Washington State "DecisionTree" for K-12 School Opening (Dec 16, 2020)
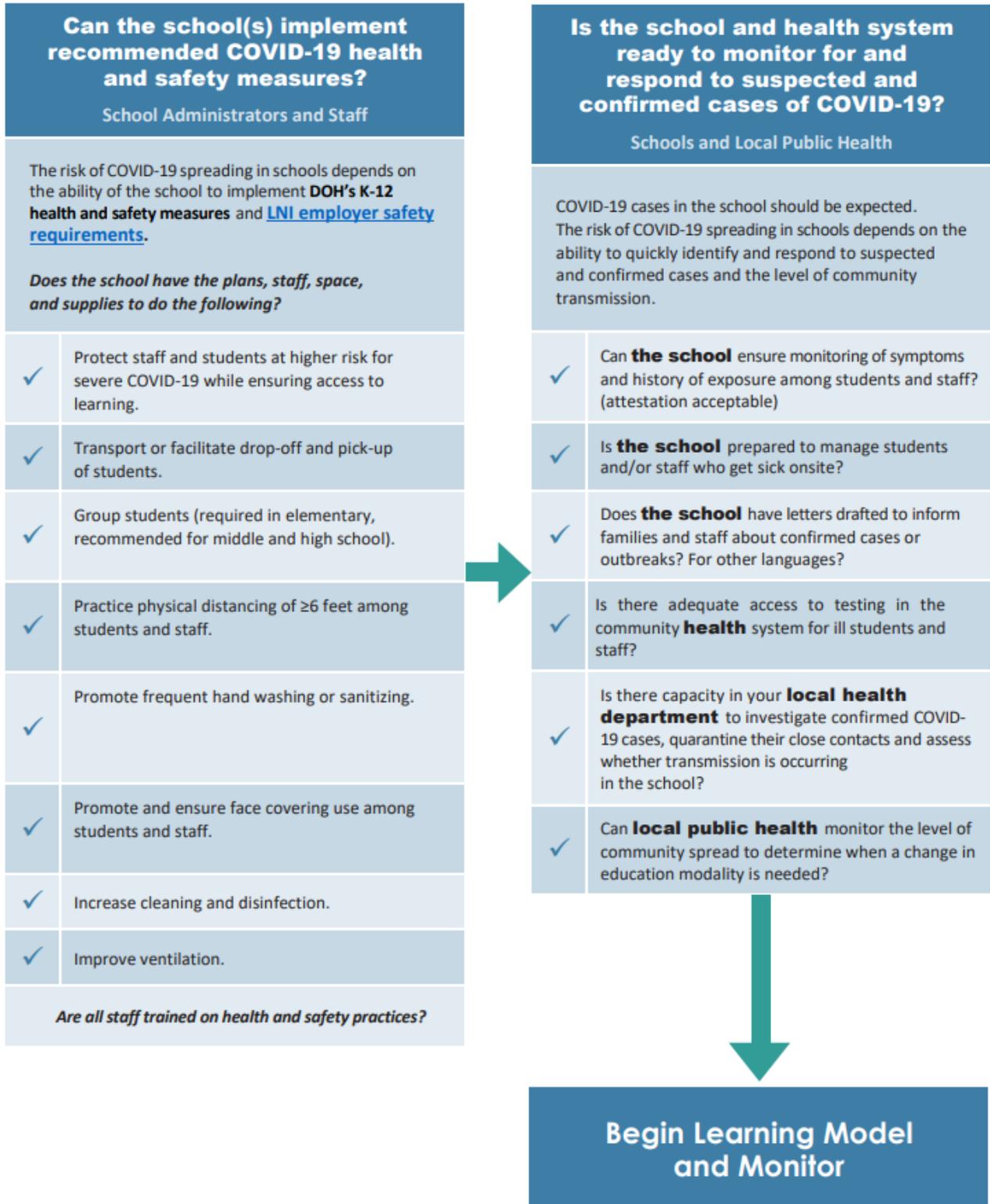
• In December the Department of Health (DOH) moved away from a 'decision tree.' This toolkit now includes two checklists to ensure readiness to implement all required DOH Health and Safety Measures and LNI Health and Safety Requirements for Schools. Summaries of these documents follow.

• DOH revised the metrics to inform local decisions around the in-person learning and the risk of transmission of COVID-19 in school environments. Their revisions were based on emerging research and data gathered by state and national officials.

• The below matrix summarizes recommendations for the start of in-person learning based on a community's metrics. The introduction and background sections were updated to reflect the rationale for the changes.

For whom should your community provide in person learning?

For School Administrators, Local Health Officers, and Community Stakeholders

The risk of COVID-19 being introduced into the school and spreading depends on the health and safety measures taken by schools and the level of COVID-19 spread in the community. **Consider the following educational modalities based on community transmission and other health and education risks and benefits.**

COVID-19 Activity	HIGH >350 cases/100K/14 days Test positivity >10% Trends in cases and hospitalizations	MODERATE ~50-350 cases/100K /14 days Test positivity 5-10% Trends in cases and hospitalizations	LOW <50 cases/100K/14 days Test positivity <5% Trends in cases and hospitalizations
Education Modality	Phase in in-person learning in groups of 15 or fewer students for pre-K through grade 5 and those with highest needs. Prioritize Pre-K through grade 3, and students in any grade with disabilities, students living homeless, or those farthest from educational justice. If schools can demonstrate the ability to limit transmission in the school environment, add grades 4-5.	Phase in in-person learning. Prioritize Elementary (pre-K - 5) if they are not already receiving in-person learning, and Middle School. If schools can demonstrate the ability to limit transmission in the school environment, add more high school students when case rates are below about 200/100K/14 days.	Provide in-person learning for all students.
Extra-curricular Activities	Cancel or postpone most in-person extra-curricular activities except those allowed under Safe Start and Governor's proclamations on COVID-19.	Extra-curricular activities must follow K-12, applicable Safe Start protocols and Governor's proclamations on COVID-19.	Extra-curricular activities must follow K-12, applicable Safe Start protocols and Governor's proclamations on COVID-19.
Transition	**Across all COVID-19 Activity Levels:** • When trends in cases and hospitalizations are flat or decreasing, and the school can demonstrate the ability to limit transmission in the school environment, expand access to in-person learning • When trends are increasing, pause expansion of additional in-person learning and maintain access to in-person learning for those who have it. Schools are not required to reduce in-person learning or revert to remote learning based on metrics if the school can demonstrate the ability to limit transmission in the school environment. • Consider other health and education risks and benefits to children and their families At any COVID-19 level, transition temporarily to full distance learning for 14 days when school meets criteria in DOH's K-12 Health and Safety Guidance (p 16) or on recommendation of the local health officer.		

Given this checklist of actions below is met, DOH recommends mitigated in-person learning can occur at community COVID-19 rates higher than established in the initial versions of this framework.

Can the school(s) implement recommended COVID-19 health and safety measures?

School Administrators and Staff

The risk of COVID-19 spreading in schools depends on the ability of the school to implement **DOH's K-12 health and safety measures** and **LNI employer safety requirements**.

Does the school have the plans, staff, space, and supplies to do the following?

✓ Protect staff and students at higher risk for severe COVID-19 while ensuring access to learning.

✓ Transport or facilitate drop-off and pick-up of students.

✓ Group students (required in elementary, recommended for middle and high school).

✓ Practice physical distancing of ≥6 feet among students and staff.

✓ Promote frequent hand washing or sanitizing.

✓ Promote and ensure face covering use among students and staff.

✓ Increase cleaning and disinfection.

✓ Improve ventilation.

Are all staff trained on health and safety practices?

Is the school and health system ready to monitor for and respond to suspected and confirmed cases of COVID-19?

Schools and Local Public Health

COVID-19 cases in the school should be expected. The risk of COVID-19 spreading in schools depends on the ability to quickly identify and respond to suspected and confirmed cases and the level of community transmission.

✓ Can **the school** ensure monitoring of symptoms and history of exposure among students and staff? (attestation acceptable)

✓ Is **the school** prepared to manage students and/or staff who get sick onsite?

✓ Does **the school** have letters drafted to inform families and staff about confirmed cases or outbreaks? For other languages?

✓ Is there adequate access to testing in the community **health** system for ill students and staff?

✓ Is there capacity in your **local health department** to investigate confirmed COVID-19 cases, quarantine their close contacts and assess whether transmission is occurring in the school?

✓ Can **local public health** monitor the level of community spread to determine when a change in education modality is needed?

Begin Learning Model and Monitor

DOH Health and Safety Measures (Jan 25, 2021)

Schools have an obligation to provide employees with a safe and healthy work site in accordance with state and federal law and safety and health rules, including addressing hazards associated with COVID-19. Below are topics addressed in the linked DOH Document. Guidance was bargained into the HEA/HSD August MOU and being used in the planning and implementation of building safety plans.

General Guidance:

Site Access: Attestation, Screening, Protocols and Communication must be designed to keep potentially ill staff, students, and others from coming on site.

Training: Staff must be trained in health and safety protocols for their sites.

Communication: Regular communication with students, families and staff should be provided using multiple methods, such as posters, written letters, email, text message, phone, video conferencing. Communication should be in the language that parents best understand.

Mask-wearing: All students age 5 years and older, staff, volunteers, and guests must wear face coverings or acceptable alternatives in K-12 settings

People at High Risk: Those at high risk for health problems from COVID-19 should consult with their health care provider when considering whether to provide or participate in K-12 activities. Protections for employees at high risk for health problems remain in place under Proclamation 20-46. Families with a member who is at high risk from COVID-19 should carefully consider risks and benefits of sending their student to school in person.

Health Screening at Entry: Students or staff who stay home or are sent home due to symptoms should consult their doctor and follow the "Returning to school after suspected COVID-19 symptoms" protocol prior to returning.

Grouping Students: Cohorts of students should remain together throughout the day and have an assigned staff member. These groups should remain consistent from day to day and should not be combined or mixed.

Physical Distancing: Maintaining six feet of distance is most important when students or staff will be engaged in something for more than a few minutes, like during class. There may be brief moments, such as passing by others in the hallway, when students are less than six feet apart from each other.

Hygiene Practices: Students must be taught to wash their hands correctly. The best option is to wash hands with soap and water for at least 20 seconds. If soap and water are not readily available, they should use an alcohol-based hand gel with at least 60 percent alcohol. Supervise the use of alcohol-based gel by children.

Hand Cleaning: Children and adults should clean their hands throughout the day. Specifically: After arriving at school, Before meals or snacks, After outside activities, After going to the bathroom, After sneezing or blowing their nose, Before leaving school.

Cloth Face Coverings: All students and staff must wear cloth face coverings or an acceptable alternative at school when indoors. The school is responsible for providing appropriate PPE for all staff, including those who provide assistance to students who have special needs. Certain specified tasks and situations require a higher level of protection under L&I safety and health rules and guidance.

Infection Control Plans: Schools should have infection control plans updated to reflect what is known about COVID19. A good resource for infection control and school cleaning is Cleaning for Healthier Schools –Infection Control Handbook 2010.
- Facilities must have a Safety Data Sheet (SDS) for each chemical used in the facility.
- Parents, teachers, and staff should not supply their own disinfectants and sanitizers.

Carpets: If possible, vacuum carpets every day when children are not present in the space.

Outdoor Areas: Areas, like playgrounds, require routine cleaning but do not require disinfection.

Ventilation: Ventilation is important for creating good indoor air quality. Open windows if possible, and adjust the HVAC system to allow the maximum amount of outside air to enter the program space. Use of fans for cooling is acceptable. They should blow away from people. There is no special cleaning or disinfection for heating, ventilation, and air conditioning (HVAC) systems.

Shared Hands-On Teaching Materials: Limit shared teaching material to those types that can be easily cleaned and disinfected. Discourage sharing of items that are difficult to clean or disinfect. Clean and disinfect shared items between uses. Children's books and other paper based materials are not high risk for spreading the virus. Keep each student's belongings separate and in individually labeled containers, cubbies, or areas.

What to do if someone develops signs of COVID-19

Care and Communication: Schools must have a response and communication plan in place that includes communication with staff, families, and their local health jurisdiction. Every school should have a space for isolating ill persons until they can be sent home. If a student or staff member develops signs of COVID-19, separate the person and supervise them from a safe distance until the sick person can leave. Staff caring for ill persons should use appropriate medical-grade PPE. Additional guidance on the following is provided:
- Returning to school after having suspected signs of COVID-19
- Returning to school after testing positive for COVID-19
- Returning to school after being in close contact to someone with COVID-19
- Environmental cleaning after a suspected or confirmed case is identified.
- Contact investigation, contact tracing, and quarantine of close contacts of confirmed COVID-19 cases

A COVID-19 outbreak is considered when the following have been met:
- There are two or more laboratory-positive (PCR or antigen) COVID-19 cases among students or staff.
- The cases have a symptom onset within a 14-day period of each other.
- The cases are epidemiologically linked.
- The cases do not share a household.
- The cases are not identified as close contacts of each other in another setting during the investigation.

Responses to Cases at School:
- The entire classroom will be assigned to home quarantine and remote learning for 14 days if two or more laboratory positive COVID-19 cases occur within the group or cohort within a 14-day period.
- A school will be closed and switch to remote learning for 14 days when:
    - 2 or more classrooms are dismissed due to outbreaks in schools with 10 or fewer classrooms.
    - 10% or more of classrooms are dismissed due to outbreaks in schools with greater than 10 classrooms.
    - A school cannot function due to insufficient teaching or support staff.
- Districts will consider the following to determine the need to close a school and switch to remote learning for 14 days:
    - The school experiences a rapid increase in cases.
    - There is a prolonged chain of transmission (2 or more generations) occurring in the school.
    - School cannot function due to insufficient teaching or support staff.

L&I Health & Safety Requirements for Schools

The district will designate a site-specific COVID-19 supervisor at each school and other worksite to monitor the health of employees and enforce the COVID-19 job site safety plan. K–12 employers must specifically ensure operations follow the main L&I COVID-19 requirements to protect workers that include the following:

1. **Educate workers** about coronavirus, how to prevent transmission, and the employer's COVID-19 policies.
2. **Limit capacity in indoor spaces** to ensure 6 feet of distance can be kept between all.
3. **Maintain a minimum 6-foot separation** between all those at school to the maximum extent feasible.
    - When strict physical distancing is not feasible for a specific task, and it takes more than 10 minutes in an hour, the employer is required to provide additional prevention measures, such as use of barriers, masks,

or respirators that provide a higher level of protection than a cloth face covering, minimize the number of staff or students in the enclosed areas, and stagger breaks, recesses, and work shift starts.

4. **Provide (at no cost to employees) and require the wearing of PPE:**
   - Cloth face coverings must be worn by every employee not working alone on the job site unless their exposure dictates a higher level of protection under L&I safety and health rules and guidance. PPE includes gloves, goggles, face shields, and face masks as appropriate or required for the work activity.
   - This guidance clarifies and builds out the worksite safety guidance embedded in the June reopening guidance (Reopening Washington Schools 2020: District Planning Guide). Key points are as follows:
     - The overall health risk for the typical K–12 in-person instructional setting is classified as low risk and a cloth mask is considered sufficient PPE. There are other scenarios in the school setting where the risk level may be higher or lower.
     - In medium risk situations, L&I's long-standing guidance allows for several different protection options, including a face shield with a cloth face mask, a surgical-style mask, a hobby dust mask, a KN95 mask, or a KN90 mask.
     - For high risk or extremely high risk situations, an N95 respirator or equivalent should be used. If an employer cannot reasonably obtain an N95 or equivalent, they may use a face shield plus an FDA-approved surgical mask, procedural mask, or a KN95 mask until a respirator can be obtained. N95 respirators or equivalent protection are only required in high risk or extremely high risk situations.
   - Exceptions to this requirement for cloth face coverings include:
     - if the individual is deaf or hard of hearing and is communicating with someone who relies on language cues such as facial markers and expression and mouth movements as a part of communication;
     - if the individual has a medical condition or disability that makes wearing a facial covering inappropriate; or
     - if the job has no in-person interaction.
5. **Promote frequent and adequate hand washing:**
   - Provide an adequate maintenance of supplies.
   - Use disposable gloves where safe and applicable to prevent transmission on tools or other items that are shared.
6. **Increase the frequency of facility cleaning:**
   - Cleaning and sanitizing will have a particular emphasis on commonly touched surfaces.
   - This shall be no less stringent or frequent than what is required by the Department of Health's fall guidance for K–12 schools.
7. **Attestation/Screening:** employees, students, and any other individual who will be at the school facility for more than 15 minutes will be screened for signs/symptoms of COVID-19 at start of every shift.
8. **Ensure sick employees and students stay home** or immediately go home if they feel or appear sick.
9. **Cordon off all areas** where staff or student with probable or confirmed COVID-19 illness worked, touched surfaces, etc. until the area and equipment is cleaned and sanitized following the cleaning and sanitizing guidelines established by the Department of Health in their fall K–12 guidance.

King County Schools COVID-19 Response Toolkit

Managing COVID-19 within schools to help reduce transmission and keep students, staff and families healthy and safe requires a coordinated team response. Identifying staff to play specific roles within the team is critical to ensuring a coordinated response. Assigning alternate staff to cover certain responsibilities in case one or more team members are absent is highly recommended.

The following is a list of four roles within each school to facilitate a coordinated response to COVID-19 related illness events.

School COVID-19 Coordinator(s): Districts will assign a site-specific COVID-19 supervisor at each school and other work sites to monitor the health of employees and enforce the COVID-19 job site safety plan.
1. Provides resources and information about COVID-19 and quarantine/isolation to ill staff and families of ill students, such as the enclosed fact sheets for families and staff.
2. Gathers additional information about close contacts for tracking on the School Case & Close Contact List Template (B) (see enclosed template).

3. Serves as liaison to District COVID-19 Coordinator. Sends completed School Case & Close Contact List Template (B) to District COVID-19 Coordinator and alert them to COVID-19 positive cases in school.
4. Manages internal and external communications regarding outbreak status of the school. Serves as the point-of-contact to answer questions and provide information for staff/students/families.
5. Notifies close contacts of COVID-19 positive student/staff of the exposure and need to quarantine.
6. Maintains and disseminates COVID-19 procedures, protocols and information to all staff, students and families, including privacy policies regarding COVID-19 health information and infection status.
7. Assures that there is staff designated and available daily to fulfill COVID-19 Response Team Roles within the school.

COVID-19 Screening Lead:
1. Gathers information about symptomatic students and staff
2. Notifies parent/guardian/emergency contact to facilitate student/staff getting home safely.
3. Gathers preliminary information for School Case & Close Contact List Template (B) (see toolkit template), including dates of infectious period (see Return to School Following Illness-Exposure Guidance (L) to identify the dates).
4. Ensures that students/staff are using cloth face coverings.
5. Notifies Infection Control Lead of need to initiate infection control protocols.

COVID-19 Isolation Supervisor:
1. Supervises area where students/staff who develop COVID-19 symptoms while at school are kept until they can leave school.
2. Assures that student/staff remain masked and maintain minimum social distance from others while waiting.
3. Assures that student is released to parent/guardian or designee.

Infection Control Lead:
1. Prepares COVID-19 cleaning and disinfecting plans and regularly updates plans with new or revised CDC and WA DOH guidance.
2. Facilitates initiation of cleaning and disinfecting protocols of all affected areas.
3. Notifies custodial staff that affected area(s) must be cleaned and disinfected in accordance with CDC COVID-19 cleaning/disinfection protocols.
4. Assures that affected areas are not used until cleaning is complete (i.e. close off area, post sign).
5. Assures that COVID isolation area is disinfected daily.
6. Confirms that custodial staff has completed cleaning and disinfecting all affected areas.
7. Maintains and updates cleaning and disinfecting protocols and procedures.

Recommended Learning Model, where most students and teachers participate in virtual learning and some students and teachers engage in in-person learning, with the following mitigation:

- Small, in-person classes, activities, and events
- Cohorting and alternating or staggered schedules, rigorously applied
- No mixing of groups of students and teachers throughout/across school days
- No sharing of objects between students and teachers
- Students, teachers, and staff follow all steps to protect themselves and others at all times including proper use of face masks, social distancing, and hand hygiene
- Regularly scheduled and consistent (i.e., between uses) cleaning of frequently touched areas

Accessible COVID-19 interview series is available for community members who are deaf and hard of hearing: Public Health created a site that is accessible to community members who are Deaf and Hard of Hearing including ASL interpretation, captions, and transcripts. The interviews address current information on COVID-19, vaccine safety, historical medical racism and trauma, and challenge that mask-wearing poses for community members who are Deaf and Hard of Hearing along with tips for communicating when someone signs or reads lips.

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How to Set Up Your Classroom

Ventilation Guidance and Air Quality

Washington State COVID-19 Outbreaks in K-12 Schools Report

CDC School Readiness Planning Tool (just released)