

This guidance uses the most up-to-date information available from the CDC and emerging best practices, thus subject to change.

Schools, working together with local public health districts, have an important role in slowing the spread of diseases to help ensure students have safe and healthy learning environments. Schools serve students, staff, and visitors from throughout the community. All of these people may have close contact in the school setting, often sharing spaces, equipment, and supplies.

Schools are encouraged to review the checklist in Appendix A to ensure that they have everything in place to prevent COVID-19 infections, to respond to cases when they occur among students and/or staff, and to be prepared for short-term and long-term school closures. Public health districts are available to review plans and provide assistance.

Guidance for schools includes the following:

- Confirmed Case in School, Regardless of Community Transmission
- Category 1: No community transmission (preparedness phase)
- Category 2: When there is minimal to moderate community transmission
- Category 3: When there is substantial community transmission
- Communication and Guidance for School Staff and Parents
- Appendix A COVID-19 Preparedness Checklist



Confirmed Case in School, Regardless of Community Transmission

Any school in any community may need to implement short-term closure procedures regardless of community spread if an infected person has been in a school building.

Coordinate with your local public health district.

- Contact your local public health district and we will work with you to determine a course of action
- Begin identifying anyone who may have been in <u>close contact</u> with a confirmed or suspected COVID-19 case. Close contact is less than 6 feet for more than 15 minutes. While face coverings are believe to reduce the risk, they are not considered as protective for the purpose of identifying close contacts.
- Collaborate with your local public health agency to determine the process for notifying close contacts and instructions for staying home and <u>self-monitoring for symptoms</u>, and <u>follow CDC guidance</u> if symptoms develop.
 - Example: local public health may reach out to close contacts via phone for an official notification, and the school will disseminate a letter to the school community informing them of the situation.

Follow local public health guidance for course of action. Recommendations will be given on a case-by-case basis, and could include the following:

- Exposure to others in the school was minimal, no close contacts were identified, and positive case should self-isolate and return once criteria to discontinue home isolation and quarantine have been met.
- Exposure to others in the school was moderate, a handful of close contacts were identified, and positive case and close contacts should stay home for isolation.
- Exposure to others was severe, multiple close contacts were identified and risk of exposure to larger school community warrants a dismissal of in-person learning.

A short-term dismissal of students and most staff for 1-2 days may be recommended.

- Initial short-term dismissal allows time for the local health officials to gain a better understanding of the COVID-19 situation impacting the school. This allows the local health officials to help the school determine appropriate next steps, including whether an extended dismissal duration is needed to stop or slow further spread of COVID-19.
- Local health officials' recommendations for the scope (e.g., a single school, multiple schools, the full district) and duration of school dismissals will be made on a case-by-case basis using the most up-to-date information about COVID-19.
- During school dismissals, also cancel extracurricular group activities, school-based afterschool programs, and large events (e.g., assemblies, field trips, and sporting events).
- Encourage and practice physical distancing.

Extended school dismissal may be recommended.

• Depending on the level of risk and subsequent cases as a result of exposure at school, a longer school dismissal may be warranted.



- Work with local health officials on whether staying open for staff while students stay home is advised, or reinstate telecommuting or other alternative work opportunities.
- Administrators are not expected to make extended school dismissal decisions or determine when students and staff should return to schools on their own and should work in close collaboration and coordination with local health officials.
- Students and staff who are well but are taking care of or share a home with someone with a case of COVID-19 should follow instructions from local health officials to determine when to return to school.

Communicate with staff, parents, and students regarding dismissal decisions and possible COVID-19 exposure.

- Include messages to counter potential stigma and discrimination
- Coordinate responses with local public health
- Maintain confidentiality in accordance with the <u>Americans with Disabilities Act (ADA) and Health Insurance</u> <u>Portability and Accountability Act (HIPAA)</u>
- Outline intended response efforts

Clean and disinfect thoroughly.

- Close off areas used by the individual with COVID-19 and wait as long as possible, up to 24 hours, before beginning cleaning and disinfecting. Open doors and windows if possible.
- Clean all other areas, especially highly touched surfaces, such as doorknobs, lights, desks, phones, keyboards, faucets, sinks. Resource: <u>Cleaning and Disinfecting Your Facility</u>

Reinstate strategies to continue education and related supports to students as needed.



Category 1 No Community Spread

Evidence of isolated cases or limited community transmission, case investigations underway, no evidence of exposure in large communal setting, e.g., healthcare facility, school, mass gathering.

Review, update, and implement emergency operations plan and reinforce healthy hygiene practices.

- Include strategies (Non-pharmaceutical interventions, or NPI) to reduce the spread of a wide variety of infectious diseases, physical distancing and school dismissals that can be used to stop the spread.
- Emphasize everyday preventive actions for students and staff
 - CDC Staying Home When Sick Flyer / What To Do If You're Sick
 - Spanish Version
 - CDC Avoid Spreading Germs At Work Flyer / Stop the Spread of Germs
 - <u>Spanish Version / Spanish Version</u>
 - o <u>CDC Handwashing Posters for Children and Teens</u>
 - DECCOVER Your Cough Flyer
 - Spanish Version

Intensify cleaning and disinfection efforts.

- Enhance cleaning of high touch surfaces like doorknobs, toilet handles, light switches, classroom and bathroom sink handles, countertops.
- Ensure that hand sanitizer, soap/paper towels, and tissues are widely available in school facilities.

Monitor and plan for absenteeism.

- Day-to-day reporting (absenteeism) of students and staff, and review for patterns for large increases.
- Encourage students and staff to stay home when sick or when they have symptoms, even without documentation from doctors. Use flexibility, when possible, to allow staff to stay home to care for sick family members, especially for those with common cold and flu symptoms, which are similar to COVID-19.
- Cross-train staff and create a roster of trained back-up staff.

Assess group gatherings and events.

• Review any planned events (e.g. assemblies, field days, athletic events) and determine if physical distancing strategies can be put place. If not, consider cancelling, rescheduling or modifying. Give special consideration to events that might put students, staff, or their families in close proximity to others from communities that may have identified cases of COVID-19.

Create and test communication plans for use within the school community.

- Create strategies for communicating with staff, students, and their families, including sharing steps being taken to prepare, how information will be shared in the future.
- Designate a staff person to be responsible for responding to COVID-19 concerns, and ensure all staff and families know who this person is, and how and when to contact them.
- Put system in place for having staff and families self-report to the school if they or their student have symptoms of COVID-19, a positive test, or were exposed to someone with COVID-19 within the last 14 days.
 - Maintain privacy and confidentiality.



Require students and staff to stay home if they are sick or have symptoms. Establish procedures for students and staff who become sick or develop symptoms at school.

- Sick or symptomatic staff and students should be sent home or to a healthcare facility depending on how severe their symptoms are as soon as possible, and keep them separate and isolated from well students and staff until they can leave. Following <u>CDC guidance for caring for oneself and others</u> who are sick.
- Schools are not expected to screen students or staff to identify cases of COVID-19. If a school has cases of COVID-19, local health officials will help identify those individuals and will follow up on next steps.
 Resource: Flyer <u>Steps to help prevent the spread of COVID-19 if you are sick</u> / <u>Spanish Version</u>

Begin implementing mitigation strategies and plan for when community spread occurs (non-pharmaceutical interventions or NPIs).

- <u>Personal NPIs</u> (e.g. stay home when sick, cover coughs, wash hands, etc.)
- Community NPIs (e.g. social and physical distancing)
- <u>Environmental NPIs</u> (e.g. routine cleaning practices)

Review and update leave (time off) policies and excused absence policies.

- Implement flexible sick leave policies and practices that enable staff to stay home when they are sick, have been exposed, or caring for someone who is sick.
 - Leave policies should also account for employees who need to stay home with their children if there are school or childcare closures, or to care for sick family members.
- Develop policies for return-to-school after COVID-19 illness using CDC's <u>criteria to discontinue home</u> <u>isolation and quarantine</u>

Provide Staff Training.

- Train staff on all safety protocols.
- Conduct training virtually or ensure physical distancing is maintained during training.

Ensure Consistent Non-School Events Facility Use.

- Encourage organizations that share or use school facilities to follow your plans.
- Share your re-opening and operational plans with other organizations that utilize your school space.

Support Coping and Resilience.

- Encourage employees and students to take breaks from watching, reading, or listening to news stories about COVID-19, including social media if they are feeling overwhelmed or distressed.
- Promote employees and students eating healthy, exercising, getting sleep, and finding time to unwind.
- Encourage employees and students to talk with people they trust about their concerns and how they are feeling.
- Consider posting signage for the <u>Idaho COVID-19 hotline</u> (Spanish Version), the national distress hotline: 1-800-985-5990, and/or text "TalkWithUs" for English or "Hablanos" for Spanish to 66746
 - o Disaster Helpline Wallet Card



Category 2 Minimal to Moderate Community Transmission

Widespread and/or sustained transmission with high likelihood or confirmed exposure within communal settings, with potential for rapid increase in suspected cases.

If local health officials report there are multiple cases of COVID-19 in the community, schools may need to implement additional strategies in response to prevent spread in the school, but they should continue using the strategies they implemented when there was no community transmission. These additional strategies include:

Coordinate with local health officials.

• This should be a first step in making decisions about responses to the presence of COVID-19 in the community. Health officials can help a school determine which set of strategies might be most appropriate for their specific community's situation.

Implement multiple physical distancing strategies. Select strategies based on feasibility given the unique space and needs of the school:

- Pursue virtual group events, gatherings, or meetings in lieu of field trips, assemblies, special performances, spirit nights, as possible; and promote 6 feet between people if events are held, and limit group size to support appropriate physical distancing.
- **Cancel or modify classes where students are likely to be in very close contact.** In physical education or other close contact classes, consider having teachers come to classrooms to prevent classes mixing with others in the gymnasium or music room.
- **Increase the space between desks.** Rearrange student desks to maximize the space between students. Turn desks to face in the same direction (rather than facing each other) to reduce transmission caused from virus-containing droplets (e.g., from talking, coughing, sneezing).
- Avoid mixing students in common areas.
 - o Allow students to eat lunch and breakfast in their classrooms or stagger lunch.
 - \circ $\;$ Stagger recess times and/or separate recess areas by class.
 - \circ Send a few students into the library to pick out books rather than going as a class.
 - o Restrict hallway use through homeroom stays or staggered release of classes.
 - Try to avoid taking multiple classes to bathrooms at once (e.g., avoid having all classes use the bathroom right after lunch or recess).
 - Ensure student and staff groups (cohorting) are static as much as possible (all day for young children, as much as possible for older children).
- **Stagger arrival and/or dismissal times.** These approaches can limit the amount of close contact between students in high-traffic situations and times.
- **Reduce congestion in the health office.** Use the health office for children with flu-like symptoms and a satellite location for first aid or medication distribution.
- Limit nonessential visitors. Limit the presence of volunteers for classroom activities, mystery readers, cafeteria support, and other activities.
- **Limit cross-school transfer for special programs.** If students are brought from multiple schools for special programs (e.g., music, robotics, academic clubs), consider using distance learning to deliver the instruction or temporarily offering duplicate programs in the participating schools.



- **Teach staff, students, and their families to maintain distance from each other in the school.** Educate staff, students, and their families at the same time and explain why this is important.
- Consider alternative class size and structure.
 - Create hybrid classrooms where students can attend virtually and in-person, reducing social contacts.
 - Hold physical education and music classes outside and encourage students to spread out.
 - Turn desks to face same direction and space at least 6 feet apart.
 - Stagger days or instructional blocks of time (morning/afternoon).
- Teach and reinforce the wearing of cloth face coverings when practical while at school.
 - Staff and students (and visitors and volunteers, if permitted) should be encouraged to wear cloth face coverings.
 - Personal cloth face coverings can be worn, or school can provide for those who do not have one but wish to wear one.
 - When physical distancing cannot take place, further reinforce the use of cloth face coverings.
- Conduct daily health screenings of employees and students for COVID-19 symptoms upon entry to the facility, including a check for low-grade fever with no-touch thermometer and/or daily <u>symptom</u> <u>checking</u>.
- Pursue options to convene sporting events and participation in sports activities in ways that minimize the risk of COVID-19 transmission to players, families, coaches, and communities.
 - Discourage activities that promote heaving breathing (e.g. singing, cheering, shouting) and create alternative ways to show support (e.g. clapping or waving).
 - Limit spectators to allow for appropriate physical distancing and encourage cloth face coverings in group settings; consider streaming sporting events live.

Maintain healthy environments.

- Intensify cleaning and sanitizing of drinking fountains. Encourage staff and students to bring their own water to minimize use and touching of water fountains, and <u>take steps</u> to ensure water systems and features are safe after prolonged facility shutdown.
- **Clean and disinfect school buses or other transport vehicles.** See guidance for <u>bus transit operators</u>, and create distance between children when possible.
- Assess shared objects and space for personal belongings.
 - o Discourage sharing of items that are difficult to clean.
 - Keep child's belongings separated from others in individually labeled containers, cubbies, or areas.
 - Minimize sharing high touch materials where possible (e.g. individual art supplies) or limit use of supplies/equipment by one group of children at a time and clean and disinfect between use.
 - Avoid sharing personal items (toys, books, electronic devices).

• Install physical barriers and guides.

- Place sneeze guards or partitions in areas where it's difficult to maintain 6 feet (e.g. reception desks, between bathroom sinks).
- Provide physical guides, such as tape on floors or sidewalks and signs on walls to remind students to remain 6 feet apart. Particularly with line formation, consider one-way routes in hallways.



• Modify communal areas.

• Close communal use shared spaces such as dining halls and playgrounds with shared playground equipment if possible; otherwise, stagger use, and <u>clean and disinfect</u> between uses.

• Adapt food service.

- Have children bring their own meals as feasible, or serve individually plated meals in classrooms; eliminate buffet or family style meals.
- Use disposable food service items (e.g. utensils, dishes). When not feasible or desirable, handle with gloves and wash with dish soap and hot water or dishwasher. Individuals should <u>wash their hands</u> after removing gloves or handling food service items.
- If food is offered at an event, have pre-packaged boxes or bags for attendees.

Consider ways to accommodate the needs of children and families at <u>higher risk</u> for serious illness from COVID-19.

- Honor requests of parents who may have concerns about their children attending school due to underlying medical conditions of those in their home.
- Staff who cannot be at school due to their own high-risk conditions can provide distance learning instruction to those students who are also unable to attend.
- People 65 years of age and older.
- The CDC lists underlying medical conditions that may increase the risk of serious COVID-19 for people of any age:
 - o **Blood disorders** (e.g. sickle cell disease or on blood thinners).
 - Severe obesity (i.e. body mass index [BMI] of 40 or higher)
 - **Chronic kidney disease as defined by your doctor**. Patient has been told to avoid or reduce the dose of medications because kidney disease, or is under treatment for kidney disease, including receiving dialysis.
 - **Chronic liver disease** as defined by your doctor (e.g., cirrhosis, chronic hepatitis). Patient has been told to avoid or reduce the dose of medications because liver disease or is under treatment for liver disease.
 - **Compromised immune system** (immunosuppression) (e.g., seeing a doctor for cancer and treatment such as chemotherapy or radiation, received an organ or bone marrow transplant, taking high doses of corticosteroids or other immunosuppressant medications, HIV or AIDS).
 - Endocrine disorders (e.g., diabetes mellitus).
 - Metabolic disorders (such as inherited metabolic disorders and mitochondrial disorders).
 - **Heart disease** (such as congenital heart disease, congestive heart failure and coronary artery disease).
 - **Lung disease** including asthma or chronic obstructive pulmonary disease (chronic bronchitis or emphysema) or other chronic conditions associated with impaired lung function or that require home oxygen.
 - **Neurological and neurologic and neurodevelopment conditions** [including disorders of the brain, spinal cord, peripheral nerve, and muscle such as cerebral palsy, epilepsy (seizure disorders), stroke, intellectual disability, moderate to severe developmental delay, muscular dystrophy, or spinal cord injury].



Category 3 Substantial Community Transmission

Large-scale community transmission, healthcare staffing significantly impacted, multiple cases within communal settings like healthcare facilities, schools, mass gatherings, etc.

Additional strategies should be considered when there is substantial transmission in the local community in addition to those implemented when there is no, minimal, or moderate transmission. These strategies include:

Continue to coordinate with local health officials.

• If local health officials have determined there is substantial transmission of COVID-19 within the community, they will provide guidance to administrators on the best course of action for schools. These strategies are expected to extend across multiple programs, schools, or school districts within the community, as they are not necessarily tied to cases within schools.

Consider extended school dismissals.

- In collaboration with local health officials, implement extended school dismissals (e.g., dismissals for longer than two weeks). This longer-term, and likely broader-reaching, dismissal strategy is intended to slow transmission rates of COVID-19 in the community.
- During extended school dismissals, also cancel extracurricular group activities, school-based afterschool programs, and large events (e.g., assemblies, spirit nights, field trips, and sporting events).
- Remember to implement strategies to ensure the continuity of education (e.g., distance learning) as well as meal programs and other essential services for students.



Communication and Guidance for Parents and Staff

What increases the chance of school closures?

- Experiencing a positive case or cluster of cases where:
 - Physical distancing strategies are not in place
 - o Students and staff do not consistently wear cloth face coverings
- Not cleaning and disinfecting appropriately
- Not washing and/or sanitizing hands frequently
- Not limiting the mixing of students
- Holding mass gatherings, especially with attendees outside of your local community
- Sick staff and/or students on campus when symptomatic
- Rapid rise in positive cases in the local community that meet or exceed hospital capacity to manage

My child attends a school where a COVID-19 case has been confirmed. What should I do?

- **Guidance from local public health districts may be given on a case-by-case basis.** Transmission takes place with close contact (shared a classroom, was seated next to the person for at least 15 minutes), and there is a chance your student was not exposed (in another wing of the school). Some examples of guidance may include:
 - Monitor for signs and symptoms <u>Symptom Self Checker</u> / <u>Spanish Version</u> or the <u>COVID-19 Screen</u> <u>Tool.</u>
- If a student or staff is medium or high-risk reference:
 - Who should self-quarantine after potential COVID-19 exposure.
 - Encourage good hygiene stop handshaking, clean hands at the door and at regular intervals, avoid touching your face and cover coughs and sneezes.
 - Stay home if you are sick, have symptoms, or have a sick or symptomatic family member in your home.
 - If recommended by the CDC, wear a face covering, but keep in mind this may cause an increase in touching the eyes, nose, and mouth.
- The CDC does not recommend testing for people who do not have symptoms.

What is considered a "close contact"?

• The CDC defines it as a person that has been within 6 feet of the infected person for a prolonged period of time (about 15 minutes). Wearing a face covering while within 6 feet does not eliminate consideration as a close contact.

When can a student or staff member discontinue home isolation?

- Persons who have tested positive for COVID-19 or who have not been tested but had COVID-19 symptoms and were directed to care for themselves at home may discontinue home isolation under the following conditions:
 - At least 3 days (72 hours) have passed *since recovery* defined as resolution of fever without the use of fever-reducing medications **and**
 - \circ improvement in respiratory symptoms (e.g., cough, shortness of breath); and,

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- At least 10 days have passed since symptoms first appeared.
- Some individuals may not experience COVID-19 symptoms but test positive. Their discontinuation of home isolation guidance can be found <u>here</u>, which is typically 10 days since being tested but may be dependent on healthcare provider's advice and availability of testing.

What should I include in my message to our school community of a confirmed case that has been in our school?*

*Public Health Districts will work in partnership with the school to identify, notify, and monitor close contacts of confirmed COVID-19 cases in school settings in accordance with CDC guidance.

- Possible dates of exposure.
- Remind employees that there is current community spread of COVID-19. Advise them to watch for signs and symptoms which develop within 2 14 days of exposure.
- Remind employees how to best protect themselves from COVID-19 and the importance of staying home if they are sick or have symptoms.
- Let your employees know what your establishment is doing as a result of exposure (e.g. closing, cleaning)
- Remind your employees of the establishment's illness policy.
- Where to find reputable sources and information for COVID-19.
- o <u>Centers for Disease Control and Prevention</u>
- <u>Panhandle Health District; Public Health Idaho North Central District; Central District Health;</u> <u>Southwest District Health; South Central Public Health; Southeastern Idaho Public Health;</u> <u>Public Health</u>
- o <u>Governor's Coronavirus Website</u>



Appendix A School Preparedness Checklist for COVID-19

This guidance uses up-to-date information from the CDC and emerging best practices, thus subject to change.

Local public health districts support schools in resuming normal operations based on their community needs and COVID-19 community spread. Schools should continue using the strategies they implemented if their level of community transmission increases (e.g. If moving to Category 2, include Category 1 & 2 strategies).

Category 1: No Community Transmission

- □ Review, update, and implement emergency operations plans
- □ Reinforce healthy hygiene practices
- Intensified cleaning disinfection protocols and practices are in place
- Monitor and plan for absenteeism (and plan for students/parents who do not feel comfortable returning to school)
- Review group gatherings and events, and determine if social distancing strategies can be put in place
- Communications plan for informing parents and staff of the school district and charter school response plans, protocols, and policies to manage the impact of the coronavirus
- Revised student/staff illness policies require them to stay home when ill, procedure for when they become sick at school, and parent/guardian responsibility for immediate pick-up from school when notified
- Verify point of contact for each school district and charter school for effective communication and collaboration with local public health officials
- □ Begin implementing mitigation strategies and plan for when community spread occurs
- Prepare for your first confirmed COVID-19 case in school, including coordinating with local public health, communication to your school community, possible short-term closures for students and staffs (1-2 days) and cancellation of all group events and activities, and possible extended dismissals

Category 2: Minimal to Moderate Community Transmission

- □ Coordinate with local health officials
- □ Identify social distancing strategies based on feasibility of space and needs of the school, including staff duties which require close contact and mitigation strategies to use
- Teach and encourage students, staff, and visitors to wear cloth face coverings when practical, and provide for those who do not have one but wish to wear one
- Communicate with local public health districts to determine if screening employees and students daily for COVID-19 symptoms upon entry to the facility, including check for low-grade fever with no-touch thermometer
- □ Identify and plan for vulnerable staff and students with a special emphasis on people over age 60 and those who are medically vulnerable

Category 3: Substantial Community Transmission

- □ Continue coordination with local health officials
- □ Consider extended school dismissals and reinstate continuity of teaching and learning plans

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