



Overarching COVID-19 Guidance for Development of School Mitigation Plans

Many schools are considering re-opening this fall depending on their community's educational priorities and perspectives. The purpose of this guidance is to help K-12 school administrators and employees prepare for learning options. School districts will determine the most appropriate instructional model, considering the needs of their students and staff, and their available infrastructure. Instruction options include: all on-line instruction; all on-line instruction with transition to an on-campus instruction, when there is less community transmission; hybrid models, with some students on-line and some students on campus; and all students on campus. School officials should consult relevant authorities such as local, state, tribal governments, Office of the Governor, Arizona Department of Education, and your school and district leadership for orders or legislation that may supersede these guidelines.

Implementation of this guidance, as well as decisions on school opening and closures, will depend on public health conditions as guided by Arizona Department of Health Services (ADHS) as well as local County input ([Executive Order 2020-51](#)). PCHD currently recommends inclusion of the current COVID-19 metrics that are found on the [Pima County COVID-19 dashboard](#) as a factor in re-opening schools. As of August 4, 2020, Pima County metrics includes *disease transmission*, *healthcare system status* and *public health system status* as benchmarks for the current status of the pandemic. Note that these current metrics will be utilized in conjunction with Arizona State Health Department guidance and other scientific and official information. Pima County Health Department (PCHD) recommendations on the closing and re-opening of schools will continue to be updated based on the changing pandemic situation.

Additional recommendations include the development of a written, worksite-specific, COVID-19 prevention plan for every school district or facility. This plan should include a comprehensive risk assessment of all work areas and work tasks. These documents will serve as the foundation for a COVID-19 prevention plan. Each site is strongly encouraged to designate a person or team to implement the plan as developed. This individual or team will be provided contact information for a liaison at PCHD. The liaison will be available to assist with technical aspects of this document, communicate rapidly evolving information about COVID-19, and relay potential outbreak information among students or staff.

This document draws on multiple sources including: the expertise of local and state health officials, guidance issued by the Centers for Disease Control and Prevention, and plans from other states (e.g. California, North Carolina, Wisconsin). We note that the scientific knowledge base about COVID-19 is changing rapidly and will continue to change for the foreseeable future. As a result, this guidance is subject to change. New data may suggest change to policies and practices. Interpretation and application of new data as it applies to our local populations and conditions will be ongoing and communicated in a timely manner through multiple mediums. These guidelines and considerations are based on the best available public health data at this time, international best practices currently employed, and the practical realities of managing school operations. Guidelines may not reflect the full scope of issues that school communities will need to address related to COVID-19 learning and health issues.

(Cont.)


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We recommend school districts use this guidance in addition to other sources including:

- Arizona Department of Education <https://www.azed.gov/>
- Arizona Department of Health Services <https://www.azdhs.gov/>
- Centers for Disease Control and Prevention <https://www.cdc.gov/coronavirus/2019-ncov/index.html>
- Maricopa County Health Department <https://www.maricopa.gov/5460/Coronavirus-Disease-2019>
- Pima County Health Department
<https://webcms.pima.gov/cms/One.aspx?portalId=169&pageId=527452>

SCHOOL RE-OPENING QUICK REFERENCE GUIDE

This can be used as a quick reference guide. Additional information is included in the detailed guidance¹.

CRITICAL READINESS ASSESSMENT (CDC)	
Are you compliant with state and local public health orders about school closures (e.g. from the Governor’s Office, Tribal Nations, Arizona Department of Health Services, and/or Local health departments)?	If NO: Do not open ALL YES 
School ready to protect children and employees at high risk for severe illness? (e.g. remote learning plans) PDF Guide	

HEALTH, SAFETY, AND MONITORING PREPARATIONS ASSESSMENT	
School ready to screen employees upon arrival for symptoms and history of exposure?	If NO: ADDRESS FIRST ALL YES 
School has a process for daily reminders or another process to remind parents/guardians to report child screening and history of exposure.	
School has adequate PPE supplies	
School will comply with masks requirement for all persons five years and older	
School will implement a plan for social distancing on campus	
School plan to clean, disinfect, and ventilate are consistent with CDC and PCHD recommendations	
Ability to follow CDC and PCHD guidance for COVID- 19 positive employees or students	
All employees have been trained on health and safety protocols	
School regularly communicates that anyone who is sick should stay home	
School able to monitor student and employee absences with absentee log	
School has written flexible leave policies and practices that do not require medical notes	
School able to regularly update their policies and procedures for cases, contacts and exposures	
School has a plan to communicate changes to local public health authorities, employees, and families	
School is ready to consult with the local health authorities if there are cases in the facility or an increase in cases in the local area	
School considers developing a mechanism to keep track of positive cases and contacts in conjunction with the local public health authority	

1. Sources: <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/Schools-Decision-Tree.pdf>; https://dpi.wi.gov/sites/default/files/imce/sspwitpdf/Reopening_School_Building_Risk_Assessment_Tool.pdf; National Academies of Sciences, Engineering, and Medicine (2020)

COVID-19 PLANNING: STAFF AND STUDENTS

This guidance suggests plans schools may need to re-open. It is not meant to be an exhaustive list. School plans will require ongoing monitoring and may change as needed.

The school has...

GENERAL	
...identified or created COVID-19 guidance for learning, health and safety for the school that addresses the elements in this and other relevant documents	
...an opening and potential closing plan	
... a strategy for ongoing checking of their plans with most recent local and state public health department guidance, Arizona Department of Education Guidance, and other sources (e.g. CDC)	
HEALTH	
...a plan and procedures for student and employee COVID-19 screening	
...a plan to decrease health risks and address learning needs for students (e.g. address IEP and learning needs)	
...a plan to decrease health risks for employees (e.g. distance learning instruction or alternate work responsibilities)	
EMPLOYEES/STUDENTS AT ELEVATED RISK <ul style="list-style-type: none"> ● People with weakened immune systems ● People with medical conditions ● People that may not understand need or be able to wear a face covering, or comply with hand hygiene or social distancing ● People that may have trouble reporting symptoms ● People over age 65 	EMPLOYEES/STUDENTS THAT MAY NEED EXTRA PRECAUTIONS <ul style="list-style-type: none"> ● Racial & ethnic minority groups ● People living in rural communities ● People experiencing homelessness ● Pregnant and/or breastfeeding ● People with disabilities ● People with developmental and behavioral disorders ● People with individual support providers
CALENDAR	
...considered calendar changes: e.g. varying starting times due to local health conditions or reducing group sizes	
...flexibility of the annual calendar in response to Influenza and COVID 19 resurgence	
STAFFING	
...a staffing plan to address a) instructional needs and b) health needs due to staff absences related to illness, quarantine or isolation	
... developed flexible leave policies and practices	
...identified staff: a) to respond to employee, student and parent COVID-19 questions; b) to communicate with the health department as needed; c) to coordinate response, documentation, reporting, and communications needed regarding confirmed cases to the identified liaison at the health department	
ATTENDANCE	
...a plan to monitor student and staff absences and reasons (i.e. experiencing COVID symptoms, isolation and reasons for isolation: possible exposure, confirmed exposure, confirmed case)	
... created flexible attendance policies that encourage sick employees and students to stay home; has clearly communicated these policies to employees, parents/guardians and students	
LEARNING	
...a plan to address various online learning barriers	

STUDENT AND EMPLOYEE COVID-19 SCREENING

SCREENING RESULTS

IF STUDENTS OR STAFF SCREEN POSITIVE:

- Students or staff who screen positive or who have suspected COVID-19 should be immediately placed in an appropriate area or room for isolation and separated apart from other students and staff.

School has plan in place for how students and staff with respiratory symptoms will be triaged to the health room and separated from injured or other ill students.

IF SYMPTOMATIC:

- Establish procedures for students or staff who have symptoms of COVID-19 or are feeling unwell to be sent home and/or isolated from others until picked up.
- **Keep face covering on while in the school**
- Symptomatic students and staff should be instructed to seek out COVID-19 testing and stay home for at least 10 days
- Follow cleaning and disinfecting protocols (mitigation strategies) suggested by your local health department

IF BEEN IN CONTACT WITH A COVID-19 CASE:

- Students and staff who have been in contact with a COVID-19 case, stay home for 14 days after last day of contact exposure.
- Staff with suspected or confirmed COVID-19 should notify their supervisor.

IN ADDITION:

- Confirmation of an infected student or staff should result in short-term dismissal of the cohort of students and staff for 14 days beginning from the point of contact with the confirmed case
- Follow cleaning and disinfecting protocols (mitigation strategies) suggested by your local health department
- Monitor students and staff absences, these may indicate increased infection
- Process and personnel in place to notify public health authorities in case of a positive COVID-19 case (see [School Communicable Disease Report](#))
- When possible, school will keep a list of symptomatic students, staff, and their close contacts, to assist contact tracing efforts
- It is strongly recommended that a school nurse or health aide be on campus at all times
- It is strongly recommend that all students and staff be immunized each autumn against influenza unless contraindicated by personal medical conditions, to help:
 - Protect the school community
 - Reduce demands on health care facilities
 - Decrease illnesses that cannot be readily distinguished from COVID-19 and would therefore trigger extensive measures from the school and public health authorities

STUDENT AND EMPLOYEE COVID-19 SCREENING NEW CDC

PREPARATION: If in-person screening:

- All points of entry should be staffed with screening personnel
- Screener should be masked and maintain social distance from people being screened
- If students or staff screens positive, follow directions below
- Designated location prepared for students or staff if Section 1 and 2 have a “YES”
- Trained nurse or health aide prepared to support care for ill students or staff if identified at school
- If checking temperatures (optional), use a no-touch thermometer

DAILY: Develop a screening plan for use within the school environment consistent with CDC guidance at the current time. ASK staff, students, or parents/guardians of student:

	N	Y	
<p>SECTION 1: Do you/Has the child/children: have any of the following <u>symptoms</u>:</p> <ul style="list-style-type: none"> ● Fever $\geq 100.4^{\circ}\text{F}$ or chills ● Cough (for students with chronic allergic/asthmatic cough, a change in their cough from baseline) ● Shortness of breath or difficulty breathing ● Fatigue ● Muscle or body aches ● Headache (new onset) ● New loss of taste or smell ● Sore throat ● Congestion or runny nose ● Nausea or vomiting ● Diarrhea or abdominal pain 			<p>IF YES to SECTION 1 + NO to ALL SECTION 2: Follow school policies on typical illness management</p> <p><u>School</u></p> <ul style="list-style-type: none"> ● Stay masked and isolate immediately in designated space [isolate in a non-threatening manner, within sight of adults for as short a time.as possible] until can leave/be picked up ● Stay home unless to go to medical care, monitor symptoms, seek medical care as needed (call first) ● Discuss need for test with healthcare provider ● Notify parents/guardians, and designated school personnel about student or staff absence and health status ● <u>May return to school when:</u> Fever-free for 24 hours without fever-reducing medication, AND symptoms have improved, AND no-one in household has a confirmed case or is experiencing symptoms consistent with COVID-19 <p>IF YES to SECTION 1 + YES to ANY SECTION 2:</p> <p><u>School</u></p> <ul style="list-style-type: none"> ● Stay masked and isolate immediately in designated space [isolate in a non-threatening manner, within sight of adults for as short a time.as possible] until can leave/be picked up ● Close off areas used by symptomatic and/or confirmed COVID-19 cases. Do not use the space before cleaning and disinfection. To reduce risk of exposure, wait 24 hrs. before you clean and disinfect. If it is not possible, wait as long as practicable ● Utilize appropriate PPE and ventilation while applying safe and correct application of disinfectants for cleaning ● Keep disinfectant products away from students <p><u>Home</u></p> <ul style="list-style-type: none"> ● Follow guidance on isolation or quarantine according to ADHS ● Call healthcare provider to obtain COVID-19 viral test ● Stay home unless to go to medical care, monitor symptoms, seek medical care as needed (call first) ● Separate (isolate) from other family members if possible; avoid sharing household items, clean high-touch surfaces. ● Wear a mask around others, cover coughs and sneezes and clean hands often using soap and water and scrubbing for 20 seconds ● <u>May return to school when:</u> at least 10 days since symptoms first appeared AND fever-free for 24 hours without fever-reducing medication, AND symptoms have improved (20 days if person is immunocompromised)*
<p>SECTION 2. Have you had close contact (less than 6 feet for > 15 minutes) in the last 14 days with:</p> <ul style="list-style-type: none"> ● Someone that has a confirmed case of COVID-19 case OR ● A person with symptoms of COVID-19 OR ● Someone that traveled to or lived in an area where the local, Tribal, territorial, or state health department is reporting large numbers of COVID-19 cases OR ● Someone who lives in areas of high community transmission. <p><u>Other Considerations:</u></p> <ul style="list-style-type: none"> ● Has a medical professional referred you for a COVID-19 test? ● Has a health official, from a hospital, or the health department advised you to isolate or quarantine due to a possible exposure? ● Since last present at school have you or student had a positive test for COVID-19? 			

COVID-19 HYGIENE AND SANITATION GUIDANCE

PLANNING	Y/N
School has safety and infection control plan and a schedule so products are used safely (i.e. not over-used).	
Regularly evaluate the workplace for compliance with the plan and document and correct deficiencies identified.	
SUPPLIES	Y/N
Ensure adequate supplies to support healthy hygiene behaviors, including soap, tissues, no-touch trashcans, face coverings, and hand sanitizers with at least 60 percent ethyl alcohol for staff and children who can safely use hand sanitizer	
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	
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 and avoid products that contain peroxyacetic (paracetic) acid, sodium hypochlorite (bleach) or quaternary ammonium compounds	
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.	
School has trained custodial staff that can implement increased daily cleaning needs	
PPE FOR CLEANING	Y/N
Custodial staff and any other workers who clean and disinfect the school site equipped with proper protective equipment, including gloves, eye protection, respiratory protection, and other appropriate protective equipment as required by the product instructions. All products must be kept out of children’s reach and stored in a space with restricted access.	
COVID-19 TESTING	Y/N
If considering COVID-19 testing at the school, consult with local health departments for guidance.	
GENERAL CLEANING AND SANITATION	Y/N
Establish a cleaning and disinfecting schedule in order to avoid both under- and over-use of cleaning products	
Take steps to ensure that all water systems and features (for example, drinking fountains and decorative fountains) are safe to use after a prolonged facility shutdown to minimize the risk of Legionnaires’ disease and other diseases associated with water.	
All frequently touched surfaces at school (e.g. door handles, light switches, sink handles, bathroom surfaces, tables, student desks, chairs) cleaned at least daily and if possible, more frequently	
Wipe down frequently touched surfaces and or shared objects in classrooms and common areas at least every 3 hours using approved products	
Desktop disinfection between classroom rotations or at specified times	
Intensify building cleaning and disinfection with appropriate supplies	

LAYERED MITIGATION STRATEGIES

HEALTH FUNCTIONS	Y/N
School maintains typical health functions in addition to COVID-19-related functions including checking immunization status	
Strongly recommend that all students and staff be immunized each autumn against influenza unless contraindicated by personal medical conditions, to help: <ul style="list-style-type: none"> ● Protect the school community ● Reduce demands on health care facilities ● Decrease illnesses that cannot be readily distinguished from COVID-19 and would therefore trigger extensive measures from the school and public health authorities 	
Trained nurse or health aide prepared to support care for ill students or staff if identified at school	

HAND HYGIENE	Y/N
Post signs encouraging good hand and respiratory hygiene practices	
Scheduled timed handwashing/hand sanitizer at least every 3 hours	
Consider portable handwashing stations throughout a site and near classrooms to minimize movement and congregations in bathrooms to the extent practicable	
Students and staff should wash their hands for 20 seconds with soap, rubbing thoroughly after application. Soap products marketed as “antimicrobial” are not necessary or recommended	
School has preference for soap and water over alcohol-based hand sanitizer. Hand sanitizer is only used when soap and water are unavailable.	
Hand sanitizer available: bathrooms, classrooms, halls, entrances, exits. <i>Sanitizer must be rubbed into hands until completely dry.</i> <i>Note: frequent handwashing is more effective than the use of hand sanitizers</i>	
Children under age 9 should only use hand sanitizer under adult supervision. Call Poison Control if consumed: 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.	
Do not use hand sanitizers that may contain methanol which can be hazardous when ingested or absorbed.	

PERSONAL ITEMS	Y/N
All students’ personal items are stored separately and brought home each evening.	
School has social distancing policies for accessing personal items	

SHARED SPACES AND EQUIPMENT	Y/N
Students do not share items or supplies unless necessary. Process in place to sanitize non-disposable shared equipment between uses	
Consider suspending or modifying use of site resources that necessitate sharing or touching items. For example, consider suspending use of drinking fountains and instead encourage the use of reusable water bottles.	
Limit use and sharing of objects and equipment, such as toys, games, art supplies and playground equipment to the extent practicable. When shared use is allowed, clean and disinfect between uses.	

HEALTH SPACES	Y/N
Isolation space for symptomatic employees/students has hard surfaces that can be sanitized. Space is cleaned after each person has occupied the space.	

PHYSICAL DISTANCING	Y/N
School has implemented staggered arrival and drop-off times and/or locations	
Students are encouraged to remain in their classrooms. If students leave their classrooms, they wear a cloth face covering, perform hand hygiene, limit movement in the building, and perform physical distancing.	
Establish policy for limited mixing between groups	
Smaller teacher-student ratios	
School encourages physical distancing by limiting the number of students in a classroom at one time to the amount that can fit while spaced 6 feet apart and limited mixing between groups, if feasible.	
Goal of small groups less than ten when feasible	
Consider assigned seating	
Desks all face same direction or students sit on only one side of tables	
Stagger recess/breaks and lunch breaks	
Consider limiting mixing of classes for school and after school activities using 'cohorts'	
School continues to offer virtual learning opportunities for students who are not present in the classroom.	
Where possible, school has closed break rooms and common areas. All staff are reminded to practice physical distancing when in any common areas that remain open	
Teachers/Aides remain with the same cohort or block or come to the classroom	
6 feet between desks/sitting areas (when social distancing cannot be maintained, consider physical barriers in addition to masks)	
Use of acceptable physical barriers when unable to maintain six feet apart; these are usually made out of acrylic plexi-glass or polycarbonate plastics	
School has determined what changes to physical infrastructure are required to support physical distancing and has submitted any necessary budget requests to pay for such modifications	

VENTILATION	Y/N
School has worked with an HVAC specialist to ensure their ventilation systems operate properly and have been modified to increase the circulation of outdoor air as much as possible in accordance with ASHRAE guidance for COVID-19.	
Ensure proper ventilation during cleaning and disinfecting. Introduce fresh outdoor air as much as possible, for example, by opening windows where practicable. When cleaning, air out the space before children arrive; plan to do thorough cleaning when children are not present. If using air conditioning, use the setting that brings in outside air. Replace and check air filters and filtration systems to ensure optimal air quality.	
If opening windows poses a safety or health risk (e.g., by 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).	
Consider installing portable high-efficiency air cleaners, upgrading the building's air filters to the highest efficiency possible, and making other modifications to increase the quantity of outside air and ventilation in classrooms, offices and other spaces.	

COVID-29 HEALTH GUIDANCE FOR ADDITIONAL SCHOOL FUNCTIONS

SCHOOL BUSES	Y/N
Buses should be thoroughly cleaned and disinfected daily and after transporting any individual ill. Drivers should be provided disinfectant wipes and disposable gloves to support disinfection of frequently touched surfaces during the day.	
Implement social distancing on school buses (one child/row and skip rows); family groups can sit together	
One masked child per bus seat	
Make hand sanitizer available on bus and provide guidance and signage for use	
Identify and implement accommodation for students with disabilities	
Encourage parental transportation	

MEALS/FOOD PREP	Y/N
School has stopped communal dining with multiple classrooms and serves individually plated meals in classrooms to students who did not bring their own meal from home while ensuring the safety of any students with food allergies.	
Safe preparation of meals if prepared on site	
In-classroom meals where feasible	

RECESS, SPORTS AND NON-CLASS ACTIVITIES	Y/N
Ability to adjust activities to adhere to latest public health recommendations. After-school activities only occur with physical distancing and mask use in groups of no more than X (the class size)	
School implements outdoor activity and instruction when possible	
Staggered/cohort recess to minimize contact with other class cohorts where possible	
School has developed and implemented strategies to restructure activities to support physical distancing	
Increased frequency of cleaning in sports facilities	
One-way circulation of athletes through facilities	
Non-contact sports can implement transmission risk-mitigation protocols that must address <ol style="list-style-type: none"> 1. Hygiene 2. Disinfection of equipment 3. Distancing between practice and competition 4. Number of participants 	
Only non-contact physical education with physical distancing and/or mask use Contact Sports: Ability to maintain distance during contact sports	
School has stopped activities that involve mixing groups or external groups inside the building and field trips outside of the building	
School has stopped field trips outside of the building	
No interscholastic athletic or other events or competitions	

ONGOING OPERATIONAL CONSIDERATIONS

PICK-UP, VISITORS OR NONESSENTIAL PERSONS AT SCHOOL	Y/N
School restricts all nonessential visitation (e.g. volunteers, guest speakers, parent-teacher conference) and uses online methods for these interactions when possible.	
Essential visitors, e.g. substitute teachers, screened prior to entry about symptoms and potential exposure. If positive, the visitors may not be enter the school.	
Schools should have a student drop-off and pick-up procedure so that parents/guardians or guardians wait outside or in their car for students to be dismissed. Social distancing is encouraged between families and students at pick-up and drop-off. Staggered arrival and drop-off may be implemented. If necessary, staff members in face coverings can monitor pick-up or escort younger children out of the building for appointments.	
Mail carriers and other delivery people do not need to be screened	
Permitted visitors on school grounds should be instructed to follow face covering, social distancing and hand hygiene guidance and limit movements to the area they were approved to visit.	
School has provided alternative methods for visitation.	
School has posted signs at entrances to the building advising that no visitors may enter the building.	
School determines whether school facilities may be used by external organizations. If yes, then these organizations must follow all guidance in this document including all hygiene and sanitation guidance.	

SCHOOL CLOSURE CONSIDERATIONS	Y/N
School has worked with local health officer to forecast situations in which schools may be required to close in the future based on the potential number of contacts, distribution of cases throughout the school, size of the school, and vulnerability of the population, along with other factors.	
School has plan to move to distance or virtual learning in the event of intermittent closures.	
School has created communication system to notify staff and families of closure.	
School has developed a plan to reopen after an intermittent closure and has developed communication to notify staff and families of reopening.	

COVID-19 HEALTH EDUCATION STRATEGIES

	Y/N
School has provided education <u>to students, staff and families</u> about the importance of social distancing outside of school-time	
School has provided education to <i>students</i> about: <ul style="list-style-type: none"> ● COVID-19 (e.g. symptoms, transmission, prevention) ● What to do if they are feeling sick ● Importance of the three W's to prevent illness: <ul style="list-style-type: none"> ○ Wearing a face covering ○ Walking 6 feet apart ○ Washing hands ● Reasons for changes in school routines (e.g. cohorting, meals, gatherings, activities and visitors) 	
School has provided training to <i>staff</i> about: <ul style="list-style-type: none"> ● COVID-19 (e.g. symptoms, transmission, prevention) <ul style="list-style-type: none"> ○ Proper use, removal and cleaning of face coverings and how to assist students with these actions ○ Policies for enforcing social distancing ○ How to teach/model/monitor: hand washing/use of sanitizer; use/disposal of tissues for coughing, sneezing and wiping noses ● Response if they or a student: is ill, has a possible exposure, has a confirmed exposure, has a positive test, and if the school has an outbreak (<i>defined as two or more cases that are linked within 14 days</i>) ● How the school will address illnesses for students and staff, and reporting requirements to the school and public health authorities ● Employee policies (e.g. leave) ● Reasons for changes in school routines (e.g. cohorting, meals, gatherings, activities and visitors) ● State and local mitigation efforts ● Employee role in health, hygiene and sanitation practices in the classroom and/or at school 	
School has provided education/materials to <i>families</i> about: <ul style="list-style-type: none"> ● COVID-19 (e.g. symptoms, transmission, prevention) ● COVID-19 screening and how school will respond to if a student: is ill, has a possible exposure, has a confirmed exposure, has a positive test, and if the school has an outbreak ● What to do if someone in their home gets sick ● Proper use, removal and cleaning of face coverings and how to assist children with these actions ● School health, hygiene and sanitation practices ● School policies on: Wearing a face covering, Walking 6 feet apart, Washing hands 	

COVID-19 SCHOOL COMMUNICATION

	Y/N
School has identified and trained personnel to communicate regularly about COVID-19 health and school policy issues and questions for multiple audiences: staff, students, and families	
School has a process for gathering updated COVID-19-related information from the CDC, the local and state health department, AZ Department of Education, and other relevant organizations to update policies and procedures as necessary	
School has designated staff and a process for tracking and managing information about: <ul style="list-style-type: none"> ● Screening ● Reports from staff, parents/guardians, and students about: possible exposures or confirmed cases ● Absences or symptom patterns that may be an outbreak <ul style="list-style-type: none"> ○ so illness may be tracked internally at the school and reported to: a) those in contact with possible or confirmed cases at school and b) relevant external organizations as directed by the health department 	
School has a process, compliant with FERPA and other applicable regulations and reviewed by school and district officials, as to how and when to notify: <ul style="list-style-type: none"> ● Students ● Families ● Employees ● Local health department about COVID-19 cases, exposures, and updates to policies and procedures within a specified time. 	
School has communicated with parents/guardians and students about: <ul style="list-style-type: none"> ● Procedures if the student has positive symptoms, a possible exposure or a confirmed exposure ● Criteria to return to school if exposed or after possible or confirmed illness ● Criteria for dropping off and picking up the student from school ● How remote learning will be managed if the student must isolate at home ● All other relevant policies and procedures (e.g. sports, activities, meals, transportation) 	
School has established processes for ongoing communication with state and local public health departments regarding school-based case reporting as well consultation and coordination	
School has established processes for ongoing communication with other schools in and out of district for coordination and information-sharing	

Use of Face Coverings in the School Setting

This guidance outlines infection control and personal protective equipment (PPE) recommendations, in response to coronavirus disease-2019 (COVID-19).

W – Wear a face covering **W** – Walk 6 feet apart **W** – Wash your hands

For this document, “face covering” refers to a well-fitting reusable or disposable face covering that fully covers a person’s nose and mouth. CDC does not recommend use of face shields for normal everyday activities or as a substitute for cloth face coverings.

REQUIRED:

- All students five (5) years and older, staff and visitors must wear face coverings.
- Wear face coverings when inside school buildings, anywhere on school grounds, and at school- related activities, whether indoor or outdoor.
- Face coverings must be worn by students and staff on buses or other public transportation vehicles.
- The face covering must cover both the nose and mouth. Always keep it in place. Students and staff should not touch the eyes, nose, or mouth when removing or adjusting a face covering. Wash hands or use hand sanitizer immediately after removing or adjusting the face covering.
- Share guidance and information with staff, students, and families on the proper use, wearing, removal, and cleaning of cloth face coverings, such as [CDC's guidance on wearing and removing cloth face masks](#).

Exceptions

Exceptions are applicable under the following circumstances:

- The individual has a medical or behavioral condition or disability and cannot wear a face covering (including, but not limited to, any person who has trouble breathing, or is unconscious or incapacitated, or is otherwise unable to put on or remove the face covering without assistance)
- When actively eating or drinking
- When seeking to communicate with someone with hearing loss in a way that requires the mouth to be visible
- When working at home or when in a vehicle alone or with household members

- An individual may temporarily remove a face covering for identification purposes or medical services
- Children under five (5) years of age should not wear a face covering

SPECIAL POPULATIONS

Deaf and Hard of Hearing people often use lip reading to help understand what those around them are saying. Other communication strategies that can be used in this situation include:

- A cloth face covering that has a clear plastic area that allows the lips to be visible
- Writing notes back and forth using different writing utensils
- Writing on a white board to communicate
- Using a free speech to text app on mobile device
- Gesturing

If needed, ensure adequate physical distance (minimum 6 feet), removing cloth face covering long enough to communicate. **RECOMMEND** use of a clear plastic face shield if this method is necessary. This method should not be used for prolonged periods of time.

Individuals with a medical or behavioral condition or disability may be unable to wear a cloth face covering. Be sure to take other steps to help avoid unnecessary exposure. Other mitigation strategies include physical distancing of greater than 6 feet, a physical barrier or face shield. At least one individual should wear a face covering in such situations.

CONSIDERATIONS

- Cloth Face Coverings
 - Ideally cloth face coverings should be washed when they become wet or visibly soiled and at least daily. Have a bag or bin available to keep your cloth face coverings in until you can wash them. Launder the face coverings with detergent and hot water and dry on a hot cycle. If you must re-wear your cloth face covering before washing, wash your hands immediately after putting it back on and avoid touching your face.
 - Discard cloth face coverings that:
 - No longer cover the nose and mouth
 - Have stretched out or damaged ties or straps
 - Cannot stay on the face
 - Have holes or tears in the fabric
- Face Shields
 - Plastic face shields that wrap around the sides of the wearer's face and

extend to below the chin are an allowed substitute **ONLY** for individuals who are unable to wear a cloth face covering.

- [Per CDC](#) - It is not known if face shields provide any benefit as source control to protect others from the spray of respiratory particles. CDC **does not recommend use of face shields for normal everyday activities or as a substitute for cloth face coverings**. Some people may choose to use a face shield when sustained close contact with other people is expected. If face shields are used without a mask or cloth face covering, they should wrap around the sides of the wearer's face and extend to below the chin. Disposable face shields should only be worn for a single use. Reusable face shields should be cleaned and disinfected after each use. Plastic face shields for newborns and infants are NOT recommended.