CAPITAL REGION BOCES

Updated May 1, 2020

GUIDANCE SUMMARY:
Interim Guidance on Re-Opening Schools Following COVID-19 Closures

On March 18, 2020, New York's public schools were closed as a result of the COVID-19 pandemic. As schools consider the possibility of re-opening, the Capital Region BOCES Health-Safety-Risk Management and Communications services have collaborated to provide district officials with action steps, planning considerations and communications guidance.

This document was prepared with the most current guidance from the Centers for Disease Control and Prevention, NYS Department of Health, NYS Education Department and other agencies.

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GENERAL RE-OPENING CONSIDERATIONS

- Continue regular communication with state and local authorities who can help determine the proper level of mitigation needed for your community.
- Develop all re-opening guidance in a collaborative manner with internal stakeholders, including: administrators, teachers, union leaders, school nurses, medical directors, facility directors/head custodians, transportation directors, administrative office staff, security/SROs and/or safety specialists.
- Assess if there is sufficient staff to carry out school operations upon re-opening or if any additional staffing (e.g., teachers, bus drivers) may be required. Is adding staff feasible?
- Review district policies and modify accordingly based on your plan for re-opening and guidance from state and local health officials. This should include attendance policies for students and staff members.
- Ensure infection control protocols are in place for school operations:
  - Social distancing requirements for the school district should be communicated to students, parents and staff prior to re-opening.
  - New and revised policies should be in place (as needed) and communicated externally and internally (e.g., travel, events, external use of facilities, visitors, etc.).
  - Maintain sanitary conditions for food service operations in cafeteria spaces, classrooms and carts used for transportation of meals and utensils.
  - Hold training for faculty and staff on particular job tasks that involve maintaining sanitary conditions and exposure control.
  - Display age-appropriate social distancing signage throughout each school building. This could include:
    - Taped off areas on classroom floors, hallways, etc., as required.
    - Hand hygiene, respiratory etiquette and social distance reminders.
- Equipment and supplies needed to begin operations on the first day back include:
  - Cleaners and disinfectant chemicals
  - Face masks (e.g., disposable, cloth, shields)
  - Gloves
  - Hand sanitizer in all required locations
  - Transportation methods (e.g., carts) for meals and snacks if food served in classrooms
  - Thermometers
- Have a plan in place to assess instructional gaps and what learning students need to catch up on now that they are back in school. This plan should include how you will transition students from online/remote learning back to learning in a classroom.
- Have a plan in place to assess the mental health of students and staff and provide support, as needed.
- Assess how the school district will address animals in classrooms, visiting therapy animals, etc., given the April 22, 2020 CDC guidance on COVID-19 disease transmission to house cats in New York.

On May 1, 2020, Governor Cuomo asked schools to consider the following in developing plans for re-opening to in-person learning:

- How can schools monitor the spread of COVID-19?
- How do we instill parent confidence and reinforce student safety?
- When, and how, will extracurricular activities re-open?
- Do protocols for special student populations change?
- What steps need to be taken to ensure student mental health?
- Would any alternative calendars work?



PREPARING DISTRICT STAKEHOLDERS FOR A RETURN TO SCHOOL

- Consider district audiences (e.g., staff, families, students, vendors) and the needs of each audience. Develop communications materials and/or trainings accordingly.
- Communicate prior to opening to these different audiences through established communication channels. Communications should include:
  - What has been done to clean/disinfect the school consistently?
    - Any chemicals used
    - Frequency of cleaning
  - Changes from March to Now ("New Normal")
    - Implementing social distancing in classrooms, cafeteria, hallways, etc.
    - Instructional practices/academic expectations including updated attendance policy
    - Breakfast and lunch changes
    - Transportation
    - Arrival/dismissal procedures
- Which after-school activities have been postponed or canceled?
- Reminder for students and staff to stay home if they feel sick.
- What supports will be in place for students and staff who need social-emotional support when returning to school?
- How will the district bridge the equity gap between students who carried on with schoolwork and students who were unable to participate in online, remote learning? What academic support is in place for students?

HEALTH EDUCATION AND COMMUNICATION

- Communicate to students, staff, parents and community members:
  - The importance of social distancing, monitoring symptoms of COVID-19 and when to stay home
  - Hand hygiene, respiratory etiquette, mask-wearing procedures
  - School re-entry protocols
  - Mental health resources
  - Vaccine concerns/requirements
  - Updates to school policies
- Develop a protocol for communicating with families around COVID-19 cases or potential cases. Have sample messages/letters for COVID-19 prepared for various school audiences (e.g., staff, families).
- Provide training for staff and students on wearing, putting on and removing PPE. Send fact sheets home with students that provide similar education for parents.
- Develop and provide training for faculty/staff on how to address close contact interactions with students as part of everyday job tasks.
- Consider how to introduce substitutes (teachers, food service, transportation) to school policies surrounding health and safety.
- Prepare for impact of COVID-19 and flu season.
- Create a communication system for staff, students and families for self-reporting of symptoms.
- Notify local health officials, staff and families immediately of a possible case/exposure while maintaining confidentiality.

TALKING POINTS FOR SCHOOL LEADERS AS SCHOOL OPENS

- As we consider opening schools, please be aware that health and safety for students and staff is our top priority.
- As this process unfolds, we anticipate additional guidance from the state and federal governments. We will be following all state and local guidelines that are implemented as we re-open our schools.
- We understand there may be a number of questions. We encourage you to reach out to your administrators in the district and we will do our best to address questions as information is made available.
- This is an emotional time for all of us and we recognize the stress that re-opening places on staff, families and students. (Share examples of standard and recently developed social-emotional supports that are in place.)
- Other suggestions:
  - Highlight important things in the district re-opening plan that the community needs to know.
  - Provide talking points for teachers, parents, food service, support staff and transportation staff members so they can communicate with a consistent message to families. (This can include district-level information as well as information specific to their role or building.)

BUILDING PROCEDURES

CLASSROOMS

- Modify classes where students are likely to be in close contact (e.g., music, art, P.E., etc.) by bringing the specialist teacher to individual classrooms instead of having students go to the shared space.
- Hold classes outside when possible and encourage students to spread out.
- Break classes into smaller work groups when possible.
- Rotate teachers instead of students to other classrooms.
- Refrain from mixing classes with other classes and teachers (i.e., having a mixed math class with another set of students).
- Rearrange student desks and other seat spaces to at least six feet apart to increase the space between students.
  - Use visual aids (painter's tape, stickers, etc.) to illustrate traffic flow and appropriate spacing.
  - Open windows to ventilate the building before and after students arrive.
- Encourage healthy habits:
  - Reinforce handwashing routines, allow time for students to thoroughly wash their hands.
  - Discuss coughing and sneezing etiquette.
  - Have hand sanitizer and tissues available for use by students and staff.
  - Educate students on the importance of not touching their faces or other people's faces.
  - Ensure attendance policies are supportive of students and staff staying home when sick.
  - Teach non-touch acknowledgment to show friendship (no more fist bumps).
- Discourage students from congregating in large groups before and after school.
- Avoid sharing of community supplies when possible (e.g., scissors, pencils, etc.). Clean these items frequently.
- Remove upholstered furniture and soft seating.
- Discontinue use of permanent restroom/hall passes and hard copy student sign-in/sign-out logs.

CAFETERIA

- Consider alternate locations (e.g., classrooms) for eating breakfast and lunch.
  - If eating in classrooms, ensure appropriate daily cleaning of those classrooms.
  - If alternate spaces are not available, ensure classroom groups sit together in the cafeteria. Ensure adequate cleaning of tables between lunch periods.
- Provide reminders about the importance of not sharing food or drinks.
- Shorten and/or stagger meal times.
- Restrict access to vending machines.

PERSONAL PROPERTY

- Establish policies for personal property being brought to school (e.g., refillable water bottles, school supplies, headphones/earbuds, cell phones, books, instruments, etc.).
- Personal items should be labeled prior to entering the school building and kept in a separate bag or area specifically for personal items from home.

OTHER CONSIDERATIONS

- Determine what equipment is shared in the school district for all areas of school operations (e.g., classrooms, transportation, facilities, grounds, breakrooms) to develop use and sanitizing protocols.
- Cancel field trips, assemblies, athletic events, practices, special performances, school-wide parent meetings and other large gatherings based on state/federal guidance.
- Playgrounds:
  - Keep playgrounds closed while NYS park playgrounds are also closed.
  - Provide signage and restrict access to outdoor equipment.
  - Upon re-opening, consider deep cleaning of playground equipment and benches based on current guidance from CDC and other agencies prior to use. Regular cleaning/disinfection program should be developed based on the latest guidance. Students should wash hands before and after using playground equipment.
- Use classroom bathrooms and handwashing stations when possible. Avoid allowing multiple classes and students to use the bathroom at the same time. Monitor the number of students in bathrooms at any given time.
- Restrict hallway movement and ensure students are properly spaced out while walking in a line.
- Consider designating hallway travel in specific directions.
- Establish procedures for safely transporting anyone who is sick to their home or to a healthcare facility.
- Notify local health officials, staff and families immediately of a possible case while maintaining confidentiality.
- Have school nurse and other healthcare providers monitor traffic to the nurse's office/local health clinics.
- Designate a staff person to be responsible for responding to COVID-19 concerns. Ensure that staff members know who that person is.



ARRIVAL AND DISMISSAL PROCEDURES

- Stagger arrival and/or dismissal times.
  - Assign multiple student entry points rather than funneling all students through the same entry.
  - Make arrival/departure schedules for students who walk or are dropped off at school.
- Establish and clearly communicate procedures for caregiver/parent pick up.
  - Explain to caregivers/parents that drop-offs should be as brief as possible.
  - Ask caregivers/parents to wash their own hands and assist in washing the hands of their children before drop off, prior to pick up and when they get home.
  - Eliminate pen and paper sign-in/sign-out sheets.
  - Have hand sanitizer available if signing children in or out on an electronic device.
  - Consider having a single individual responsible for signing students in and out (e.g., school monitor, secretary).
  - Install hand sanitizer dispensers near all entry doors and other high-traffic areas. Follow current hand sanitizer in school regulations for children.
- Consider student/visitor screening
  - Individuals who have a fever of 100.4°F or above or other signs of illness should not be admitted to a school building or onto a school bus. Encourage parents to be on the alert for signs of sickness in children and keep them home when they are sick.
  - Encourage staff members to stay home if they are sick.
  - Use a no-touch thermometer and disinfect the thermometer after each use with an alcohol wipe.
  - Ensure that all screenings are implemented in a safe, respective manner in accordance with applicable privacy laws and regulations.
- On-site health temperature screening protocol
  - Develop protocol for daily pre-shift screening prior to entry (i.e., temperature screening and observation of overt symptoms).
  - Things to consider in the protocol:
    - Provide strategically placed barriers to prevent anyone from missing pre-shift screening.
    - Develop a policy for steps to be taken when an employee presents at the door with fever or visible symptoms.

SCHOOL VISITORS

- Limit nonessential visitors to all school buildings, including district offices and transportation facilities.
- Hold all parent-teacher conferences and other meetings as phone/virtual conferences.
- Visitors must follow the 6-foot social distancing mandate and follow regulations for wearing protective equipment to limit the spread of illness while on site. Screen all visitors before allowing them on site.
- Restrict facility use by outside groups (e.g., Girl Scouts, CYO basketball).
- Develop procedure for visitor sign-ins:
  - Eliminate pen and paper sign-in/sign-out sheets.
  - Have hand sanitizer available if signing in or out on an electronic device.
  - Consider having a single individual responsible for signing visitors in and out (e.g., school monitor, secretary).
- Establish protocols for before- and after-school programs:
  - Sign-in and sign-out procedures
  - Cleaning and disinfecting procedures
  - Use of PPE
  - Develop/use a self-screening symptoms checklist
- Establish protocols for school building construction workers:
  - Sign-in and sign-out procedures
  - Work locations
  - Cleaning and disinfecting procedures
  - Use of PPE
  - Develop/use a self-screening symptoms checklist

INSTRUCTIONAL PROGRAM CONSIDERATIONS

- Create a plan to determine learning gaps/bring instructional programming into line with where students are.
- Create a plan for devices (e.g., Chromebooks, iPads) that were distributed during the closure. Will any instruction continue in Google Classroom/similar platforms?
- Limit the extent to which students from different classes are brought together for certain classes/programming.
- Take advantage of online/distance learning opportunities to the extent possible through common regional schedules.
- Continue the regional sharing/development of instructional resources (e.g., Essential Ed website).
- Consider whether students will be able to return to off-site programming (e.g., BOCES CTE programs). If not, what will their daily course schedules look like?
- Consider whether you will allow students to participate in clubs and other extracurricular activities based on the level of community spread and guidance from health departments. Communicate these decisions clearly to students and parents.
- Consider how you will approach special education support services (e.g., speech, OT) that may involve close contact between staff and students.
- Consider accommodations for children and families at risk for serious illness from COVID-19.
  - Have a plan in place to honor requests from parents who may have concerns about their children attending school due to underlying medical conditions of those in their home. Will remote learning opportunities be available for students who are unable to attend?
  - Have a plan in place for staff members who cannot be at school due to their own high-risk conditions. Will these staff members be allowed to provide distance learning instruction if they are unable to attend?
- Consider what courses can be offered remotely, especially at the secondary level, and how this would impact scheduling.
- What new technology needs are associated with a blended-learning model? Do additional devices need to be purchased?
- Do students have adequate technology/broadband access for remote learning?

STAFFING CONSIDERATIONS

- Create a plan to ensure there is sufficient staff to carry out school operations. Is additional staff required?
- Review and update attendance policy for staff members. Communicate expectations among leadership and staff.
- Ensure that mental health resources are easily accessible and available. Are you offering additional support? If yes, make sure you communicate this information.
- Develop a plan to protect the safety and well-being of all staff, including those who are considered vulnerable. Will these staff members be able to conduct their job responsibilities from home?
- Prepare communication messaging and materials for staff.
- Ensure staff receive necessary training on updated protocols, policies and guidelines.
- Ensure staff have access to PPE and have received training on expectations of use and proper disposal.
- Develop and review a return-to-work protocol after quarantine. Share protocol with staff. Adjust as necessary in accordance with federal, state and local guidance.
- Engage and communicate expectations to the union groups regarding isolation and return-to-work protocols.
- Encourage employees to perform daily self-screening before arriving to work.
- Develop and provide employees with a self-checklist for at home self-screening.
- Provide guidance and resources to the HR team to ensure preparedness for inquiries or reports of symptomatic employees prior to shift.
- Monitor absenteeism and have a roster of trained backup staff.
- Designate a staff person to be responsible for responding to COVID-19 concerns and ensure that all employees know who this person is/how to contact them.
- Do faculty/staff have adequate technology/broadband at home for remote working/teaching?

SOCIAL DISTANCING IN THE WORKPLACE PROTOCOL

- Develop and distribute protocol to all employees.
- Things to consider in the protocol:
  - Workstations/cubicles, desk placements
  - Staggered start and end times
  - Staggered lunch and break times
  - Refrigerator lunch storage
  - Evaluate restrooms for spacing and possible increase daily cleaning
  - Signage
  - Installation of barriers in cafeterias or public-facing offices

ISOLATION PROTOCOL

- Develop an isolation protocol for employees who become ill at work or demonstrate symptoms at work.
- Things to consider in the protocol:
  - Identify a responsible person "Isolation Coordinator" for each location
  - Provide training on the protocol to Isolation Coordinator
  - Develop forms and protocol for distribution to employees as needed
- Establish procedures for safely transporting anyone sick home or to a healthcare facility.
- Advise sick staff members not to return to work until they have met CDC criteria to discontinue home isolation.

COVID-19 FEDERAL AND STATE LEAVE LAWS FOR SCHOOL DISTRICTS

- Review protocol and FMLA forms developed to comply with FFCRA.
- Ensure federal and state laws and leave notification expectations are properly communicated to staff members.

MEDICAL ACCOMMODATIONS UNDER ADA AND COVID-19

- It is the employer's responsibility to accommodate an employee with a disability during the pandemic, even if the employee is working remotely.
- Employers may request information from the employee during the "interactive process" to determine if the employee's medical condition/diagnosis is a disability under the American with Disabilities Act (ADA).
- Types of questions to consider asking during the interactive process:
  - How does the disability create a limitation?
  - How will the requested accommodation address the limitation?
  - Whether there is another form of accommodation that could effectively address the request.
  - How will the proposed accommodation enable the employee to continue performing the essential function of their job?
  - Is the requested accommodation reasonable or will it create an undue hardship?
- During the accommodation process, if the employer takes an employment action using guidance from CDC, DOH or any other state or federal agency, you should document the guidance that you followed in your decision making. This will be useful if you are required to defend the reasoning behind the employment decision.



PERSONAL PROTECTIVE EQUIPMENT (PPE)

MASKS

Per Governor Andrew Cuomo's Executive Order 202.17 (as of 8 p.m. April 17, 2020): Any person utilizing public or private transportation carriers or other for-hire vehicles, who is over age two and able to medically tolerate a face covering, shall wear a mask or face covering over the nose and mouth during any such trip; any person who is operating such public or private transport, shall likewise wear a face covering or mask which covers the nose and mouth while there are any passengers in such vehicle. The COVID-19 pandemic situation and response is currently evolving. The following guidance is current as of the document's date. Recommendations about masks and other PPE may change due to executive order or improved availability.

- As N95 respirators become available, prioritize this equipment for nurses, those in other high-risk positions.
- Extend use times of undamaged, non-visibly soiled PPE, and implement expanded facility-based PPE reuse policies and procedures.
- Adapt and implement Centers for Disease Control and Prevention (CDC) strategies for healthcare to optimize the supply of PPE and equipment, and best practices to sustain PPE supplies.
- Implement decontamination and reuse strategies of filtering facepiece respirators as contingency and crisis capacity measures.
- Understand and track PPE requirements and burn rates. Utilize CDC's PPE burn rate calculator.

RECOMMENDED FACE MASKS INCLUDING N95 RESPIRATORS AND DISPOSABLE/CLOTH FACE MASKS

- The cloth face coverings recommended are not surgical masks or N-95 respirators. Those are critical supplies that must continue to be reserved for healthcare workers and other medical first responders, as recommended by current CDC guidance.
- CDC also advises the use of simple cloth face coverings to slow the spread of the virus and help people who may have the virus and do not know it from transmitting it to others. Cloth face coverings, fashioned from household items or made at home from common materials at low cost, can be used as an additional, voluntary public health measure.
- Cloth face coverings should not be placed on children under age 2, anyone who has trouble breathing, or is unconscious, incapacitated or otherwise unable to remove the mask without assistance.

HOW TO WEAR CLOTH MASK APPROPRIATELY

- Fit snugly but comfortably against the side of the face.
- Secure with ties or ear loops.
- Include multiple layers of fabric.
- Allow for breathing without restriction.
- Masks should be laundered and machine dried without damage or change to shape.



HOW TO PUT ON/REMOVE N95/DISPOSABLE/CLOTH FACE MASK

- Putting on
  - Secure ties or elastic bands at middle of head and neck.
  - Fit flexible band to nose bridge (if present on equipment).
  - Fit snug to face and below chin.
  - Fit-check respirator.
- Removing
  - Front of mask/respirator is contaminated — DO NOT TOUCH!
  - If your hands get contaminated during mask/respirator removal, immediately wash your hands or use an alcohol-based hand sanitizer.
  - Grasp bottom ties or elastics of the mask/respirator, then the ones at the top, and remove without touching the front.
  - Discard disposable masks in a waste receptacle and/or clean cloth in a washing machine.

WASHING/LAUNDERING

- Cloth masks should be routinely washed depending on the frequency of use.

OBTAINING MASKS FOR SCHOOLS

- Work with normal and alternate private sector suppliers to obtain PPE. It may be necessary to identify multiple options for suppliers and prioritize near-term versus long-term needs.
- If suppliers are unable to provide for your needs, and the PPE is urgently required, submit a request for assistance to your local or state emergency management agencies. If local emergency management is unable to address the PPE shortfall, they can relay it to the state. If the state is unable to address it, they can submit a request for support to their FEMA Regional Response Coordination Center.
- Examples:
  - AED Superstore - Approx. $6.45 per box of 50 masks
  - Honeywell
  - 3M
  - Kimberley Clark
- Pay attention to well-known sellers of surgical masks/masks.
- Local suppliers may be a faster avenue for obtaining masks.
- Although a school district might order cases of masks, FEMA oversees allotting masks to schools. A school may only receive a portion of their ordered masks at a time.
- All students, faculty and staff must be trained on using the PPE that they are required to wear. This training program should include the importance of masks, how to properly put on and remove masks, and how to properly clean/disinfect the masks.
- Consider mask alternatives for students or staff with special needs (e.g., specialized hats, face shields).

QUESTIONS TO CONSIDER

- Will you allow students/staff members to bring masks from home?
- Will employees be required to re-use masks?
- Will employers be responsible for providing masks?
- What types of masks should schools be looking to order?
- If there are not enough masks provided to the school district for EACH individual, will school be able to re-open?
- What if a student/staff member does not have the ability to purchase/obtain a face mask on their own?
- What if a student/staff member does not have the ability to launder masks or face coverings?

CLEANING/DISINFECTING PROTOCOLS

CLEANING

- Clean surfaces using soap and water. Practice routine cleaning of frequently-touched surfaces.
- Ensure all water systems (e.g., drinking fountains, sinks) are safe to use after a prolonged facility shutdown to minimize the risk of diseases associated with water.
- Close off areas used by a sick person and do not use before cleaning and disinfecting.

DISINFECTING

- Clean the area or item with soap and water or another detergent if it is dirty. Then, use disinfectant.
- Use NYS DEC- and EPA-registered household disinfectant. Follow the instructions on the label to ensure safe and effective use of the product. Many products recommend:
  - Keeping surface wet for entire contact time (see product label).
  - Use precautions such as wearing gloves and making sure you have good ventilation during use of the product.
- Diluted household bleach solutions may also be used if appropriate for the surface.
  - Check the label to see if your bleach is intended for disinfection and ensure the product is not past its expiration date. Some bleaches, such as those designed for safe use on colored clothing or for whitening may not be suitable for disinfection.
  - Unexpired household bleach will be effective against coronaviruses when properly diluted.
  - Follow manufacturer's instructions for application and proper ventilation. Never mix household bleach with ammonia or any other cleanser.
  - Leave solution on the surface for at least 1 minute.
- Soft Surfaces
  - Clean the surface using soap and water or with cleaners appropriate for use on these surfaces.
  - Launder items (if possible) according to the manufacturer's instructions. Use the warmest appropriate water setting and dry items completely OR disinfect with an EPA-registered household disinfectant.
- Electronics
  - Place wipeable covers on electronics.
  - Follow manufacturer's instructions for cleaning and disinfecting. If no guidance, use alcohol-based wipes or sprays containing at least 70% alcohol. Dry surface thoroughly.
- Laundry
  - Launder items according to the manufacturer's instructions. Use the warmest appropriate water setting and dry items completely.
  - Wear disposable gloves when handling dirty laundry from a person who is sick.
  - Dirty laundry from a person who is sick can be washed with other people's items.
  - Do not shake dirty laundry.
  - Clean and disinfect clothes hampers according to guidance above for surfaces.
  - Remove gloves and wash hands right away.
- Cafeteria and food service
  - Review cleaning protocols for cafeteria furniture, meal preparation and serving areas, point-of-sale transactions and dishes/utensils and update accordingly.
  - Ensure that cafeteria tables are thoroughly cleaned between meal periods.
- Classrooms
  - Cleaning of returned loaned school technology.
  - Frequency of room cleaning should be greater than the regular cleaning schedule/rotation.
- Transportation
  - As much as possible, students should follow social distancing on the school bus.
  - Encourage parents/guardians to transport students to and from school to limit the number of students on buses.
  - Stagger bus routes so there are fewer students on the bus.
  - Ensure buses are thoroughly cleaned in between runs.
  - Review bus cleaning protocols and update accordingly.



TRAINING TOPICS FOR STAFF

- COVID-19 disease symptoms
- COVID-19 transmission
- Maintaining strong immune systems
- Basic safety practices, hand hygiene, respiratory etiquette, social distancing
- Self-monitoring, employee health checks
- Employer responsibilities
- Employee responsibilities
- Transfer of hand sanitizer to smaller containers
- Use of face masks (donning/doffing) (cloth masks vs. disposable masks vs. N95 respirators)
- PPE
  - Employer/employee OSHA requirements
  - Reuse (sanitizing, cleaning)
- Respirator protection
- Cleaning and disinfection
- Signage and labeling
- Altered work practices during COVID-19 pandemic
- Pre-return to work trainings:
  - Review of all protocols with contract salaried employees
  - Training for temperature screeners and isolation coordinators

MENTAL HEALTH

Upon arrival back to school, both students and staff may require mental health services.

POTENTIAL ISSUES TO THINK ABOUT:

- Loss/sicknesses of parents, grandparents, friends, school members, etc.
- Behind on schoolwork/classwork
- Having to send child back to school
- Secondary traumas
- Increased anxiety/stress
- Increase in abusive tendencies
- Isolated/lonely
- Change in routine
- Relocation
- Unemployment situation/job loss
- News, constant bad news
- Previous mental health issues worsening
- Frustration with use/knowledge of remote technology
- Family job loss

EVERYONE REACTS DIFFERENTLY TO STRESSFUL SITUATIONS:

- Older people and people with chronic diseases who are at higher risk for severe illness from COVID-19
- Children and teens
- People who are helping with the response to COVID-19, like doctors, other health care providers, and first responders
- People who have mental health conditions including problems with substance use



EMOTIONAL REACTIONS TO COMING OUT OF QUARANTINE MAY INCLUDE:

- Mixed emotions, including relief after quarantine
- Fear and worry about your own health and the health of your loved ones
- Stress from the experience of monitoring yourself or being monitored by others for signs and symptoms of COVID-19
- Sadness, anger or frustration because friends or loved ones have unfounded fears of contracting the disease from contact with you, even though you have been determined not to be contagious
- Guilt about not being able to perform normal work or parenting duties during quarantine
- Other emotional or mental health changes

Children may also feel upset or have other strong emotions if they, or someone they know, has been released from quarantine.

Children and teens react, in part, on what they see from the adults around them. When parents and caregivers deal with COVID-19 calmly and confidently, they can provide the best support for their children. Parents can be more reassuring to others around them, especially children, if they are better prepared.

SYMPTOMS TO WATCH FOR MAY INCLUDE:

- Excessive crying or irritation in younger children
- Returning to behaviors they have outgrown (e.g., toileting accidents or bedwetting)
- Excessive worry or sadness
- Unhealthy eating or sleeping habits
- Irritability and "acting out" behaviors in teens
- Poor school performance or avoiding school
- Difficulty with attention and concentration
- Avoidance of activities enjoyed in the past
- Unexplained headaches or body pain
- Use of alcohol, tobacco or other drugs

VENTILATION AND HVAC CONSIDERATIONS

- Because the transmission of COVID-19 through the air is likely, steps should be taken to control airborne exposure. Changes to building operations, including the operation of heating, ventilating and air-conditioning systems, can reduce airborne exposures.
- Ventilation and filtration provided by heating, ventilating and air-conditioning systems can reduce the airborne concentration of COVID-19 virus and thus the risk of transmission through the air.
- Consider the health of individuals in unconditioned spaces. Resulting health impacts may be life threatening and reduce an individual's resistance to infection. ASHRAE does not recommend the disabling of heating, ventilating and air-conditioning systems.
- Consideration should be made to recirculation of infectious particles (< 5 microns) remaining airborne that could lead to the transmission of infection within building areas.
  - The Federation of European Heating, Ventilation and Air Conditioning Associations (REHVA) recommends "no use of recirculation" in any building with a mechanical ventilation system.
    - "Virus particles in return ducts can also re-enter a building when centralized air handling units are equipped with recirculation sectors."
    - Avoid recirculation of air during COVID-19 episodes by closing the recirculation dampers (via the building management system or manually).
    - Air handling units and recirculation sections equipped with return air filters (even HEPA) may not filter out virus size particles effectively.
- When the humidity is higher, the droplets become heavier and fall to the surface, where they are easier to control. Humidity comfort levels should be between 30-60% to avoid infection.

TRANSMISSION OF COVID-19 BETWEEN HUMANS AND ANIMALS

The first confirmed cases of a COVID-19 infection in house cats in New York was made on April 22, 2020. In one case, the pet may have been exposed to the virus by a mildly ill, asymptomatic household member or an infected person outside its home. The other pet showed symptoms of disease after its owner tested positive for COVID-19. Until more is known, CDC recommends the following:

- Do not let pets interact with people or other animals outside the household.
- Keep animals indoors when possible to prevent them from interacting with other animals or people.
- Walk animals on a leash, maintaining at least 6 feet from other people and animals.
- Avoid dog parks or public places where a large number of people and dogs gather.
- In accordance with the Americans with Disabilities Act, service animals should be permitted to remain with their handlers.
- At this time, there is no evidence that animals play a significant role in spreading the virus that causes COVID-19.
- Based on the limited information available to date, the risk of animals spreading COVID-19 to people is considered to be low. Standard handwashing practices should be implemented before and after interacting with a companion animal.
- State public health veterinarians should also be notified if health professionals become aware of an animal that becomes ill with symptoms compatible with SARS-CoV-2 infection and resides or is housed in a setting with a person with COVID-19.

RISK FACTOR CONSIDERATIONS FOR SCHOOL OPERATIONS

The COVID-19 virus is believed to spread from person-to-person, primarily through respiratory droplets produced when an infected person coughs or sneezes. The virus is also believed to spread by people touching a surface or object and then touching one's mouth, nose or possibly the eyes. To prevent potential exposures to the COVID-19 virus, school districts should:

- Review job tasks in order to assess the hazards to which school community members may be exposed;
- Make an evaluation of the risk of exposure; and
- Select, implement and ensure school community members use controls to prevent exposure.

RISK FACTORS RELATED TO SCHOOL OPERATIONS AND ACTIVITIES

- Close contact, social distance cannot be maintained, less than 6 ft. proximity
- Crowding, population density (e.g., classrooms, breakrooms, job tasks)
- Length of time individuals are around others
- Number of person-to-person interactions (with and without physical barriers)
- High exposure to disease
  - Likelihood population has illness (e.g., health professionals who have been exposed)
  - First responders (e.g., health professionals, security officers)
- Population with poor hygiene habits (e.g., elementary-level students)
- Likelihood of violent interactions leading to close contact interactions
- Activities requiring the use of shared equipment where individuals may come into contact with contaminated surfaces
- Access to resources and equipment that prevent COVID-19 transmission (e.g., hand sanitizer stations, face masks, PPE, gloves)
- Interaction with outside community members (e.g., suppliers, vendors, childcare programs, recreation programs)

BROADER RISK CONSIDERATIONS IMPACTING SCHOOL OPERATIONS AND ACTIVITIES

- Building/room ventilation system availability and efficacy
- Community spread
- Global, interstate travel of school community and family members
- Social interactions of school community and family members
- Recent visit to high-risk locations (e.g., urgent care/ER, downstate)
- Inadequate shelter, poor housing conditions in community
- Likelihood of illness
- Staff/student absenteeism
- Financial limitations
- Increased demand on support programs such as food service, mental health and general health needs

SCHOOL OPERATIONS AND ACTIVITIES RISK CONSIDERATIONS

SPORTING EVENTS

School Operation/Activity Risk Factors

- Exposure to teams from different communities, geographic locations
- Physical, close interactions of players, coaches, spectators
- Exit/entry choke points
- Hygiene practices (e.g., handwashing)
- Bathroom facilities' cleanliness during events
- Locker room space constraints
- Responding to emergencies at sporting events (e.g., injuries, alarm activations)

Broader Risk Considerations

- Building ventilation
- Community spread
- Travel history

IN-SCHOOL EVENTS/GATHERINGS (DURING/AFTER SCHOOL)

School Operation/Activity Risk Factors

- Close proximity (auditorium seating)
- Exit/entry choke points
- Length of time population is together

Broader Risk Considerations

- Building ventilation
- Community spread

CAFETERIA

School Operation/Activity Risk Factors

- Food workers exposed to sick children
- Children exposed to sick food workers
- Close quarters in cafeteria space
- High number of person-to-person interactions
- Large number of kids in room at once
- Lunch monitors and teachers involved
- Length of time population together
- Population with poor hygiene habits (e.g., elementary-level students)
- Access to resources and equipment that prevent COVID-19 transmission (e.g., hand sanitizer stations, face masks, PPE, gloves)
- Contaminated materials (e.g., utensils, trays)

Broader Risk Considerations

- Building ventilation
- Financial limitations
- Increased demand on support programs

RECESS

School Operation/Activity Risk Factors

- Close contacts between children
- Touching of shared equipment
- Many children at once
- Recess monitors
- Length of time population together

Broader Risk Considerations

- Community spread

FIELD TRIPS

School Operation/Activity Risk Factors

- School member exposure to other communities, geographic locations
- Transportation required
- Number of kids, teachers/aides, chaperones involved
- Crowding, population density
- Activities requiring the use of shared equipment
- Access to resources and equipment that prevent COVID-19 transmission (e.g., hand sanitizer stations, face masks)

Broader Risk Considerations

- Building ventilation
- Community spread

CLASSROOM SETUP

School Operation/Activity Risk Factors

- Crowding, population density
- Ability to provide social distancing based on room/student size
- Shared school supplies
- Physical work items shared (e.g., desks, rugs, chairs, door knobs/cubbies)
- Length of time individuals are around others
- Access to resources and equipment that prevent COVID-19 transmission (e.g., hand sanitizer stations, face masks, PPE, gloves)
- Population with poor hygiene habits (e.g., elementary-level students)

Broader Risk Considerations

- Building ventilation
- Financial limitations
- Increased demand on support programs

SWITCHING CLASSES IN HALLS

School Operation/Activity Risk Factors

- Crowding, population density high
- Sharing the same space (e.g., lockers)
- Length of time
- Exit/entry choke points

Broader Risk Considerations

- Building ventilation



SCHOOL OPERATIONS AND ACTIVITIES RISK CONSIDERATIONS (continued from page 10)

SHARING EQUIPMENT/MATERIALS (E.G., CLASSROOM SUPPLIES SUCH AS PENCILS, PENS, HEADPHONES, CELLPHONES, CUSTODIAL MATERIALS, GROUNDS KEEPING EQUIPMENT/ MACHINES, VEHICLES)

School Operation/Activity Risk Factors
- Surface contamination
- Population with poor hygiene habits (e.g., elementary-level students)
- Access to resources and equipment that prevent COVID-19 transmission (e.g., hand sanitizer stations, disinfecting supplies, collection bins for "dirty" items)
- Population with poor hygiene habits (e.g., elementary-level students)

Broader Risk Considerations
- Financial limitations
- Increased demand on support programs

PE CLASS

School Operation/Activity Risk Factors
- High likelihood of physical touch/actions
- Touching of shared equipment
- Close contact and crowding, population density
- Advisability of mask usage for students with respiratory issues like asthma
- Indoor vs. outdoor settings considerations (e.g., increased breath exhalation in indoor environment)
- Length of time
- Populations where restraint and hands-on response is required or likely
- Likelihood that students will not keep face masks on or wear them at all

Broader Risk Considerations
- Building ventilation

SPECIAL ED CLASSES, OT/PT

School Operation/Activity Risk Factors
- Close contact with anticipated physical touch
- Shared resources/work
- Population with poor hygiene habits (e.g., elementary-level students)

Broader Risk Considerations
- Building ventilation
- Financial limitations
- Increased demand on support programs

TRANSPORTATION

School Operation/Activity Risk Factors
- Close proximity
- Contaminated surfaces
- Frequency of getting on/off the bus
- Exit/entry choke points
- Length of time
- Population with poor hygiene habits (e.g., elementary-level students)
- Transportation of non-public school attendees

Broader Risk Considerations
- Building ventilation
- Financial limitations
- Increased demand on support programs

MENTAL HEALTH SERVICES

School Operation/Activity Risk Factors
- Proximity to providers
- Sufficient services available
- Established networking/connections
- Physical layout limitations (ability to provide social distancing)

Broader Risk Considerations
- Financial limitations
- Increased demand on support programs
- Building ventilation

DROP OFF/PICK UP

School Operation/Activity Risk Factors
- Close proximity
- Contaminated surfaces
- Exit/entry choke points
- Length of time
- Frequency of student dismissal/drop off
- Shared objects (e.g., pen, pencils, tablets for sign-in)

Broader Risk Considerations
- Building ventilation

INTERNAL/EXTERNAL CHILDCARE PROGRAMS

School Operation/Activity Risk Factors
- Close contact
- Sharing of toys/spaces
- Crowding, population density
- Physical layout limitations (e.g., ability to provide social distancing based on room size)
- Pick up/drop off
- Population with poor hygiene habits (e.g., elementary-level students)
- Number of childcare attendees/monitors
- Shared school supplies
- Physical work items shared (e.g., desks, rugs, chairs, doorknobs/cubbies)
- Length of time individuals are around others
- Access to resources and equipment that prevent COVID-19 transmission (e.g., hand sanitizer stations, face masks, PPE, gloves)
- District-specific training for people manning childcare programs

Broader Risk Considerations
- Building ventilation
- Financial limitations
- Increased demand on support programs

TIME OUT ROOMS

School Operation/Activity Risk Factors
- Close contact with anticipated physical touch
- Populations where restraint and hands-on response is required or likely
- Likelihood that these students will not keep face masks on
- Contaminated surfaces
- Physical layout limitations (ability to provide social distancing)

Broader Risk Considerations
- Building ventilation

SCHOOL OPERATIONS AND ACTIVITIES RISK CONSIDERATIONS (continued from page 11)

AFTER-SCHOOL PROGRAMS

School Operation/Activity Risk Factors

- Close contact
- Crowding, population density
- Physical layout limitations (ability to provide social distancing based on room size)
- Pick up/drop off
- Population with poor hygiene habits (e.g., elementary level students)
- Shared equipment and supplies (e.g., desks, chairs, doorknobs, cubbies)
- Length of time individuals are around others
- Access to resources and equipment that prevent COVID-19 transmission (e.g., hand sanitizer stations)
- Involvement of external areas
- Limited school district oversight/supervision

Broader Risk Considerations

- Building ventilation
- Financial limitations
- Increased demand on support programs

RELOCATION/MOUS

School Operation/Activity Risk Factors

- Exposure to others external to school community
- Close proximity/number of people/length of time
- Physical layout limitations (ability to provide social distancing based on room size)
- Contaminated surfaces
- Collaborating partner's building cleaning protocols unknown
- Is the building open to school community if needed?

Broader Risk Considerations

- Building ventilation
- Community spread

VISITORS

School Operation/Activity Risk Factors

- Close proximity with school members
- External school community members
- Activities requiring the use of shared equipment where individuals may come into contact with contaminated surfaces
- Physical layout limitations in the visitor process area (narrow space with two-way traffic)
- Sign-in system using shared equipment (e.g., doorbell, pen, lanyards).

Broader Risk Considerations

- Community spread
- Global, interstate travel of school community and family members
- Recent visit to high-risk location (e.g., urgent care/ER, downstate)
- Likelihood of illness
- District has right to limit entry into building

FACE MASK USE

School Operation/Activity Risk Factors

- Contaminated surfaces
- Appropriate donning/doffing
- Ability to launder/keep clean
- Policies in place for wearing during certain events (sports)
- Enforcement/education of rules (e.g., consistent wearing, no touching of mask surface)
- Proper removal and disposal
- Ability to procure disposable face masks
- Access to spare masks for student/staff use where their mask cannot be used (contaminated, broken, lost) while at school
- Student/staff mask use is contraindicated due to physical/health/mental issue(s)

Broader Risk Considerations

- Building ventilation
- Community spread
- Financial limitations
- Increased demand on support programs

NURSE'S OFFICE

School Operation/Activity Risk Factors

- Close contact, crowding, population density
- Physical layout limitations (small space)
- Pick up from office
- Population with poor hygiene habits (e.g., elementary-level students)
- Shared equipment and supplies (e.g., chairs, beds)
- Length of time individuals are around others
- Access to resources and equipment that prevent COVID-19 transmission (e.g., hand sanitizer stations, gloves, masks, PPE)
- Scheduled visits for distribution of medications causing high population density
- Availability to launder shared items

Broader Risk Considerations

- Likelihood of illness
- Building ventilation
- Recent visit to high-risk location (e.g., urgent care/ER)
- Financial limitations
- Increased demand on support programs

SAFETY DRILLS

School Operation/Activity Risk Factors

- Student, staff and visitor participation
- Close proximity
- Contaminated surfaces (door handles)
- Exit/entry choke points
- Length of time
- Closely passing in hallways
- Close proximity and length of time during lockdown
- External school community members

Broader Risk Considerations

- Likelihood of illness
- Community spread

SCHOOL OPERATIONS AND ACTIVITIES RISK CONSIDERATIONS (continued from page 12)

LIBRARY LENDING OF BOOKS, MATERIALS

School Operation/Activity Risk Factors
- Close contact
- Contaminated surfaces
- Redistribution of materials

COMMON USE AREAS (E.G., WEIGHT ROOMS, TECHNOLOGY, COMPUTER ROOMS, MUSIC ROOMS, ART ROOMS)

School Operation/Activity Risk Factors:
- Contaminated surfaces
- Frequent use of equipment, high-touch surfaces
- Physical layout limitations (small space)
- Population with poor hygiene habits (e.g., elementary-level students)
- Shared equipment and supplies
- Length of time individuals are around others
- Access to resources and equipment that prevent COVID-19 transmission (e.g., hand sanitizer stations, masks)

Broader Risk Considerations
- Building ventilation

BUILDING ACCESS (E.G., CHILDCARE, RECREATION, ATHLETICS, VISITORS)

School Operation/Activity Risk Factors:
- Close proximity with school members
- External school community members

Broader Risk Considerations
- Community spread
- Global, interstate travel of school community and family members
- Recent visit to high-risk location (e.g., urgent care/ER, downstate)
- Likelihood of illness

SECURITY OPERATIONS (E.G., SRO, SAFETY OFFICERS, HALL MONITORS)

School Operation/Activity Risk Factors:
- Close contact
- First responders
- Physical layout limitations (ability to provide social distancing)
- Populations where restraint and hands-on response is required or likely

Broader Risk Considerations
- Building ventilation

ELEVATORS

School Operation/Activity Risk Factors:
- Close contact
- Contaminated surfaces (restrictions for weight capacity to minimize occupant load)

Broader Risk Considerations
- Building ventilation

CRAWL/CONFINED SPACES

School Operation/Activity Risk Factors:
- Close contact
- Contaminated surfaces
- Length of time
- Tasks that require use of a buddy system

Broader Risk Considerations
- Building ventilation

SIGN-IN SHEET PROCESS/OFFICE TASKS

School Operation/Activity Risk Factors:
- Contaminated surfaces
- External school community members
- Length of time individuals are around others

Broader Risk Considerations
- Building ventilation

DRINKING WATER SOURCES

School Operation/Activity Risk Factors:
- Surface contamination (e.g., fountain controls, water outlet)
- Frequency of use
- Population with poor hygiene habits (e.g., elementary-level students)
- Use by external groups

Broader Risk Considerations
- Building ventilation

ANIMALS IN SCHOOL CLASSROOMS (E.G., CLASSROOM PETS, THERAPY ANIMAL VISITORS)

School Operation/Activity Risk Factors:
- Population with poor hygiene habits (e.g., elementary-level students)
- Frequent touching, cuddling of animals
- External school community members
- Length of time animals are around others

Broader Risk Considerations
- Community spread
- Unknown spread among animal populations
- Building ventilation



IMPLEMENTING CONTROLS TO THE RISK OF COVID-19 INFECTION SPREAD

To prevent COVID-19 illness, identify school operations so that infection risks can be determined. Ultimately, control actions should be implemented to eliminate or reduce the risk of infection within the school community. A "Hierarchy of Controls" is an essential safety tool to provide a framework for addressing hazards and mitigating risk. Following are example controls related to COVID-19.

It is anticipated that the controls used to prevent COVID-19 infection will be revised periodically as the level of community spread changes. The CDC has published a guidance document, *Interim Guidance for Administrators of US K-12 Schools and Child Care Programs to Plan, Prepare, and Respond to Coronavirus Disease 2019 (COVID-19)*, which outlines how schools can mitigate the spread of COVID-19 infection based on the level of COVID-19 infection in the community. Corresponding directives from Governor Cuomo, and guidance from the CDC, state and local health agencies, will influence school operation decisions and policies as school districts navigate the pandemic.

ELIMINATION

Physically remove the COVID-19 virus from school/educational environment.

Recommended COVID-19 Controls

- Implement social distancing practices to eliminate person-to-person spread.
- Implement distance learning, teleconferencing and remote working to eliminate school contamination/spread.
- Maintain a strong IT system to support remote work.
- Segregation of key personnel to minimize contamination/spread.
- Isolation of infected individuals.
- Limit visitors and public access.
- Eliminate or reduce sharing of materials, equipment or infrastructure.
- Eliminate activities involving large numbers of people.
- Eliminate/reduce time for in-person interactions during class transitions.
- Reduce the length of time for person-to-person interactions.



ENGINEERING

Isolate school community members from the COVID-19 virus.

Recommended COVID-19 Controls

- Review/adjust ventilation rates to increase levels of fresh air.
- Review/adjust ventilation airflow and pressure.
- HEPA filtering
- Provide appropriate humidity levels.
- Reorganize rooms/spaces to support physical distancing.
- Provide a separate health office for students with flu-like symptoms.
- Establish separate building exits for individuals with flu-like symptoms.
- Establish directional routes in hallways, rooms.
- Adjust arrival/dismissal procedures.
- Implement assigned seating in classrooms and on buses.
- Reduce the number of classrooms and spaces that students and staff visit/use during the day.
- Utilize physical barriers, including shields and plastic covers.
- Where possible, use the following:
  - Touchless trash cans
  - Infrared imaging of temperature
  - Hand sanitizer stations
  - UV lights for disinfection

ADMINISTRATIVE

Change the way people operate in the school/educational environment.

Recommended COVID-19 Controls

- Communicate with local health departments and keep track of COVID-19 cases in the community.
- Keep track of groups/communities where there are a number of cases, which could impact the school community.
- Monitor attendance records to identify spike in illnesses.
- Provide guidance, training and education for school community members regarding illness prevention and social distancing rules/protocols.
- Identify students, staff who are in high-risk categories for COVID-19.
- Institute staggered work shifts and school meeting/arrival/dismissal times.
- Increase staffing to support social distancing, illness prevention efforts.
- Conduct health screenings.
- Discontinue non-essential travel.
- Developing a forum for concerned community members and send out COVID-19 updates.
- Post signage and infection control reminders.
- Cancel field trips, assemblies, other large gatherings.
- Limit extracurricular activities.
- Implement short-term closures to clean and disinfect if an infected person has been in the school building.
- Put into effect extended school dismissals if there is substantial transmission in the local community and upon guidance from state and local health departments.
- Put into effect extended remote work practices if the global or available supply of PPE, masks, hand sanitizer and disinfectants is insufficient and upon guidance from state and local health departments.

IMPLEMENTING CONTROLS TO THE RISK OF COVID-19 INFECTION SPREAD (continued from page 14)

WORK PRACTICES

Specific procedures to prevent the spread of COVID-19.

Recommended COVID-19 Controls

- Implement/enforce hand hygiene, respiratory etiquette practices.
- Implement physical distancing procedures.
- Decrease social meetings, contact between individuals.
- Minimize student mixing of classes. Maintain one teacher per set of students if possible.
- Allow for more frequent handwashing and supervise use of hand sanitizer.
- Reduce the contact frequency for surfaces.
- Limit sharing of equipment and supplies. Clean/disinfect shared supplies after use.
- Hold classes outside to provide fresh air and physical distance.
- Implement meal and snack policies including transport of food to classrooms.
- Limit the use of cloth/fabric chairs or other items with soft, porous surfaces.
- Establish laundering practices for non-disposable apparel and PPE.
- Provide safety information for equipment and products used to prevent COVID-19 transmission.
- Clean/disinfect frequently touched surfaces on enhanced schedule.
- Use fewer toxic disinfectants that affect immune system response.
- Use NYS DEC- and EPA-registered disinfectants that are effective against COVID-19.

PPE

Protect the individual from the COVID-19 virus.

Recommended COVID-19 Controls

- Gloves
- Gowns
- Tyvek coveralls
- Face shields
- Face masks
- Safety goggles/glasses
- Respirators (e.g., N95)

CLOTHING/APPAREL, NOT PPE

Recommended COVID-19 Controls

- Cloth gloves
- Bandanas/handkerchiefs
- Footwear



RESOURCES

NEW YORK STATE DEPARTMENT OF HEALTH

- Interim Cleaning and Disinfection Guidance for Primary and Secondary Schools for COVID-19: https://sunypoly.edu/sites/default/files/health-alerts/COVID-19-School-Cleaning-Guidance-FINAL.PDF

CENTERS FOR DISEASE CONTROL AND PREVENTION

- Interim Guidance for Administrators of US K-12 Schools and Child Care Programs: https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/guidance-for-schools.html
- People who are at higher risk for severe illness: https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-at-higher-risk.html
- Stress and Coping: https://www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/managing-stress-anxiety.html
- Use of Cloth Face Coverings to Help Slow the Spread of COVID-19: https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/diy-cloth-face-coverings.html
- Confirmation of COVID-19 in Two Pet Cats in New York: https://www.cdc.gov/media/releases/2020/s0422-covid-19-cats-NYC.html
- Guidance For Cleaning & Disinfecting Public Spaces, Workplaces, Businesses, Schools, And Homes: https://www.cdc.gov/coronavirus/2019-ncov/community/pdf/ReOpening_America_Cleaning_Disinfection_Decision_Tool.pdf https://www.cdc.gov/coronavirus/2019-ncov/community/pdf/Reopening_America_Guidance.pdf
- Interim Guidance for Public Health Professionals Managing People With COVID-19 in Home Care and Isolation Who Have Pets or Other Animals: https://www.cdc.gov/coronavirus/2019-ncov/php/interim-guidance-managing-people-in-home-care-and-isolation-who-have-pets.html

MENTAL HEALTH AMERICA

- Mental Health and COVID-19 – Information and Resources: https://mhanational.org/covid19

NATIONAL ALLIANCE ON MENTAL ILLNESS

- COVID-19 Resource and Information Guide: https://www.nami.org/covid-19-guide

THE LANCET

- Mental health effects of school closures during COVID-19: https://www.thelancet.com/action/showPdf?pii=S2352-4642%2820%2930109-7

MINNESOTA DEPARTMENT OF HEALTH

- Guidance on School Social Distancing: https://www.health.state.mn.us/diseases/coronavirus/schools/socialdistance.pdf

SCIENCE DIRECT

- School and preparedness officials' perspectives on social distancing practices to reduce influenza transmission during a pandemic: Considerations to guide future work: https://www.sciencedirect.com/science/article/pii/S2211335519300543

CALIFORNIA DEPARTMENT OF SOCIAL SERVICES

- Social and Physical Distancing: https://www.cdss.ca.gov/Portals/9/CCLD/PINs/2020/CCP/PIN_20-06-CCP.pdf

BMC PUBLIC HEALTH

- State Government Plans that Include Guidance to Local Education Agencies or Schools on Pandemic Influenza Preparedness: https://bmcpublichealth.biomedcentral.com/articles/10.1186/s12889-018-5302-3/tables/5

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

- Disinfectants for Use Against SARS-CoV-2: https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2

AED SUPERSTORE

- Tie-On Surgical Face Masks – 50/Box: https://www.aedsuperstore.com/dynarex-2205-2206-tie-on-surgical-masks-50-box.html

AMERICAN FEDERATION OF TEACHERS

- A Plan To Safely Reopen America's Schools And Communities: https://www.aft.org/sites/default/files/covid19_reopen-america-schools.pdf

ASHRAE

- COVID-19 (Coronavirus) Preparedness Resources: https://www.ashrae.org/technical-resources/resources

FEDERATION OF EUROPEAN HEATING VENTILATION AND AIR CONDITIONING ASSOCIATIONS (REHVA)

- REHVA COVID-19 guidance document, April 3, 2020: https://www.rehva.eu/fileadmin/user_upload/REHVA_COVID-19_guidance_document_ver2_20200403_1.pdf

FUNCTIONAL AREA PLANNING TEMPLATE

Functional area:		
	Summer 2020 Opening	Fall 2020 Opening
Operational parameters		
Staff responsible		
Risk factors		
District policy implications		
State/federal policy & regulatory implications		
Budget implications		
Staff/HR implications		
Contractual implications		
Communication needs		
Technology needs		
Equipment needs		
Cultural/political considerations		
Training needs		
Curriculum needs/implications		
Additional stakeholder or operations needs/considerations		

Guidance for using the above template:

- Complete one chart for each organizational "functional area." Examples of functional areas include: transportation, special education, food service, arrival and dismissal procedures, athletics, etc.
- Consider completing planning work at the district level, as well as at the school level (i.e., planning efforts may look very different at the primary level than at the secondary level.)
- This chart is being provided as a sample template. Districts/schools should adapt according to their own operational procedures and preferred software programs. A Google Document that can be easily adapted and shared is also available here: https://bit.ly/2YbOTtE