COVID-19 Point Person**

- Ensure a COVID-19 School Point Person for each school is identified
- Receive and provide training
- Ensure strong communication channels within the district and with San Mateo County Health and SMCOE
- Submit line list to San Mateo County Health

## **Sample Messages to the School Community**

- **Sample message to a school community when a student, teacher, or staff member has been identified as a case.**
- **Sample message to school community when a student or staff member is a close contact.**
- **Sample message to those who may be a close contact in the school.**

## Glossary

**Bubble Cohort:** A group of no more than 14 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/Close Contact/Indirect Contact:**

**Case:** A person who tests positive for a disease.

**Close Contact:** A person who is within less than 6 feet from a confirmed case for more than 15 minutes regardless of face covering use.

**Indirect Contact:** People who may have been in proximity to a close 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.

**Isolation:** Used to separate people infected with a contagious disease from people who are not infected. People who are in isolation should stay home until it is safe for them to be around others. In the home, sick/infected individuals should separate themselves from others by staying in a specific “sick” room or area and using a separate bathroom if available.

**Quarantine:** The practice of separating individuals who have had close contact with someone with a contagious disease such as COVID-19 from others. People who are in quarantine should stay home until it is safe for them to be around others. They should stay home, separate from others, and monitor their health.

**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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