

PUBLIC HEALTH REOPENING PROTOCOL PUBLIC AND PRIVATE SCHOOLS AND SCHOOL-BASED PROGRAMS K-12

Recent Updates: (Changes are highlighted in yellow)

10/29/2020:

- Updated to modify the proportion of students who may receive specialized services on campus at any one time. All schools may have up to 25% of full student capacity on campus at one time, to provide in-person specialized support and services to students of high need, with the exception of schools that have received a waiver to reopen for all students in grades TK – 2. Schools that have received a TK – 2 waiver may bring back up to 25% of total students in grades 3 and above on campus at one time to provide specialized support and services. A City waiver program that allows return of students in grades TK – 2 for general in-classroom instruction is open and accepting applications.
- A supervising adult may be assigned to 2 different stable student cohorts if the adult offers specialized services/supports that cannot be provided by any other supervising adult.
- College admission tests, including PSAT, ACT, and SAT exams, may be conducted at schools as long as students are appropriately cohorted and physical distancing and infection control practices are adhered to for the duration of the test.
- Alternatives to EPA approved disinfectants including bleach or alcohol-based disinfection solutions along with cautions for use have been added. Guidance and cautions around use of hand sanitizers containing ethyl alcohol versus isopropyl alcohol have been revised.

“Schools” include all public, private, and charter schools from grades K through 12. This protocol does not apply to community colleges, universities, childcare facilities, or preschools.

This document starts with a discussion of current provisions for on-campus education in The City of Pasadena, followed by information about safety strategies specific to the school environment.

Special guidance for the TK-12 setting.

All K-12 schools in California counties that are in Tier 1 of the State’s Blueprint for a Safer Economy, including those schools in the City of Pasadena public health jurisdiction, are prohibited from reopening for in-person instruction. During this period, when schools are generally restricted to remote learning, four types of on-site programming are permitted. In compliance with this order and aside from these exceptions, K-12 schools in the City of Pasadena may open only for remote learning. During this period, employees and staff, as defined below, may report to school campus for work in order to support essential operations, implement of remote learning or conduct on of the four permitted types of on campus learning. These are:

Day care for school-aged children and/or child care programs located in schools • Local Education Agencies (LEAs) and schools that offer day care services for children at schools must be in compliance with the protocol for Programs Providing Child Care – Public Health Reopening Protocol. Programs that wish to provide day care for school-aged children at schools should communicate with their Community Care Licensing [Regional Office](#) to inquire regarding the availability of waivers for licensed child care facilities and license-exempt providers due to COVID-19. For additional information see [PIN 20-22-CCP](#).

- As in the case of specialized services, use of outdoor space is strongly recommended for learning as well as for meals, recreation and other activities in the course of the day.

Specialized services for defined subgroups of children who need in person services and supports •

LEAs and schools are not required to provide specialized, in-person services, but those that do so may serve students with IEPs, students who are English Language learners, and students with needs that cannot be met through a virtual instruction platform. These students may be served as needed, provided that the overall number of students present on-site does not exceed 25% of total student body at any one time. An exception to this 25% rule is schools that have received a waiver to return students in grades TK – 2 for in person instruction. Schools that have received a waiver are permitted to bring all students in grades TK – 2 back to campus including high need students in those grades. In that situation, the school may also bring up to 25% of total student enrollment in grades 3 and above at any one time for specialized support and services for high need students in those grades, as long as the school can adhere to distancing, infection control, and cohorting requirements.

- Specialized services may include but are not limited to occupational therapy services, speech and language services, other medical services, behavioral services, educational support services as part of a targeted intervention strategy, or assessments, such as those related to English Learner status, Individualized Education Plans and other required assessments.
- No child may be part of more than one cohort. Students who are part of a cohort may leave the cohort for receipt of additional services. Any additional services, however, must be provided one-on-one by the appropriate specialist in a secure space that is apart from all other people.
- Schools must agree to cooperate with the Pasadena Public Health Department with regard to screening, monitoring and documentation that will be required to permit careful scrutiny of health outcomes associated with this initial period of expansion.
- To the extent consistent with specialized needs of students in a given cohort, use of outdoor space for at least 50% of the school day is strongly encouraged.
- LEAs and schools that choose to implement these on-site services for students with specialized needs while schools are otherwise closed to in-person instruction, must inform the Pasadena Public Health Department of their plans prior to start of services. A [Document Submission for K-12 Schools Offering Limited In-Person Services for Students with Special Needs](#) is available on the Pasadena Public Health Department website. If a school has already been approved for a waiver to reopen for students in grades TK – 2, the school still is required to file a notification to provide services to students with special needs if the school intends to bring students back to campus in addition to those in grades TK – 2.
- Further information from the State concerning specialized services may be found at [Specialized Support and Services](#).

On-site instruction of children in grades TK-2 by schools that have received a Department of Public Health waiver for in-person education.

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- No school may bring students in grades TK-2 onto campus for general in-classroom instruction prior to a waiver being approved.
- Full instructions and the waiver application form are available [here](#).

Students may come on campus for supervised administration of college admission tests, including PSAT, ACT, and SAT exams.

- College admission tests, including PSAT, ACT, and SAT exams, may be conducted at schools as long as students are appropriately cohorted for the entire duration of the assessment (no more than 12 students in each classroom with a distance of at least 6 feet between students and between students and teachers).
- All students and staff must wear face coverings for the entire time on campus, and all infection control protocols must be in place.
- Arrival and dismissal times are staggered between cohorts, and no gathering is permitted at any time, including at arrival and dismissal times or during test breaks.

All measures to ensure the safety of employees and students in this protocol for Reopening of TK-12 Schools and in the associated protocol for K-12 Exposure Management must be implemented and are applicable to all on-site personnel, including those providing specialized services. The following paragraphs highlight safety strategies specific to the school environment.

COHORTING

For all four types of on-site programming students must be organized and proceed through the day within cohorts, defined as a stable group of no more than 12 children or youth and no more than two supervising adults in a supervised environment in which supervising adults and children stay together for all activities (e.g., meals, recreation, etc.), and avoid contact with people outside of their group in the setting.

- Note that if a cohort has fewer than 12 children or if a child stops attending a previously full cohort other children who are not already assigned to a cohort can be added to the group to reach the maximum of 12, provided all the children, once assigned remain with the same cohort at all times.
- If some children are assigned to a stable cohort but only attend part-time, they must be counted as full members against the maximum of 12. Part-time members cannot “share” their slot with other part-time students. Other children cannot be added in order to reach the maximum of 12 participants at all times.
- Aides assigned to individual children do not have to be counted as supervising adults. They must, however, be counted against the maximum of 14 individuals who can be included in a cohort. Important additional details for implementation of cohorts are available from the CA Department of Public Health at [Guidance for Small Cohorts](#).

LIMITED ON-CAMPUS DENSITY

While Local Education Agencies (LEAs) or schools may configure as many cohorts as are appropriate to meet student needs for specialized services, the total on-campus population may not exceed 25% of the total student body at any one time for this particular purpose. The 25% limit does not apply to school age children on campus receiving day care while engaged in distance learning activities, nor does it apply to students in grades TK - 2 returning after granting of a school waiver. Schools that have been granted a waiver to return students in grades TK -2 may bring additional students onto campus for specialized services in grades above grade 2, up to a maximum of 25% of student enrollment in grades 3 and above, as long as the school can adhere to distancing, infection control, and cohorting requirements.

SUPERVISING ADULTS

A supervising adult is an adult assigned to one cohort of children or youth, who does not physically interact with any other cohorts. Supervising adults may be child care staff, certificated or classified school staff, volunteers, participating parents or caregivers, or other designated supervising adult(s). An aide who is present to provide support to an individual child should be counted as a member of the

cohort but not as a supervising adult. A supervising adult may be assigned to 2 different stable cohorts if they offer specialized services/support that cannot be provided by any other supervising adult.

SUPERVISED ENVIRONMENTS

A supervised care environment is an environment where multiple children or youth, from multiple families or households, are supervised simultaneously by an adult. This includes, but is not limited to, licensed child care facilities, licensed exempt child care programs, supervised programs on a school site while a school is not in session or is providing curriculum in a distance-learning format, or where some educational services are being offered to a subgroup of students defined by a local educational agency on a school.

These protocols are provided for schools for use in the instance that community COVID-19 conditions will permit return to in-person K-12 education in the City of Pasadena for the 2020-21 school year. Public and private schools and school-based program should adopt contingency plans for remote learning, if worsening community COVID-19 conditions (e.g., increasing cases) or emerging science indicates a need for greater caution. Schools should be in compliance with the California State Health Officer Orders and guidance, Pasadena Health Officer Orders and guidance, California Department of Education, and additional applicable public health guidance.

This document may be updated as new information and resources become available. Go to <https://www.cityofpasadena.net/covid-19/> for updates to this document.

Steps to Reopen

- ✓ Complete and implement the Public Health Reopening Protocol Checklist and the Exposure Management Plan.
 - ✓ Follow additional protocols relevant to operations: <https://www.cityofpasadena.net/covid-19/#guidance-faq-protocols>
 - Office Workspace – Public Health Reopening Protocol
 - Restaurants – Public Health Reopening Protocol
 - Fitness Facilities – Public Health Reopening Protocol
 - Places of Worship – Public Health Reopening Protocol
 - Public Pools – Public Health Reopening Protocol
 - Youth Sports – Public Health Reopening Protocol
 - Programs Providing Child Care – Public Health Reopening Protocol
 - ✓ Provide a copy of the Public Health Reopening Protocol to each staff member and family and conduct education.
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- ✓ Post a copy of Public Health Reopening Protocol in conspicuous locations visible to staff, parents, students, and visitors and post to your website.
 - ✓ Ensure compliance with other oversight or regulatory agencies, such as the California Department of Education and the California Department of Public Health. Regularly review updated guidance from state agencies, including the [California Department of Public Health](#) and [California Department of Education](#).
 - ✓ Ensure your designated COVID-19 School Compliance Task Force and School Compliance Officer are trained and prepared to implement the [Exposure Management Plan](#).

Guiding Principles for Your School Community to Keep in Mind

These protocols are provided for school administrators, faculty, staff, and parents to implement measures that may reduce the risk of disease transmission in the school setting, based on the current scientific evidence available for COVID-19 virus.

Any setting that brings people together poses a risk for disease transmission, so in choosing to move from the lowest risk setting to a higher risk setting, the school community is knowingly agreeing to take on that risk, and must be prepared to mitigate the impact of COVID-19 cases among their school community members. The more people a student or staff member interacts with, and the longer that interaction, the higher the risk of COVID-19 spread. The risk of COVID-19 spread increases in school settings as follows:

- **Lowest Risk:** Students and teachers engage in virtual-only classes, activities, and events.
- **More Risk:** Small, in-person classes, activities, and events. Groups of students stay together and with the same teacher throughout/across school days and groups do not mix. Students remain at least 6 feet apart at all times, wear face coverings at all times, and do not share objects (e.g., hybrid virtual and in-person class structures, or staggered/rotated scheduling to accommodate smaller class sizes).
- **Highest Risk:** Full-sized, in-person classes, activities, and events. Students are not spaced apart, share classroom materials or supplies, and mix between classes and activities.

Key Practices



COVER YOUR COUGH WITH YOUR ELBOW OR TISSUE (THEN DISPOSE AND WASH YOUR HANDS)



STAY HOME IF YOU ARE SICK



PRACTICE PHYSICAL DISTANCING OF 6 FEET OR MORE



WASH YOUR HANDS WITH SOAP AND WATER FOR 20 SECONDS, FREQUENTLY



COVER NOSE AND MOUTH WITH CLEAN FACE COVERING



PERFORM DAILY HEALTH SCREENINGS

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Resources

- California Department of Public Health – [Reopening In-person Learning Framework K-12](#) • California Department of Public Health - [Guidance for Small Cohorts/Groups of Children and Youth](#)
- Centers for Disease Control and Prevention (CDC) – [Schools Decision Tree to Reopening](#) • Centers for Disease Control and Prevention (CDC) – [Guidance for Schools and Childcare](#) • [Additional resources, including a printable COVID-19 Business Toolkit Signage](#) • California Department of Education – [Stronger Together: A Guidebook for the Safe Reopening of California's Public Schools](#)
- California Department of Public Health – [Vendor list to purchase personal protective equipment](#)

PUBLIC HEALTH REOPENING PROTOCOL CHECKLIST

PUBLIC AND PRIVATE SCHOOLS AND SCHOOL-BASED PROGRAMS K-12

REDUCING RISK OF COVID-19 TRANSMISSION

Schools and school-based programs must implement all applicable measures listed below and be prepared to explain why any measure that is not implemented is inapplicable to the campus. Designate one individual to be in charge of planning and implementation of all items. Submission of Protocol to a City Department is not required unless explicitly requested.

PERSON RESPONSIBLE FOR IMPLEMENTING PROTOCOLS

PUBLIC HEALTH REOPENING PROTOCOL CHECKLIST

PUBLIC AND PRIVATE SCHOOLS AND SCHOOL-BASED PROGRAMS **TK-12**

REDUCING RISK OF COVID-19 TRANSMISSION

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PERSON RESPONSIBLE FOR IMPLEMENTING PROTOCOLS	
School/Campus Name: <u>Webster Elementary</u>	
Person in Charge: <u>Kristin Forrest</u>	
Title: <u>Principal</u>	
Phone Number: <u>626 720 2446</u>	Date: <u>2/16/21</u>

I, Kristin Forrest / Principal,
(PRINT NAME and TITLE of person attesting that all protocols have been implemented)

do attest that all public health protocols have been implemented at
Webster Elementary School
(name of school)

on this date, 2/16/21.

Kristin Forrest
(signature) Elyse J. Blasco 02/22/2021

School/Campus Name:	
Person in Charge:	
Title:	
Phone Number:	Date:

I, _____,
(PRINT NAME and TITLE of person attesting that all protocols have been implemented)

do attest that all public health protocols have been implemented at

(name of school)

on this date, _____.

__ *(signature)*

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The terms “employees” and “staff” are used in these protocols to refer to individuals who work in a school facility in any capacity associated with teaching, coaching, student support, provision of therapies or personal assistance to individual students, facility cleaning or maintenance, administration, or any other activity required for the school to function. “Employees” or “staff” may include individuals who are: paid directly by the school system, paid by entities acting as contractors to the school, paid by outside entities acting in collaboration with the school to serve students, paid by third parties to provide individual student services, or unpaid volunteers acting under school direction to carry out essential functions. The term “parents” is used in these protocols to refer to any persons serving as caregivers or guardians to students.

If you have questions, or if you observe a violation, you can request information or submit a complaint through the Citizen Service Center. Call 626-744-7311 or visit <https://www.cityofpasadena.net/CSC>.

PROTECTION OF STUDENTS, VISITORS AND STAFF FROM COVID-19

- Connect staff and families to resources to access health insurance, a primary care doctor, and

COVID-19 testing prior to reopening, such as calling 211 or 626-744-6068 for information on health insurance and primary care physicians, or visiting

<https://www.cityofpasadena.net/public-health/>.

- Implement the **COVID-19 Exposure Management Plan** to limit the spread of COVID-19 among students and staff. The plan must designate a **COVID-19 School Compliance Task Force** responsible for establishing and enforcing all COVID-19 safety protocols and ensuring that staff and students receive education about COVID-19. Designate one member of the team as the School Compliance Officer, who acts as the liaison to the Pasadena Public Health Department in the event of an outbreak on campus. The plan identifies steps that will be taken immediately upon notification of school officials that any member of the school community (faculty, staff, student or visitor) tests positive for, or has symptoms consistent with COVID-19, including but not limited to:

- Sending staff home immediately if they arrive sick or become sick during the day, ensuring physical distancing, that they are wearing a face covering (provide with a surgical mask if possible), and privacy is maintained. Encourage sick staff to contact their medical provider. If the illness is work-related, the employer should facilitate appropriate care for the staff member, the worker's compensation process, leave time, and California Occupational Safety and Health Administration (OSHA) record keeping.
- For anyone who is waiting to be picked up from school due to symptoms of COVID-19, or coming into close contact with someone with COVID-19, place that person in an isolation room with monitoring, preferably in an area where others do not enter or pass. Provide divided spaces for those who are asymptomatic, separated from those who are symptomatic. Make sure that the person keeps a face covering on (provide with a surgical mask if possible). When a parent/guardian arrives to pick up a student, have the student walk outside, supervised, to meet them, if possible, instead of allowing the parent or guardian into the building since the parent may also have COVID-19.
- Providing fact sheets/information, in an appropriate language, on maintaining isolation and quarantine in accordance with Health Officer Orders and CDC guidance.

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- Making an immediate report to the Pasadena Public Health Department any time a student or staff member with COVID-19 (confirmed by a lab test or physician diagnosis) was at the campus while sick or up to 2 days before showing symptoms. The COVID-19 Compliance Officer must call (626) 744-6089 or email nursing@cityofpasadena.net and provide all information requested by the Health Department. The IHE is expected to provide or ensure testing for all staff that have had a possible exposure and must follow the US Centers for Disease Control and Prevention (CDC) [guidance](#) for cleaning and disinfecting the campus. Testing resources can be found by calling the individual's physician, and also at <https://www.cityofpasadena.net/covid-19/> and <https://covid19.lacounty.gov/>.
- Working with the Pasadena Public Health Department to investigate any COVID-19 illness. The COVID-19 School Compliance Task Force should designate trained staff to compile student and personnel records, campus floor plans, and staffing/student attendance logs to provide information as quickly as possible to the Health Department, including accurate contact information (phone, address, email) of all staff, students, and visitors and who had close contact (within 6 feet of the infectious person for 15 minutes or more). The COVID-19 School Compliance Officer should submit the completed [COVID-19 Exposure Investigation Worksheet to PPHD](#).
- Schools must enroll staff in the free, state-provided contact tracing training course prior

to reopening.

- Implementing communication plans for exposure at school and potential school closures to include outreach to students, parents, teachers, staff and the community. ▪ Providing guidance to parents, teachers and staff reminding them of the importance of community physical distancing measures while a school is closed, including discouraging students or staff from gathering elsewhere outside of school.

- Maintaining regular communications with the Pasadena Public Health Department.

Develop and implement a flu vaccination program (vaccine education, promotion, and documentation of completed, current vaccination) with the goal of influenza immunization for all students and staff unless contraindicated by documented medical exemption for flu vaccine, prior to or at the beginning of the flu season (typically starts November 1) to help:

- Protect the school community from influenza, and co-infection with influenza and COVID-19 viruses
- 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.

Develop a plan for continuity of education. Current levels of community transmission mean schools should expect frequent cases of COVID-19 in the school setting. Because each case will trigger mandatory 14-day home quarantine for every close contact even if face coverings are worn, in-person classes will be disrupted. No test result will shorten the 14-day quarantine when staff or students cannot return to campus. The plan should delineate how nutrition and other services provided in the regular school setting will continue.

Health Screening

Conduct daily symptom checks for all persons entering the building or campus before or upon arrival (fever of 100°F or above, cough, shortness of breath or difficulty breathing, fatigue, sore throat, chills, headache, muscle or body aches, a new loss of taste or smell, congestion or runny nose, nausea, vomiting, or diarrhea). Consult the CDC website for the most current list of COVID-19 [symptoms](#). These checks can be done remotely or in person upon arrival. The screening must include asking if the person (adults and middle and high school-age students, and for younger students, ask the parent) has had contact with a person known to be infected COVID-19 in the last 14 days. Quarantine (send home) everyone who came into close contact (within 6 feet for 15 minutes or more) with someone with confirmed COVID-19 within the past 14 days. They must maintain quarantine at home for 14 days, regardless of any interim test results.

In addition, conduct visual wellness checks of all students, at least daily, and take students' temperature with a no-touch thermometer, if possible.

Notify the COVID-19 School Compliance Task Force of any positive screening result and initiate the COVID-19 Exposure Management Plan.

Require any sick staff or student to stay home for at least 10 days or until 24 hours after fever and symptoms resolve (without use of fever-reducing medications), whichever is longer. A case is considered to be infectious from 2 days before their symptoms first appeared until the time they are no longer required to be isolated (i.e., no fever for at least 24 hours, without the use of medicine that reduces fevers AND other symptoms have improved AND at least 10 days have

passed since symptoms first appeared.

- Review and modify workplace leave policies to ensure that staff are not penalized when they stay home due to illness.

Reduced Contact

- Adopt a cohorting approach school-wide, maintaining a stable group of no more than 12 children or youth and no more than two supervising adults in a supervised environment in which supervising adults and children stay together for all activities (e.g., meals, recreation, etc.), and avoid contact with people outside of their group in the setting, throughout the school day. **(A supervising adult may be assigned to 2 different stable cohorts if they offer specialized services/support that cannot be provided by any other supervising adult).**
- Require staff and students not to use handshakes and similar greetings that break physical distance.
- Offer any transactions or services that can be handled remotely online.
- Equip the front desk area with plexiglass or other impermeable barriers, if feasible, to minimize the interaction between reception staff and students. Implement virtual, touchless check-in tools, if possible, so that students do not have to utilize the reception space.
- Assign each staff member individually-assigned tools, equipment, and defined workspace, and minimize or eliminate shared, held items.
- Install hands-free devices wherever possible such as trash cans, soap and paper towel dispensers, door openers, and light switches.
- Remove all unpackaged food and beverages that may be offered to staff and students. Consider making water fountains available for filling water bottles only, and disinfect frequently.

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- Prop doors and gates open where possible and applicable to reduce touching of handles, consistent with fire codes and accessibility standards.
 - Doors and gates that lead to a pool, or that exist as part of a pool enclosure, may not be propped open at any time.
 - Remove amenities, including magazines, books, self-serve water stations (unless touchless), and other items for students and visitors from reception areas and elsewhere within the campus.
- Restrict non-essential visitors
- Allow only visitors essential to school operation, including only essential volunteers, and require appointments and pre-registration with name, phone number, and email address. Essential visitors should arrive alone. If a visitor must be accompanied by another person (e.g., for translation assistance, or because the visitor is a minor) record the name, phone number, and email address.
 - All visitors must wear a face covering, and children must stay next to an adult.
 - Restrict visitors to designated areas such as the reception or lobby area, offices, conference or meeting rooms, and public restrooms to the extent feasible.
 - Discourage parents and other family members from entering the school. Avoid allowing family members into classrooms and other student areas.

Scheduling

- Limit the number of employees who are on-site to the minimum number necessary, and institute alternate or staggered shift schedules to maximize physical distancing. Allow employees who can carry out their work duties from home to continue to work from home, especially those at higher risk (65 or older or with underlying medical conditions). Reconfigure work processes to the extent possible.

- Stagger employee breaks, in compliance with wage and hour regulations, to maintain physical distancing.
- Provide time for employees to implement enhanced cleaning practices during their shift. Procure options for third-party cleaning companies to assist with the increased cleaning demand, as needed.

Face Coverings*

- All individuals, including staff and students of older than 2 years, are required as indicated below to wear face coverings over both the nose and mouth while at school/on campus except when eating or drinking. Notify parents and staff prior to school opening and provide frequent reminders. Face coverings are optional when alone in a room or private office, unless it is a space that serves the public in which case face coverings are required regardless of whether the public is present (as specified in the [State Order](#)).
- 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 are exempt from wearing a face covering. Students with documented medical or behavioral contraindications to face coverings are exempt. They should be seated at least 6 feet away from other students, when possible to do so without stigmatizing the student. Staff with a documented medical contraindication to a face covering may be allowed to wear a face shield with a cloth drape on the bottom tucked into the shirt.

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- Students and staff should be frequently reminded not to touch the face covering and to wash their hands frequently.
- Parents of younger children are encouraged to provide a second face covering for school each day in case the one a child is wearing gets soiled. This would allow for a change of the face covering during the day.
- Speech and language therapists and staff working with hard-of-hearing students may also use a face shield with a cloth drape tucked into the shirt, if a face covering interferes with their ability to work with students. This may also be considered for teachers of younger students in order for young children to see their teacher's face and avoid potential barriers to phonological instruction. A clear face covering, or clear portable barrier such as a plexiglass barrier may also be used. Staff should wear a face covering at all other times.
- Face shields should not be used in place of face coverings in other situations, as face shields have not been shown to keep the wearer from infecting others. Face shields do provide additional protection for the wearer.
- If possible, provide a cloth face covering for all employees and students at no cost. Prohibit employees from eating or drinking anywhere inside the workplace other than designated break areas (staying at least 6 feet apart) to ensure face coverings are worn consistently and correctly.

** Individuals with chronic respiratory conditions, or other medical conditions that make use of a face covering hazardous are exempted from this requirement. Children under age 2 years should not wear a face covering. Refer to the [Face Covering FAQs](#) document for additional information on use and care of the face covering.*

Hand Hygiene

- Provide access to handwashing sinks stocked with soap, paper towels, and hands-free trash receptacles.
- Designate a staff person to check handwashing stations frequently and restock as needed. Allow staff and students time to wash their hands frequently. Schedule younger students for frequent mandatory handwashing breaks.
- Place portable handwashing stations near classrooms to minimize movement and congregations in bathrooms, to the extent practicable.
- Make ethyl alcohol-based (contains at least 60% ethanol) hand sanitizer available to students and staff at strategic locations throughout the school where there is no sink or portable handwashing station (in or near classrooms, rooms in which support services are provided, music and art rooms). Ethyl alcohol-based hand sanitizer is preferred and should be used in school environments. Hand sanitizers with isopropyl alcohol as the main active ingredient should not be used in the school, as it is more irritating and can be absorbed through the skin. **WARNING: Never use hand sanitizers with methanol due to its high toxicity to both children and adults.** Teach students and remind staff to use a tissue to wipe one's nose and to cough/sneeze inside a tissue or one's elbow.
- Students and staff should wash their hands upon arrival and at departure; before and after eating; after coughing or sneezing; after being outside; before and after any group activity; and before and after using the restroom, and as otherwise necessary.

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- Students and staff should wash their hands for 20 seconds with soap, rubbing thoroughly after application, and use paper towels (or single use cloth towels) to dry hands thoroughly. **Swallowing alcohol-based hand sanitizers can cause alcohol poisoning.** Children under age 9 should use hand sanitizer only under adult supervision. Call Poison Control if consumed: 1-800-222-1222.

Gloves and Other Protective Equipment

- Provide disposable gloves to staff handling items used by students/public, to workers using cleaners and disinfectants, for staff who handle commonly touched items, and for staff who provide temperature screenings.
- Provide other personal protective equipment (PPE), such as eye and face protection, as necessary.
- Provide employees engaged in activities which may not permit physical distancing (such as physical therapy or personal assistance to individual students) with appropriate PPE (gloves, masks, gowns, etc.), as appropriate.
- Provide staff taking care of a sick student with a medical grade mask to wear, and a medical grade mask for the student to wear (if tolerated) until the student leaves the campus.

Restrooms

- Place a trash can near the door if the door cannot be opened without touching the handle, so restroom users may use a paper towel to cover the doorknob. Maintain compliance with accessibility standards and fire code.
- Increase frequency of cleaning and disinfection of restrooms.
- Ensure that restrooms stay operational and stocked at all times.

PHYSICAL DISTANCING

In the Classroom

- Limit in-person class size to as few students as possible and to adhere to physical distancing requirements.
- Divide the school day into shifts to permit fewer students per class, where applicable. Stagger attendance to reduce the overall number of students in classrooms on a given day. Offer online class attendance as an option for students for whom it is feasible and for students who may be at elevated risk in a regular classroom.
- Move some classes entirely online, as needed.
- Use alternative spaces to reduce the number of students within classrooms (library, cafeteria, auditorium, gymnasium, etc.). Consider ways to move instruction to outdoor spaces, weather permitting, with adequate sun protections for students and staff.
- Staff should stay at least 6 feet from other adults as much as possible.
 - Set up staff workspaces so that staff do not work within 6 feet of each other.
 - Consider virtual meetings using video conferencing apps for parent-teacher meetings and staff meetings, even if all staff are on campus.

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- Staff should stay at least 6 feet away from students when feasible. Arrange staff desks at least 6 feet away from student desks, regardless of space limitations.
- Students should stay 6 feet apart from one another at all times.
 - Remove furniture like bookshelves, sofas, and play areas to allow maximal spacing between student desks.
 - Consider ways to establish separation of students through multiple means if practicable, such as, at least six feet between students seated at desks or elsewhere, partitions between desks, markings on classroom floors to promote distancing, or arranging desks in a way that minimizes face-to-face contact.
- Space students in nap or rest areas in classrooms at least 6 feet apart and alternating feet to head.
- Modify teaching methods to avoid close contact between students in laboratories and other classes that may usually involve group activities.
- Consider redesigning activities for smaller groups and rearranging furniture and play spaces to maintain separation.
- Develop instructions for maximizing spacing and ways to minimize mixing in both indoor and outdoor spaces that are easy for students to understand and are developmentally appropriate. Implement procedures that minimize contact when turning in assignments.

Outside the Classroom

- Limit communal activities. Stagger use of spaces, properly space occupants and disinfect in between uses.
- Limit occupancy of bathrooms, elevators, locker rooms, staff rooms and similar shared spaces to allow at least 6-foot distancing. Post signs with occupancy limits.
- At places where students congregate or wait in line, mark spots on the floor or the walls at least 6 feet apart to indicate where to stand.
- Consider eliminating use of lockers in hallways and other shared spaces. If used, ensure at least 6 feet between students accessing lockers.
- Consider suspending uniform requirements for physical education so that students do not need

to use the locker room to change.

Limit Sharing

- Limit sharing of art supplies, manipulatives, and other high-touch materials as much as possible. If feasible, have a separate set of supplies for each student. Keep each student's supplies and belongings in separate, individually labeled boxes or cubbies.
- Avoid sharing electronic devices, sports equipment, clothing, books, games and learning aids when feasible.
- Limit use of shared playground equipment in favor of activities that have less contact with shared surfaces.
 - High-touch playground equipment may be taken out of use and replaced with no-touch playground games, etc.
- Clean and disinfect shared supplies and equipment between students.

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SPECIFIC SITUATIONS

Transportation

- School Buses
 - Consider screening students for COVID-19 symptoms and exposure before allowing them to board.
 - Drivers and passengers must wear face coverings over their nose and mouth, unless a student has a documented medical or behavioral contraindication. Drivers should have a supply of face coverings in case a student does not have one.
 - Have students sit at least 6 feet away from the driver.
 - Maximize space between students. Students from the same household may sit together. ▪ Have students sit in the same seat each day when feasible.
 - Keep vehicle windows open when weather and safety permit.
 - Clean and disinfect buses daily. Drivers should be provided disinfectant wipes and disposable gloves to wipe down frequently touched surfaces.
 - A maximum of one child is permitted per bus seat.
 - Seat students in alternating rows, as practicable.
- Implement measures that make it easier for parents to drive students to school, such as availability of early opening with staff presence, expanded short-term parking at schools, and presence of staff at drop-off areas to assure safe movement of students from drop-off to school entry.
- Public transportation: Consider staggering school start time to allow students and staff who use public transportation to do so when buses and trains are less crowded. This will decrease exposure risk and help reduce barriers to getting to school.
- Carpools and shared rides: Advise staff and families to carpool with the same stable group of people. Open windows and maximize outdoor air circulation when feasible. Everyone in the vehicle should wear a face covering.
- Implement measures that facilitate safe, age-appropriate student travel to school including physically distanced walking groups, use of school crossing guards, bicycle safety and bike route programming.

Arrival and Departure

- Stagger arrival and dismissal times, using different entrances/exits for each cohort. Mark spaces at least 6 feet apart for students waiting to enter the building and for adults waiting to pick up students. Post signs to remind family members to stay at least 6 feet away from people from other households when dropping off or picking up their student. Face coverings are required for adults who are dropping off or picking up children in person. Provide face coverings for family members who have forgotten theirs.
- Designate routes for entry and exit, using as many entrances as feasible. Put in place other protocols to limit direct contact with others as much as practicable.
- Use multiple entrances and exits to avoid overcrowding at arrival and dismissals as long as all entrances and exits have adequate monitoring of arriving and exiting students and employees.

Meals and Snacks

- To the extent possible, have students eat meals in classrooms or outdoors, without any mingling of students from different classrooms.
- If students line up to pick up food, use tape or other markings to ensure at least 6 feet between any two students. Assign staff during meals to maintain physical distancing and keep students from different classrooms from mingling.
- If meals take place in a cafeteria, stagger meal times to the extent feasible to reduce the number of students in the cafeteria at one time; ensure students from different classrooms are not mingling.
- If meals take place in a cafeteria, increase space between tables/chairs to maintain at least 6 feet of physical distancing between students.
- Redesign food preparation and service operations, where possible, to achieve physical distancing between employees. For example, kitchen and other back of house floors should be marked to reinforce 6 feet physical distancing requirements.
- Ensure infection control in the school cafeteria or other site where food is served or picked up.
 - Eliminate buffet and family style meals.
 - Allow prepackaged meals, hot meals served by cafeteria staff and/or food brought by students from home.
 - Install physical barriers where needed to limit contact between cafeteria staff and students.

Staff Break Rooms/Teacher Work Rooms

- Post the maximum occupancy for the staff rooms, based on 6 foot distancing. Mark places on the floor at least 6 feet apart for staff to sit or stand.
- Post signage reminding staff to stay at least 6 feet apart, keep their face coverings on unless eating, wash their hands before and after eating, and disinfect their area after using it. Discourage staff from eating together, especially indoors. Consider creating a private outdoor area for staff to eat and take breaks, alone.
- Open windows and doors to maximize ventilation, when feasible, especially if staff are eating or if the room is near maximum occupancy.

Group Singing/Chorus, Band, Sports and Field Trips

- Both indoor and outdoor choir and band rehearsals are prohibited at this time. However, in person choir, band, and cheerleading activities may be conducted if they do not include aerosol generating activities such as singing, playing of wind instruments, cheering, or chanting. In person class time can be used for non-aerosol generating activities, such as rhythm study, music theory, music history, composition, analysis, and more.
- Schools should consider using Zoom or other video conferencing platforms so that students may participate in aerosol-generating activities (such as singing, playing of wind instruments, cheering, and chanting) at home.
- Other activities where there is increased likelihood for transmission from contaminated exhaled droplets are not permitted.
- Move extracurricular activities (teams, clubs) online rather than in-person, to the extent feasible.

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- Outdoor and indoor sporting events, assemblies, and other activities that require close contact or that would promote congregating are not permitted at this time. For example, tournaments, events, or competitions, regardless of whether teams are from the same school or from different schools, counties, or states are not permitted at this time.
- Outdoor youth sports and physical education (PE) 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](#)). At this time, no indoor youth sports or physical education is permitted.
- Indoor physical conditioning, training, or fitness facility operations are currently prohibited. For sports that cannot be conducted with sufficient distancing or cohorting, only outdoor 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, only. Avoid equipment sharing, and if unavoidable, clean and disinfect shared equipment between use by different people to reduce the risk of COVID-19 spread.
- Activities that require heavy exertion should be conducted outside in a physically distanced manner, at least eight (8) feet apart, without face coverings. It is preferable for participants to wear a face covering and maintain physical distancing, and modify activities to an exertion level that is safe for participants. Players should take a break from exercise if any difficulty in breathing is noted, and should change their face covering if it becomes wet and sticks to the player's face and obstructs breathing. Respirators that restrict airflow under heavy exertion (such as N-95 respirators) 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.
- Avert unsupervised clustering of students in locker rooms.
 - Offer access to locker rooms only when staff supervision is possible.
 - Stagger locker room access.
- Field trips are currently prohibited.

Equitable Access to Critical Services

- A plan for updating Individualized Education Plans (IEPs) and 504 Plans of students with special needs has been developed to ensure that education can continue without undue risk to the student.

- This plan includes a method for proactive school contact with parents at the beginning of the school year to assure that issues related to the child’s education and safety are being addressed.
- Modifications to individual IEPs and 504 plans may involve remote learning, modifications to the classroom to accommodate student needs, school attendance in a separate area with few students, or a hybrid approach combining in-class and remote learning.
- Steps taken to modify IEPs and 504 plans to assure student safety comply with relevant provisions of state and federal law.

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- Make an option for remote learning or other alternative to in-class learning available for any student for whom school attendance poses elevated risk.
- Offer an option for “Grab and Go” school meals to any student who is eligible for the school meal program but would face elevated risk attending school in person.
- Move administrative services or operations that can be offered remotely (e.g., class registration, form submission, etc.) online.
- Additional accommodations may be needed for students to safely attend class. For example, a student who cannot tolerate a face covering due to a medical or developmental condition may need a desk with clear barriers.
- Nurses and therapists who are not school employees but work with students in schools, such as occupational therapists and physical therapists, are considered essential staff and should be allowed on campus to provide services.
 - When students are temporarily unable to attend school due to COVID-19 infection or exposure, consider setting up telehealth video sessions for therapy.

Guidance about School Closure/Quarantining

- Individual school closure, after reopening, is recommended based on the number of cases, the percentage of the teachers/students/staff that are positive for COVID-19, and following consultation with the Pasadena Public Health Department.
 - Individual school closure 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/staff are cases within a 14-day period, depending on the size and physical layout of the school.
- The Local Health Officer may also determine school closure is warranted for other reasons, including results from public health investigation or other local epidemiological data. If an in-person school closes due to COVID-19, the school may typically reopen after 14 days and the following have occurred:
 - Cleaning and disinfection
 - Public health investigation
 - Consultation with PPHD

Surveillance Testing

- Once school resumes in-person, surveillance testing must be implemented based on the local disease trends. If epidemiological data indicates concern for increasing community transmission, schools should increase testing of staff to detect potential cases as lab testing capacity allows.
- Schools must develop a plan for arranging for surveillance testing for staff, including providing employer or health plan coverage, or contracting with medical staff and a laboratory to conduct

swab collection and process lab tests, prior to reopening.

- School staff are essential workers, and staff includes teachers, paraprofessionals, cafeteria workers, janitors, bus drivers, health clinic staff, or any other school employee that may have contact with students or other staff. School districts and schools shall test staff periodically, as testing capacity permits and as practicable.
 - Examples of recommended frequency include testing all staff over 2 months, where 25% of staff are tested every 2 weeks, or 50% every month to rotate testing of all staff over time.

MEASURES FOR FACILITIES

Sanitization and Cleaning

- Develop a sanitization plan that identifies the surfaces to be disinfected, the frequency, and the person assigned to the task.
- Perform thorough cleaning in indoor high traffic areas and shared workspaces, when students are not in school and allow time for spaces to air out before the start of the school day. Frequently disinfect commonly touched surfaces (including but not limited to tables, doorknobs, light switches, countertops, handles, desks, phones, keyboards, elevator buttons, touch screens, printer/copiers, grab bars, and handrails) at least daily and more frequently as resources allow using appropriate products.
- Clean and sanitize shared equipment between each use.
- Equip workplace terminals with proper sanitation products, including hand sanitizer and sanitizing wipes and ensure availability.
- Provide hand sanitizer for visitors at high traffic areas, such as entrances, reception, stairway entrances, elevator entry (if applicable), classrooms, breakrooms, and offices.
- Use products approved for use against COVID-19 on the Environmental Protection Agency (EPA)-approved list ([List N](#)) and follow product instructions and Cal/OSHA requirements for worker safety. Consider List N products that are safer for those with asthma (hydrogen peroxide, citric acid, or lactic acid). **When EPA-approved disinfectants are not available, alternative disinfectants can be used (for example, 1/3 cup of bleach added to 1 gallon of water, or 70% alcohol solutions). Do not mix bleach or other cleaning and disinfection products together – this causes toxic fumes that may be very dangerous to breathe.**
- Provide time for workers to implement cleaning practices during shifts and consider third-party cleaning companies.
- Ensure all cleaning products are kept out of children’s reach and stored in a space with restricted access.
- Install hands-free devices if possible, such as trash cans, soap and paper towel dispensers, door openers, and light switches.
- For additional details, refer to CDC guidelines on “Cleaning and Disinfecting Your Facility” at <https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html>

Building Safety

- Stagnant water in pipes increases the risk for growth and spread of legionella bacteria. When reopening a building, it is important to flush both hot and cold water lines through all pipes and points of use including faucets and showers. Appropriate PPE including an N95 respirator must be worn. Information regarding this process can be found at the [CDC website](#).
- Consider HVAC upgrades to improve air filtration (targeted filter rating of at least MERV 13) and

increase fresh air ventilation. Clean HVAC intakes and returns daily and maintain systems to increase ventilation.

- Keep HVAC systems in good, working order, and set them to maximize indoor/outdoor air exchange unless outdoor conditions (recent fire, very high outside temperature, high pollen count, etc.) make this inappropriate.

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- If fans such as pedestal fans or hard mounted fans are used in the building, take steps to minimize air from fans blowing from one person directly at another individual.
- Keep doors and windows open where possible and safe during the school day to maximize air flow, only if consistent with fire codes and accessibility standards.

Deliveries and Vendors

- Review work flows and make changes if needed to permit physical distancing during pickups and deliveries.
- When other parties (truck drivers, delivery agents, vendors) play a role in the work flow, instruct them to wear face coverings and to comply with symptom checks and physical distancing.

