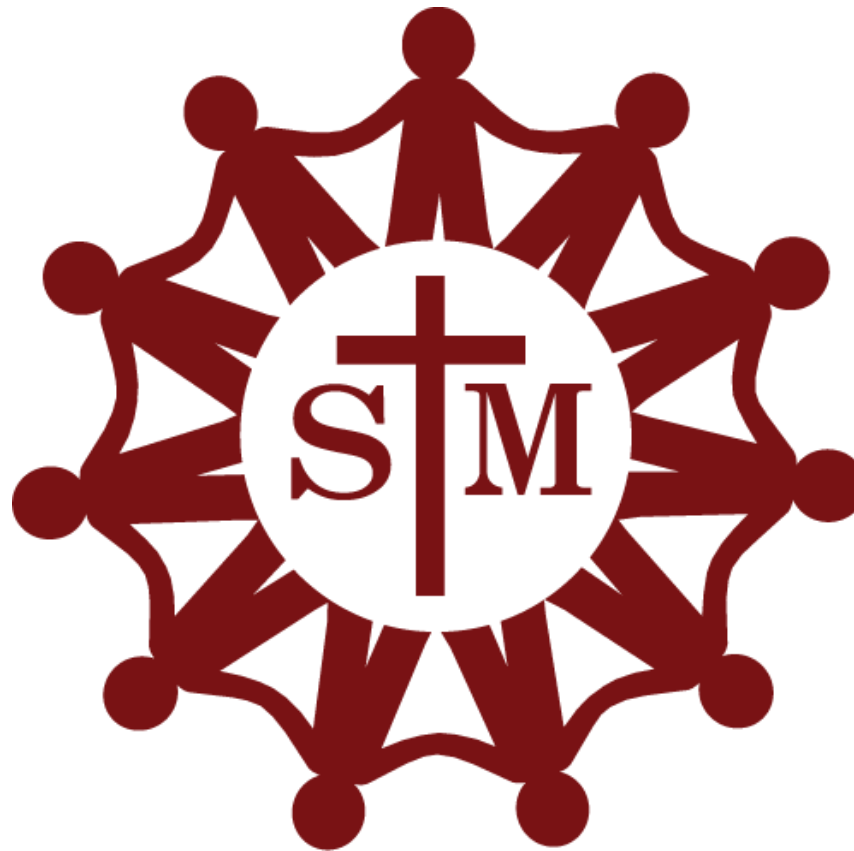


Saint Michael Catholic School
Pandemic Preparedness and Readiness Plan (PPRP)



Updated August 4, 2020

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Letter from Principal and Pastor

Dear St. Michael Catholic School Families,

Our school leaders and staff have been working hard to be able to welcome our students safely back to our classrooms this fall. The Pandemic Preparedness and Readiness Plan (PPRP) is one of the fruits of that labor. It is rooted in our mission of supporting you, our parents, in the education of the whole child—mind, body and soul—and our shared desire, with the Archdiocese, to balance the real risks associated with the coronavirus pandemic with the significant consequences of keeping children out of the classroom.

We cannot eliminate risk for our students or our employees, but we believe the 40+ protocols outlined in this document enable us to open St. Michael Catholic School (StMCS) responsibly, monitor the health of our school community prudently and make wise decisions as the year unfolds. With your support on the home front—especially monitoring the health of your children and keeping them home when they are ill—we can navigate this pandemic and have a safe and successful year.

We know not everyone is heading into this school year with the same level of comfort or confidence, so in all we do this year, let's lead with love. As a school, we will make decisions with the best information we have, following the lead of our bishops. We trust you with the best interests of your family. And in these unprecedented times, we can all take comfort in St. Paul's assurance that "all things work for good for those who love God" (Romans 8:28).

May God bless us all abundantly in this new school year!

Sincerely,

Fr. Brian Park
Pastor

Melissa Ginther
Principal

Excerpts from the *Archdiocesan Protocols for Safely Reopening Catholic School Buildings* (Archdiocese of St. Paul and Minneapolis)

Educating young people in the light of Christ is foundational to the mission of the Catholic Church. While the Church has carried out this work of education in the midst of social, health, and political crises, the current global COVID-19 pandemic has prompted unprecedented reflection on education and the central role of the physical school community in promoting the academic, spiritual, and emotional growth of the child. In preparing for the start of the 2020-21 school year, our local Church and the wider educational community throughout the state and the country will be required to make morally responsible decisions for how we educate the future citizens and leaders of our society during a pandemic, with special consideration for those children who are the most vulnerable among us. With the information that is currently available, **we affirm that the most prudent decision for Catholic schools is to plan for the safe reopening of its school buildings at the start of the 2020-21 school year (emphasis added)**. We invite you to continue reading to learn more about the considerations that went into making this decision and the plans we have to prioritize health and safety in the upcoming academic year.

- **What We Have Learned:** Since the Archdiocese made the recommendation to close its Catholic school buildings in March 2020 in response to the early stages of the COVID-19 pandemic, new scientific research with implications for reopening of schools has started to emerge. While we recognize that science is advancing daily, a current summary of scientific research with implications for the reopening of schools is summarized in the next section. In addition to the emerging research on COVID-19, we have learned that there are significantly adverse physical, academic, social and emotional consequences for many children when school buildings close. We have learned that some COVID-19 educational policies can disproportionately affect students of color and vulnerable families and children.
- **Morally Responsible Educational Leadership:** While the research on COVID-19 and the research on the effects of school building closure on students and families is still emerging, it has become clear that there are risks in opening school buildings and risks in *not* opening school building. When it comes to partnering with families to provide for the educational needs of their children during a pandemic, the question before educational leaders is determining the responsible way to proceed in educating children when there are no risk-free options. Science can help inform our considerations. It is an essential data point. Ultimately, though, we are faced with a decision about moral value. Educational leaders must exercise prudential wisdom through morally responsible leadership to weigh the many risks and benefits and prudently choose the course of action that is best suited to provide for the good of all.
- **Responsible Planning and Transparent Communication:** In order to welcome students back into the school building, we have responsibly planned and will take a number of action steps to lower the risk of COVID-19 transmission and intend to transparently communicate with all stakeholders throughout the implementation of these processes and procedures. These action steps required for all our Catholic schools are contained in this document, *Archdiocesan Protocols for Safely Reopening Catholic School Buildings*. When taken as a whole, these protocols create a framework that provide multiple safeguards that reduce the spread of COVID-19. As the CDC has recently noted, these steps are similar to the layers of protections that exist when driving our cars. They include strategies that each individual can take, such as using your seat belt, as well as environmental strategies, such as speed limits, and social expectations like requiring a test to get a driver's license. Like we reduce the risk of driving, stacking these best practices with several

layers of safeguards in a school help reduce the spread of COVID-19 and therefore lower the risks when we reopen our Catholic school buildings in the fall.

- **Culture of Health and Safety:** The protocols are **intended to mitigate, not eliminate, risk (emphasis added)**. No single action or set of actions will completely eliminate the risk of COVID-19 transmission, but implementation of several coordinated interventions can greatly reduce that risk. Our schools are not depending on one mitigation strategy, but a combination of all these strategies that when taken together substantially reduce the risk of transmission. In other words, establishing a culture of health and safety in our schools that focuses on regularly enforcing these important practices is more important than any one measure.
- **Educating Together:** Each Catholic school is preparing to implement these special sets of policies and procedures for pandemic preparedness and response in order to help keep our Catholic school children, employees, and community safe and healthy. We recognize that the decision to return to school this fall is a deeply personal decision for each family. We pray for all our families, as they too have to make prudential decisions based on a multitude of considerations of their own particular situation. We ask for the prayers of the entire Catholic school community as we all seek the wisdom and courage to continue our sacrificial work for the sake of one of our noblest endeavors—the education of our children.

Emerging implications from the medical literature on childhood susceptibility to and transmission of COVID-19

A. Excerpt from the American Academy of Pediatrics (June 25, 2020):

*Policy makers must also consider the mounting evidence regarding COVID-19 in children and adolescents, including the role they may play in transmission of the infection. **SARS-CoV-2 appears to behave differently in children and adolescents than other common respiratory viruses**, such as influenza, on which much of the current guidance regarding school closures is based. **Although children and adolescents play a major role in amplifying influenza outbreaks, to date, this does not appear to be the case with SARS-CoV-2.** Although many questions remain, the preponderance of evidence indicates that children and adolescents are less likely to be symptomatic and less likely to have severe disease resulting from SARS-CoV-2 infection. In addition, children may be less likely to become infected and to spread infection. Policies to mitigate the spread of COVID-19 within schools must be balanced with the known harms to children, adolescents, families, and the community by keeping children at home.*

B. The State of Massachusetts has published one of the most accessible and up-to-date summaries of the emerging themes and implications from the medical literature as it relates to children, COVID-19, and schools. In an open letter, Massachusetts' Commissioner of Education Jeffery C. Riley writes: "In discussions with infectious disease physicians, other medical advisers, and the COVID-19 Command Center's Medical Advisory Board, we were heartened to learn that – based on current data and research – the medical community supports the return of our students to in-person learning, with appropriate health and safety guardrails in place." The following section "Emerging implications from the medical literature" is reprinted from Initial Fall School Reopening Guidance published by the Massachusetts Department of Elementary and Secondary Education, June 25, 2020:

This section summarizes some of the emerging themes and implications from the medical literature on childhood susceptibility to and transmission of COVID-19 as of mid-June 2020. Because COVID-19 is a novel disease, this literature is growing rapidly, and new information is emerging almost every day. Our guidance will continue to evolve as the science develops.

At this time, the evidence suggests schools have not played a significant role in COVID-19 transmission and that children, particularly younger children, are less likely than adults to be infected with COVID-19. Furthermore, if they become infected, it appears children may be less likely to transmit COVID-19 to others. Based on these initial findings, the health and safety requirements throughout this guidance, as well as considering the key features of school programming at different grade spans, the current evidence supports a safe in-person return to school with implementation details varying for elementary schools (including pre-kindergarten programs), middle schools, and high schools.

- **Schools do not appear to have played a major role in COVID-19 transmission.** In a review of COVID clusters, only 4% (8 of 210) involved school transmission.¹ In a case study from New South Wales Australia, after 18 cases were found in schools (12 in high schools and 6 in primary schools), only 0.3% of student contacts were infected (1 in 695 individuals in 10 high schools and 1 in 168 individuals in primary schools). No teachers or staff were infected.² Additional studies are included in Appendix A.
- **In general, rates of COVID-19 infection are lower for children than for adults.** Based on an analysis of data from six countries, children under 20 are half as susceptible to COVID-19 infection than adults.³ **Furthermore, although children under the age of 18 make up 22% of the U.S. population, they account for less than 2% of all cases of COVID-19.**⁴ In Massachusetts, children under the age of 19 were about four times less likely than the population at large to be diagnosed with COVID-19.⁵ **Children are more likely to be asymptomatic,** however, which underscores the importance of health behaviors for everyone (masks/face coverings, distancing, handwashing, surface cleaning).⁶ Additional studies are included in Appendix A.
- **If exposed, children may be less likely to become infected with COVID-19.** A meta-analysis of studies from several countries found that children were only 44% as likely as adults to become infected after exposure (note: pre-print study).⁷ In China, in households with COVID-19 exposure, children under the age of 18 were infected at a rate of 4% compared with 17% for adults.⁸ Additional studies are included in Appendix A.
- **If infected, it appears children may be less likely to infect others with COVID-19.** Most transmissions are from adults to children, rather than vice versa; this is different from some other respiratory viruses (note: pre-print study).⁹ In a U.S. study of 15 households, 73% of transmissions were from adult to child (the remaining were child-to-child or child-to adult).¹⁰ Additional studies are included in Appendix A.

¹ Leclerc, Q. J., Fuller, N. M., Knight, L. E., Funk, S., Knight, G. M., & CMMID COVID-19 Working Group. (2020). What settings have been linked to SARS-CoV-2 transmission clusters?. *Wellcome Open Research*, 5(83), 83. Available at <https://wellcomeopenresearch.org/articles/5-83/v2>

² National Centre for Immunisation Research and Surveillance (NCIRS) (2020). COVID-19 in schools – the experience in NSW. Available at http://ncirs.org.au/sites/default/files/2020-04/NCIRS%20NSW%20Schools%20COVID_Summary_FINAL%20public_26%20April%202020.pdf

³ Davies, N.G., Klepac, P., Liu, Y. *et al.* Age-dependent effects in the transmission and control of COVID-19 epidemics. *Nat Med* (2020). <https://doi.org/10.1038/s41591-020-0962-9>

⁴ Coronavirus Disease 2019 in Children — United States, February 12–April 2, 2020. *MMWR Morb Mortal Wkly Rep* 2020;69:422–426. DOI: <http://dx.doi.org/10.15585/mmwr.mm6914e4>
<https://www.mass.gov/info-details/covid-19-response-reporting>

⁵ Davies, N.G., Klepac, P., Liu, Y. *et al.* Age-dependent effects in the transmission and control of COVID-19 epidemics. *Nat Med* (2020). <https://doi.org/10.1038/s41591-020-0962-9>

⁶ Viner, R. M., Mytton, O. T., Bonell, C., Melendez-Torres, G. J., Ward, J. L., Hudson, L., ... & Panovska-Griffiths, J. (2020). Susceptibility to and transmission of COVID-19 amongst children and adolescents compared with adults: a systematic review and meta-analysis. *medRxiv*. Available at <https://www.medrxiv.org/content/10.1101/2020.05.20.20108126v1>

⁷ Wei Li, Bo Zhang, Jianhua Lu, Shihua Liu, Zhiqiang Chang, Cao Peng, Xinghua Liu, Peng Zhang, Yan Ling, Kaixiong Tao, Jianying Chen, Characteristics of Household Transmission of COVID-19, *Clinical Infectious Diseases*, , ciae450, <https://doi.org/10.1093/cid/ciae450>

⁸ Zhu, Y., Bloxham, C. J., Hulme, K. D., Sinclair, J. E., Tong, Z. W. M., Steele, L. E., ... & Gilks, C. (2020). Children are unlikely to have been the primary source of household SARS-CoV-2 infections. Available at <https://www.medrxiv.org/content/10.1101/2020.03.26.20044826v1>

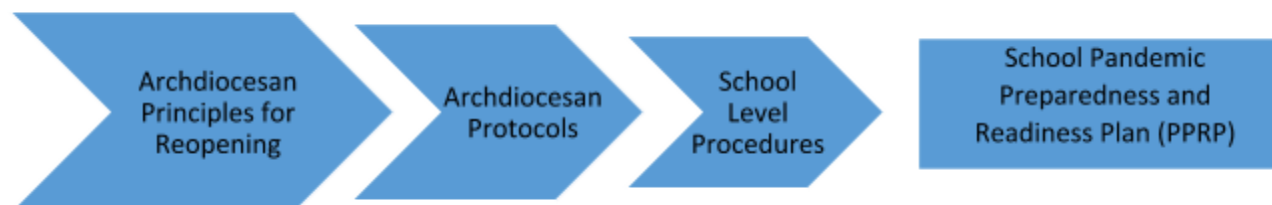
⁹ Mannheim, J., Gretsche, S., Layden, J. E., & Fricchione, M. J. (2020). Characteristics of Hospitalized Pediatric COVID-19 Cases—Chicago, Illinois, March–April 2020. *Journal of the Pediatric Infectious Diseases Society*. Available at <https://academic.oup.com/jpids/advance-article/doi/10.1093/jpids/piaa070/5849922>

Archdiocesan Principles for Safely Reopening Catholic School Buildings

The principles articulated below form the backbone for all deliberations as they relate to reopening Catholic school buildings in the Archdiocese of Saint Paul and Minneapolis for the beginning of the 2020-21 academic year. These principles guide the creation of the *Archdiocesan Protocols for Safely Reopening Catholic School Buildings*. The goal of the *Archdiocesan Protocols* is a responsible and prudent approach to reopening our school buildings. School leaders are encouraged to utilize these principles as they consider the practical details and establish appropriate school-level processes and procedures.

- **Mission-aligned:** Protocols are aligned with the mission of Catholic education.
- **Tailored to Catholic schools:** Protocols meet the unique capabilities and needs of Catholic schools which may be distinct from other public educational institutions.
- **Safeguarding high quality education:** Protocols help ensure that Catholic schools provide a high quality education that advances excellence for every student in all areas of their lives.
- **Research-based:** Protocols are grounded in the most current research and infectious disease mitigation strategies.
- **Broad:** Protocols are overarching, high-level that allow for school-specific modification and implementation.
- **Feasible:** Protocols can be implemented at a systems-level with minimal time for training.
- **Flexible:** Protocols are flexible enough to be able to respond to changes in community spread or public health guidance and the publication of new research.
- **Accessible:** K-8 Catholic schools will have access to the resources needed to implement protocols.
- **Fiscally responsible:** Protocol implementation is financially viable and reflects responsible stewardship.

The following graphic illustrates how the Archdiocesan Principles for Reopening relate to the creation of the school-level Pandemic Preparedness and Readiness Plan (PPRP). The Archdiocesan Principles for Reopening drive the development of the *Archdiocesan Protocols* which set the requirements for school-level procedures found in the PPRP.



Explanation of Format

ARCHDIOCESAN PROTOCOLS FOR SAFELY REOPENING CATHOLIC SCHOOL BUILDINGS

DOMAIN: The health and safety practices are divided into four overarching domains that describe the key areas for pandemic preparedness and response. The four domains are highlighted in blue.			
Benchmark: Each of the four domains has a series of benchmarks to assist schools in recognizing health and safety practices in the four domains for reopening Catholic school buildings. The benchmarks are highlighted in yellow.			
Protocols This column articulates the high-level requirement that must be implemented in order to meet the Benchmark . These high-level requirements are called Protocols . Schools must have procedures or processes in place to implement each Protocol .	Resources This column is reserved for links to resources to guide school's implementation of the Protocols . These resources include public health guidance, like recommendations from MDH and CDC.	School Level Procedures This column is reserved for school-level processes and procedures. Each Catholic school completes this column for its own school. This column is the substance of the school's Pandemic Preparedness and Response Plan. Following the requirements stated in the Protocol and with consideration to the references and guidance documents provided in Resources , schools develop their school-level processes and procedures to meet the Benchmark . Schools keep track of the most recent review or revision date of the procedures in the column to the left. It is expected that some school-level processes and procedures will be considered interim and may change as more information becomes available.	Date Most recent review or revision date for procedures and processes developed at the school-level.

A Note on the Protocols

When taken as a whole, these Protocols outlined below create a framework that provides multiple safeguards that reduce the spread of COVID-19. As the CDC has recently noted, these steps are similar to the layers of protections that exist when driving our cars. They include strategies that each individual can take, such as using your seat belt, as well as environmental strategies, such as speed limits, and policies like requiring a test to get a driver's license. Stacking these best practices with several layers of safeguards help reduce the spread of COVID-19 and lower the risks when we re-open our Catholic school buildings in the fall.

In order to welcome students back into the school building, Catholic schools will use these Protocols to responsibly plan, transparently communicate, and implement a number of action steps to lower the risk of COVID-19 transmission. As school leaders prepare the PPRP for their schools, it is important to remember that it is not one mitigation strategy, but a combination of all these strategies taken together that will substantially reduce the risk of transmission. The Protocols are intended to mitigate, not eliminate, risk. No single action or set of actions will completely eliminate the risk of COVID-19 transmission, but implementation of several coordinated interventions can greatly reduce that risk. In other words, establishing a culture of health and safety in our schools that focuses on regularly enforcing these important practices is more important than any one measure.

Some school-level processes and procedures that are developed in the month of July may need to be considered “interim.” As more information is made available throughout the summer and into the start of the 2020-21 school year, it is expected that interim school-level processes and procedures will be reviewed and revised as needed. The Archdiocese will continue to provide guidance as more information becomes available.

Key Health and Safety COVID-19 Resources for Schools for School Procedures Development

- MDH School Planning Guide (MDH)
- Considerations for K-12 Schools: Readiness and Planning Tool (CDC)
- COVID-19 Planning Considerations: Guidance for School Re-entry (AAP)

StMCS Health & Safety Protocols for Safely Reopening Catholic School Buildings



DOMAIN I: Promoting Behaviors that Reduce Spread

Benchmark A: Staying home when appropriate

Only students, employees and visitors who show no signs of illness are present in the school building. Students who were sick and are no longer symptomatic are returning to school at the advice of the student's health care provider.

<p>Protocol 1: Students and employees are required to stay home when they are sick. Schools must promptly send children and employees home when they display symptoms of COVID-19 illness.</p>	<p>Resources: MDH: If You Are Sick: COVID-19 CDC: Coronavirus Disease 2019: Symptoms</p>	<p>Employees: Before they come to work, employees will complete a self-check at home:</p> <ul style="list-style-type: none"> • Check temperature to confirm that it is less than 100.4. • Ask if you feel physically unusual in any way that is related to COVID symptoms. • Confirm that you have not been in close contact with someone who has recently been screened or diagnosed with COVID symptoms. <p>If an employee can't pass these screening questions, he or she will call in sick.</p> <p>Students: Before sending a child to school, parents will complete a self-check at home with their child. A guide sheet will be provided for their reference.</p> <ul style="list-style-type: none"> • Check each child's temperature to confirm it is less than 100.4 (without being given a fever reducer or cold medicine). • Evaluate each child for signs of illness and ask the screening questions. • Confirm each child has not been in close contact with someone exhibiting COVID symptoms. <p>If a student can not pass these screening questions in the morning, the parent must call them in sick. Students must be out for 48 hours after their various illnesses have passed without medication to reduce fevers.</p> <p>For families with more than one child: if one of your children has a fever and we do not have reason to believe that it is COVID, their siblings are welcome to come to school. When COVID is suspected, entire families will be asked to quarantine. See p. 16 for details.</p> <p>Procedures for staff coverage when an employee becomes ill at work:</p> <ul style="list-style-type: none"> • The employee will be sent home. • The point of contact for staff who feel sick will be Mary Rooney. • The employee's work area will be sanitized. • Staff will contact the administration team in order to help provide support and coverage for the remainder of the day. 	<p>Date: 8/4</p>
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		<ul style="list-style-type: none"> ● Procedures will be followed for notification to families when required. <p><i>Note: Exposure notifications will work to protect the privacy of students and staff and will not include names.</i></p> <p>Procedures for student pick-up:</p> <ul style="list-style-type: none"> ● Students who display symptoms (fever of 100.4 or higher, chills, muscle pain, sore throat, loss of sense of smell or taste, or gastrointestinal symptoms of diarrhea, vomiting, or nausea) will remain in the Health Office until their parent arrives in the parking lot. ● The StMCS point of contact, Mary Rooney, will contact parent(s) to pick up the student. ● Students will be isolated in the nurse's office or other designated area until parents can pick up the child. ● Parents will call the school once they have arrived. ● Students will be escorted out to the parents via the Mary Garden door. ● Parents will not be allowed to enter the building to pick up their sick child. ● The classroom will be sanitized. ● Procedures will be followed for notification to families when required. <p><i>Note: Exposure notifications will work to protect the privacy of students and staff and will not include names.</i></p> <p>Volunteers: Volunteers will be <i>very</i> limited, but when volunteers are allowed in the building, they will be screened prior to entering the building.</p> <ul style="list-style-type: none"> ● Volunteers will be asked to complete a temperature check before visiting the building. ● Wellness screening questions will be asked. ● Volunteers will be required to wear masks and wash hands or use hand sanitizer upon entering the building. ● Volunteers will be limited to the area that they are volunteering in order to limit exposure to others. ● Names and contact information will be collected for exposure notification when necessary. <p>Visitors: Visitors will not be allowed unless absolutely necessary. If they are necessary, they will follow the same procedures as the volunteers.</p>	
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<p>Protocol 2: When determining when students or employees may return to school, schools will follow the directives of an individual's health care provider. In the event that no advice has been sought or given, schools will use guidelines provided by public health officials.</p>	<p>Resources: MDH: If You Are Sick: COVID-19: How long to stay home if sick MDH: Decision Tree MDH: COVID-19 and When to Return to Work</p>	<p>Procedure: StMCS will follow the MDH: Decision Tree for students with symptoms and their siblings staying home.</p> <p>Basic Summary: When COVID symptoms are displayed, StMCS asks employees and students to be tested in order to help prevent the spread.</p> <ul style="list-style-type: none"> Those who have a <u>positive</u> test result will stay home at least 10 days since symptoms first appeared AND until no fever for at least 3 days without medication AND improvement of other symptoms. <i>Note: Siblings and other household members will also be asked to follow quarantine protocols.</i> Those who have had a <u>negative test</u> but have COVID symptoms with no other diagnosis will stay home at least 10 days since symptoms first appeared AND until no fever for at least 3 days without medication AND improvement of other symptoms. Those who test positive for the flu will be home for 72 hours after the last bout of symptoms. Temperature and screening will be required at school prior to being allowed to return to the classroom. <p>Exposure information will be gathered from the employee if they test positive for COVID, so other employees and/or students' families can be notified. If you have close contact with someone who tested positive for COVID (in close proximity for 15 minutes or more without a mask) then you need to follow the MDH Exposure Protocol.</p> <p>For information on distance learning while in quarantine, see Students in Quarantine, p. 44.</p>	
<p>Protocol 3: Eliminate or prudently modify employment and student attendance policy incentives that could cause a student or employee to come to school when ill (e.g., "perfect attendance awards").</p>	<p>Resources:</p>	<p>StMCS does not have incentives for employees or students related to attendance at work/school.</p> <p>Regarding the use of "sick leave," StMCS is working through the protocols for employees that test positive for COVID and need to quarantine. Further details for this policy hope to be shared by August 15.</p>	

<p>Protocol 4: Schools will designate an employee to be the primary COVID-19 Designated Point of Contact and a different employee to serve as a back-up COVID-19 Designated Point of Contact if the primary COVID-19 Designated Point of Contact is unavailable. This Point of Contact is responsible for responding to COVID-19 concerns (e.g. school nurse, head of school). All school employees and families should know who these individuals are and how to contact them.</p>	<p>Resources: MDH Planning Guide for Schools, p. 4</p>	<p>Points of Contact (POC):</p> <ul style="list-style-type: none"> • Primary POC is Mary Rooney • Secondary POC is Danise Dembouski <p>Information to Communicate:</p> <ul style="list-style-type: none"> • Families will be informed through principal communication at the beginning of the school year. • Point of Contact will be reached by families via a phone call to the school nurse, Mary Rooney. Emails and office phone numbers will be published for the families and available on the school website. 	
<p>Protocol 5: Schools will inform families and employees of the public health recommendations for quarantining after exposure to COVID-19.</p>	<p>Resources: MDH School Planning Guide, pp. 12-13 MDH: What to do if you have had close contact with a person with COVID-19</p>	<p>Exposure Protocols and Quarantining:</p> <ul style="list-style-type: none"> • StMCS is following the MDH Decision Tree for quarantining after exposure. • All families will be given copies of protocols. • Protocols will also be posted on the school website. • Reminders will be shared through the various school communications. • If you have close contact with someone who tested positive for COVID (in close proximity for 15 minutes or more without a mask) then you need to follow the steps below. <p>If you received a POSITIVE test result for COVID:</p> <ul style="list-style-type: none"> • Employees and students must stay home for at least 10 days since symptoms first appear AND until no fever is present for 72 hours without fever reducing medication and improvement of other symptoms. • <i>Note: Siblings and other household members will also be asked to follow quarantine protocols.</i> 	

		<p>If you received a NEGATIVE test or chose not to be tested but have COVID symptoms with no other diagnosis:</p> <ul style="list-style-type: none">• Students and employees must stay home at least 10 days since symptoms first appeared and until no fever for at least 72 hours without medication and improvement of other symptoms.• Siblings and other household members must also stay home for 10 days.• Contact the principal and office manager to report negative results. <p>If you choose not to be tested after exposure:</p> <ul style="list-style-type: none">• Students and employees must observe the 14 day quarantine to prevent the spread. <p>If you have other diagnosis (strep throat, flu etc) that explain the symptoms or when a healthcare provider says symptoms are connected to a pre-existing condition:</p> <ul style="list-style-type: none">• Employees and students must stay home until symptoms have improved and clear for 72 hours. Fevers must be gone for 72 hours without taking fever reducing medications. Other symptoms such as vomiting, diarrhea must be gone for 72 hours.• Siblings and household members do not need to stay home unless they are also sick.	
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Benchmark B: Practicing personal hygiene measures

Basic infection prevention measures are being implemented at the school. All members of the school community are practicing personal hygiene measures, including proper hand hygiene and respiratory etiquette.

<p>Protocol 1: Schools will teach and reinforce proper handwashing hygiene.</p>	<p>Resources: <u>MDH: Hand Hygiene</u> <u>MDH: Teaching Hand Hygiene</u> <u>MDH: Hand Hygiene for Schools and Child Care</u></p>	<p>Practicing proper handwashing hygiene at StMCS means that students and employees are washing their hands for at least 20 seconds with soap and water frequently throughout the day, but especially at the beginning and end of the school day, prior to any mealtimes, after meals/snacks and after using the restroom. If soap and water are not readily available, hand sanitizer that contains at least 60% alcohol can be used (only for employees and older students who can safely use hand sanitizer).</p> <ul style="list-style-type: none"> • The school will teach employees proper handwashing techniques and provide resources for teachers to teach their students proper handwashing techniques. • Posters will be put up in all restrooms to remind students, staff and visitors of proper handwashing techniques. Videos may also be created or shared from MDH and CDC or other medical professional organizations. • As students and employees move into and out of the classrooms they will clean surfaces and sanitize/wash hands if returning from recess, lockers lunch, or the restroom. 	
<p>Protocol 2: Schools will monitor compliance in a practicable manner to help ensure adherence among students.</p>	<p>Resources:</p>	<p>Handwashing reinforcement will be completed weekly during the first trimester to remind students and adults of proper techniques and the importance of clean hands. Reinforcement will include, but is not limited to, classroom instruction, daily announcements, and verbal/written reminders and demonstrations.</p>	

<p>Protocol 3: Schools will teach and reinforce respiratory etiquette.</p>	<p>Resources: MDH: Cover Your Cough CDC: Cloth Face Covering Guidance MDH School Planning Guide, pp. 7-8</p>	<p>Practicing proper respiratory etiquette at StMCS means that members of the school community are:</p> <ul style="list-style-type: none"> • covering coughs and sneezes with a tissue • throwing used tissues in the trash • washing hands using hand-washing protocols after coughing or sneezing. <p>If tissues are not immediately available, students and employees are coughing or sneezing into their elbow.</p> <p>Our school will:</p> <ul style="list-style-type: none"> • Educate all employees on proper respiratory etiquette. • Require teachers to instruct and remind students weekly of proper respiratory etiquette • Ask that teachers discreetly encourage individual students to practice proper respiratory etiquette on an as-needed basis. <p>Additionally:</p> <ul style="list-style-type: none"> • Classrooms will place tissue boxes near waste baskets with hand sanitizer and/ hand spray close to the same area. • In accordance with EO 20-81, employees and students will be required to wear masks/face shields to manage respiratory discharges. See p. 23 for further information regarding the use of masks and shields at StMCS. • Employees and students will be trained on how to wear and care for their masks and other face coverings. 	
<p>Protocol 5: Schools will encourage students to avoid touching their faces.</p>	<p>Resources:</p>	<p>Staff will educate students to avoid touching their faces and will discreetly reinforce this with individual students as needed.</p>	

Benchmark C: Social distancing

Schools implement appropriate social distancing practices to reduce the spread of disease.

Protocol 1: Schools will consider all public health recommendations for social distancing and implement those that are reflective of students' ages and abilities; without negative impact on the learning and social-emotional environment; and responsive to the level of community spread in the wider local community.

Resources:
[MDH: COVID-19 Prevention Guidance](#)

Common Spaces:

- Stairwells will be one direction.
- The StMCS lunchroom will operate at half capacity with students in staggered seats.
- Large group gatherings will be modified or postponed to accommodate social distancing protocols.
- Arrival and dismissal procedures have been modified to adjust traffic flow and maintain a healthy flow of students coming in and out of the building.
- Passing time will be modified to reduce the number of students in the hallway and at the lockers.

Classrooms:

- Classrooms and other spaces have been evaluated for capacity numbers to maintain a minimum distance of 3 to 6 feet in classroom spaces (AAP recommendation). Many of our classrooms simply can not accommodate six feet of distancing, thus clear plexiglass dividers may be used in the classrooms to provide additional safety where distancing measures are not possible.
- Movement to and from specials will be based upon the ability to clean classroom surfaces between the introduction of new cohorts.
- Students and staff will be required to wear masks or face shields and will maintain a distance of 3 to 6 feet whenever possible (AAP recommendation).
- Masks and shields will be worn in the hallways and restrooms and when students or employees are in close proximity to others.
- Teachers may allow mask breaks when students are socially distanced.
- We will replace hugs, handshakes and hi-fives with smiles, waves and thumbs-ups.
- Class groups will be kept as separate as possible.
- Teachers will be encouraged to take the students outside when possible.
- StMCS will minimize the number of large groups and gatherings, both in and out of the school; however, weekly Mass will still occur on Fridays. Other larger group gatherings will occur outside when possible.
- Teachers will remind students not to share items such as materials or food.
- Students will bring only the essential items for learning to their classroom each day.
- Computers will be kept in school and wiped down daily.

Domain II: Maintaining Healthy Facilities

Benchmark A: Cleaning and disinfecting efforts

Regular housekeeping practices are being implemented, including routine cleaning and disinfecting of classroom surfaces, restrooms, lunch rooms, meeting rooms and drop-off and pickup locations. More frequent cleaning and disinfecting is conducted for high-touch areas, such as door handles, elevator panels and hand railings.

<p>Protocol 1: Schools will develop a schedule for increased, routine cleaning and disinfecting.</p>	<p>Resources: Appendix D: Cleaning Log</p>	<p>Cleaning Log:</p> <ul style="list-style-type: none"> • A cleaning log will be posted in custodial closets next to bathrooms <p>Bathrooms:</p> <ul style="list-style-type: none"> • Bathrooms will be cleaned at least twice during the school day, with an additional cleaning after school. • Frequently touched surfaces within restrooms will be sanitized with SAO (see explanation below) on a routine basis. <p>Cafeteria:</p> <ul style="list-style-type: none"> • Tables will be cleaned by an adult before lunch begins and after every lunch period. <p>Handrails:</p> <ul style="list-style-type: none"> • Handrails will be cleaned before the school day begins, after students arrive (before recess begins), before and after lunch, and at the end of each day. <p>Additional Items: The following items will receive additional daily cleaning:</p> <ul style="list-style-type: none"> • Door knobs/handles • Classroom desk and chairs • Light switches • Smart boards • Shared toys • Remote controls (smart board and AC units) • Shared desks and chairs <p>What is SAO (Stabilized Aqueous Ozone)? We are using a sprayer system using <i>stabilized aqueous ozone</i>—an oxygen (O₂) molecule with an extra O attached (O₃), infused in cold tap water—to kill 99.9% of germs within a minute of contact before turning into ordinary water and oxygen and evaporating. SAO enables us to disinfect large spaces more thoroughly in less time and will be used after dismissal for additional cleaning support.</p>	
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<p>Protocol 2: Schools will identify frequently touched surfaces (e.g., playground equipment, door handles, sink handles, drinking fountains) within the school and clean all frequently touched surfaces daily or between use as much as practicable.</p>	<p>Resources: MDH Playground Guidance MDH COVID-19 Cleaning and Disinfecting Guidance</p>	<p>The following frequently touched items and surfaces will be cleaned regularly:</p> <ul style="list-style-type: none"> • Bathrooms (sink handles, toilet handles, locks on bathroom doors) • Handrails • Door knobs/handles • Classroom desk and chairs • Light switches • Smart boards • Shared toys • Remote controls (smart board and AC units) • Shared desks, chairs, tables 	
<p>Protocol 3: Schools will ensure safe and correct use and storage of cleaning and disinfecting products, including always storing products securely away from children, and using products that meet EPA disinfecting criteria.</p>	<p>Resources: MDH School Planning Guide, pp. 9-10</p>	<p>StMCS will continue to follow all “Right to Know” protocols for cleaning and disinfecting products and will provide the Safety Data Sheet and training for each chemical in use.</p>	
<p>Benchmark B: Adequate supplies</p> <p><i>Appropriate and effective cleaning and disinfecting supplies have been purchased and are available for use in accordance with product labels, safety data sheets and manufacturer specifications and are being used with required personal protective equipment for the product.</i></p>			
<p>Protocol 1: Schools will provide adequate supplies for implementing cleaning and disinfecting.</p>	<p>Resources: School Cleaning Supplies IEA Creating your Restart Blueprint for COVID-19</p>	<p>StMCS will provide appropriate supplies for cleaning and disinfecting including:</p> <ul style="list-style-type: none"> • Face masks or face shields • Paper towels • Tissues • Hand sanitizer • Non-latex disposable gloves • Disinfecting product 	

Benchmark C: Separate physical space for students with symptoms of COVID-19

Schools have a space for students with symptoms of COVID-19. This space is supervised, safe and regularly cleaned.

<p>Protocol 1: Schools will identify a supervised space or area to temporarily separate anyone who has COVID-19 symptoms until they can leave the building. This space will be regularly cleaned and sanitized.</p>	<p>Resources: MDH Cleaning and Disinfecting Guidance, pp. 3-5</p>	<p>StMCS will provide a COVID observation room:</p> <ul style="list-style-type: none"> • The observation room will be located in the health office. • A divider will be placed between the two beds that are located in the room. • The room will be cleaned and sanitized between each use. 	
<p>Protocol 2: Schools will establish procedures to decrease the risk of spread among (or to) employees who are responsible for supervising students who have COVID-19 symptoms.</p>	<p>Resources: Catholic Mutual recommends that those responsible for supervising students who have COVID-19 symptoms be provided personal protective equipment, including mask, shield, gloves and gown when possible.</p>	<p>Masks and Shields:</p> <ul style="list-style-type: none"> • Per Archbishop Hebda’s direction, the school will comply with the governor’s Executive Order (EO) 20-81. <ul style="list-style-type: none"> ○ All employees and students will be in masks or shields. ○ A medical exemption form, for students and staff, will be made available in mid-August for those who have a “medical condition, mental health condition, or disability that makes it unreasonable for the individual to maintain a face covering” • Regarding masks vs. shields, EO 20-81 states: Face shields may be used as an alternative to face coverings in the following situations: <ul style="list-style-type: none"> ○ For students who are unable to tolerate a face covering due to a developmental, behavioral, or medical condition. ○ For teachers of all grades when a face covering would impede the educational process. ○ For staff providing direct support student services when a face covering would interfere with the services provided. ○ For students in kindergarten through grade 8 when wearing a face covering is otherwise problematic for the student. 	

		<p>Employees:</p> <ul style="list-style-type: none"> • Our employees will be in compliance with EO 20-81. • When not providing direct instruction, faculty should comply with EO 20-81, which states: “Staff may remove face coverings when working alone, including when alone in an office, classroom, vehicle, cubicle with walls at least face level when social distancing is maintained, or other enclosed work area.” • Employees will teach members of the school community the proper way to cover coughs and sneezes with a tissue. • They will also teach students the importance of throwing used tissues in the trash and washing hands using hand washing protocols after coughing or sneezing. If tissues are not immediately available, students and employees are coughing or sneezing into their elbow. • Classrooms will place tissue boxes near waste baskets with hand sanitizer and/hand spray close to the same area. • This will be reinforced with posters, reminders, announcements and demonstrations. <p>Students:</p> <ul style="list-style-type: none"> • Our students will be in compliance with EO 20-81. • Students will receive frequent respiratory etiquette reminders, especially at the start of the school year. If they are found not following the procedures, teachers will work with them individually to review the expectations. • Students will be taught the importance of throwing used tissues in the trash and washing hands using hand washing protocols after coughing or sneezing. If tissues are not immediately available, students will cough or sneeze into their elbow. • Students will be instructed on throwing out used tissues into the waste baskets and the use of hand sanitizer or washing hands immediately after coughing or sneezing. • Masks may be removed outside or with staff permission when a minimum of 6 feet social distancing space is available between them and others. • Students will be trained on how to wear and care for masks. • StMCS will have a supply of disposable masks should a student forget to wear a mask to school. Students are encouraged to bring their own mask (BYOM). The school is looking into acquiring masks, but does not have concrete details about that process at this time. 	
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		<p>Volunteers and Visitors:</p> <ul style="list-style-type: none">• Volunteers and visitors will be VERY limited, but when allowed in the building, they will be screened prior to entering the building.• All visitors will be required to wear masks and/or face shields to manage respiratory discharges. Masks may be removed outside or with at least 6 feet of social distancing with teacher or staff permission.• All visitors are required to provide a name and phone number for contact tracing. <p>Medical Exemptions:</p> <ul style="list-style-type: none">• A medical exemption form will be available for students and staff who require an exemption surrounding the face covering requirement.• The following individuals are exempt from face covering requirements of EO-20-81: “Individuals with a medical condition, mental health condition, or disability that makes it unreasonable for the individual to maintain a face covering. This includes, but is not limited to, individuals who have a medical condition that compromises their ability to breathe, and individuals who are unconscious, incapacitated, or otherwise unable to remove a face covering without assistance.” <p>Mask Requirements and Transportation:</p> <ul style="list-style-type: none">• Per Executive Order 20-81, all students, staff, and other people present in school buildings or riding on school transportation are required to wear a face covering.	
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Benchmark D: Engineering controls

All HVAC and plumbing systems are operating in a way that promotes a healthy environment. As much fresh air as possible is being brought into the workplace, air recirculation is being limited, and ventilation systems are being properly used and maintained.

Protocol 1: Schools will monitor ventilation systems such that they operate properly and increase circulation of outdoor air as much as possible (e.g., by opening windows and doors).	Resources: CDC Building Reopening	StMCS will open windows and doors to allow ventilation throughout the building as much as possible. Additionally, StMCS is pursuing the installation of needlepoint bipolar ionization system to support air purification throughout the school.	
Protocol 2: Schools will take steps to ensure that all water systems and features (e.g., sink faucets, drinking fountains) are safe to use.	Resources: MDH Planning Guide , p. 13 CDC Building Reopening	Students will be required to bring water bottles to school daily. Water bottles can be filled at a bottle filling station. If a student/staff forgets a water bottle, disposable cups will be available for classrooms.	

Domain III: Maintaining healthy operations

Benchmark A: Symptom monitoring and screening

Families, students and employees have been informed of and encouraged to self-monitor for signs and symptoms of COVID-19 through regular health checks.

<p>Protocol 1: Schools will articulate expectations for regular health checks at home and at school (e.g., temperature screening and/or symptom checking) of employees and students.</p>	<p>Resources: MDH School Planning Guide, pp. 10-12</p>	<p>StMCS will:</p> <ul style="list-style-type: none"> • Provide a checklist for families to use each day to see if their child is able to go to school. • Post the health checklist on social media as a reminder for parents to screen their children daily before school. <p><i>Note: Catholic Mutual recommends posting videos on website and sending reminders about home health checks via email, letters and calls every day of the first week of school as parents and families are building back-to-school routines.</i></p>	
<p>Protocol 2: Health checks that occur at school will be conducted safely and protect student's privacy.</p>	<p>Resources: CDC Supplemental Guidance for Childcare CDC General Business FAQ</p>	<ul style="list-style-type: none"> • Visual checks of students will occur upon students entering the school building and prior to entering the classroom. • Any student or staff not feeling well will report to the health office. • The school nurse will address concerns in the health office to protect privacy of all. • All students have a health file with their health information secured in the health office. <p><i>Note: Catholic Mutual requires a separate health file and form for each person. Health information must be kept in a confidential and secure location.</i></p>	

Benchmark B: Caring at school for students who become sick with symptoms of COVID-19

Any student who displays symptoms of COVID-19 is separated from other classmates and is picked up by a parent or guardian as soon as possible. Families are provided information by the COVID-19 points of contact.

Protocol 1: Schools will separate employees and students who develop COVID-19 symptoms (such as fever, cough or shortness of breath) while at school.	Resources: MDH School Planning Guide , pp. 12-13	<ul style="list-style-type: none"> • Students or staff who cannot leave school immediately will be separated and will use StMCS's observation room, which is located in the health office. • There will be a divider between the two beds that are located in the room. • Room will be cleaned and sanitized between each use. 	
Protocol 2: Students who develop COVID-19 symptoms while at school will be taken to a separate, supervised physical space until a parent/guardian is able to pick up the student.	Resources: MDH School Planning Guide , pp. 12-13	<ul style="list-style-type: none"> • Students or staff who cannot leave school immediately will be separated and will use StMCS's observation room, which is located in the health office. • There will be a divider between the two beds that are located in the room. • Room will be cleaned and sanitized between each use. • The COVID room will be supervised by the school nurse. 	
Protocol 3: The school's COVID-19 point of contact person will communicate with the student's family regarding current public health guidance for caring for others who are sick, the school's procedures for the student to return to school and reporting of any diagnosed case of COVID-19.	Resources: MDH School Planning Guide , pp. 12-13	<ul style="list-style-type: none"> • The school nurse will be the point of contact to families. See p. 15 for more information on our point of contact and backup. • The point of contact will communicate verbally with the family at pick up and then follow up with written communication explaining why we sent the child home. • In the case of a positive COVID test, we will take the direction provided by the Wright County COVID-19 School Liaison. 	

Benchmark C: Classroom environment

With consideration to the Principles of Reopening, schools will implement appropriate procedures in light of its educational plan and its physical building to reduce the spread of disease.

Protocol 1: In the development of their schedules and classroom procedures, schools have implemented public health recommended strategies at the classroom-level to mitigate the spread of disease.

Resources:
[MDH School Planning Guide](#)

At StMCS, education requires a lot of teacher-student interaction. However, teachers and students will maintain social distancing practices when applicable, and tables and desks will be staggered and facing forward when possible.

The following additional strategies will be implemented in our school to help mitigate the spread:

- Establishing hand washing routines for each grade level
- Implementing age-appropriate health and wellness visual cards or hand signals to remind students to social distance, grab a kleenex, wash hands, use the bathroom and clean learning space
- Staggering bathroom breaks and passing time for each grade level, as well as following traffic flow markers
- Placing floor markings in shared spaces to help students maintain social distancing
- Following a cleaning checklist in classrooms at the end of each day (i.e. clean counters, common surfaces, tables, desks, and chairs), with students assisting with cleaning their personal items and learning space if age-appropriate
- Sanitizing all K-8 classrooms and spaces at the end of each day using the SAO system. See p. 20 for details.
- Middle-level specials will be held in the specialist's classrooms.
- K-4 specialists will travel to grade-level classrooms when possible.

<p>Protocol 2: To the degree possible, schools will limit the use of shared objects (e.g., gym or physical education equipment, art supplies, toys, games) or clean them between use.</p>	<p>Resources: <u>CDC</u> <u>Considerations for Schools</u> (Shared Objects)</p> <p>Catholic Mutual recommends that all rugs and moveable carpets in classroom be replaced with individual mats.</p>	<p>St. Michael Catholic School will implement the following strategies to limit the use of shared objects and common spaces:</p> <ul style="list-style-type: none">● All K-8 students will use their own school supplies to avoid constant need to disinfect.● Students will sanitize their hands before and after visiting the classroom library.● Each classroom will have a designated “needs to be sanitized” area for materials, toys and games used throughout the day.● Shared classroom technology will be wiped down by the classroom teacher after each use (i.e. Smartboard and iPads).● Gym equipment will be sanitized between uses.	
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Benchmark D: Large-group gatherings (e.g. assemblies and field trips)

With consideration to the Principles of Reopening, schools have implemented appropriate procedures to mitigate the spread of disease during all large-group gatherings (e.g. assemblies and field trips).

<p>Protocol 1: Schools will limit large, in-school group events, gatherings, or meetings during the school day.</p>	<p>Resources: CDC Considerations for Schools (Modified Layouts; Communal Spaces)</p>	<p>Large group gatherings during the school day will be put on hold or canceled, and modifications will be made to those gatherings critical to the mission and culture of our school.</p> <ul style="list-style-type: none"> • WWW: outside or on Zoom when possible on Mondays for prayer and announcements; birthdays and celebrations on Fridays after Mass • Cribbage: on hold, possibly teach 7/8 cribbage on Thursdays • Grandparents Day: not this semester; make letters/cards to send • Book Fair: still happening; only students with money or with parents 	
<p>Protocol 2: Schools will pursue virtual activities and events where practicable in lieu of large group gatherings such as field trips, student assemblies, special performances, school-wide parent meetings and spirit nights, as practical.</p>	<p>Resources: MDH School Planning Guide</p>	<p>Large group gatherings outside the school day will be canceled, modified or go virtual.</p> <ul style="list-style-type: none"> • Marathon: MSW track w/prepackaged snack or virtual event • Field Trips: virtual when possible or cancel • Conferences: virtual • Fall Family Fun Night: Modified to support social distancing or virtual • Deep Portage: TBD • Christmas Program: TBD (decision by Nov. 1) 	
<p>Protocol 3: Schools will pursue options to convene sporting events and participation in sports activities in ways that minimizes the risk of transmission of COVID-19 to players, families, coaches and communities.</p>	<p>Resources: MDH Sports Guide Minnesota State High School League COVID-19 Updates</p>	<p>TBD based on STMA public school athletic programs.</p>	

Benchmark E: Visitors

Schools admit only those people who are essential for continuing school operations or maintaining the academic environment.

Protocol 1: All visitors to the school will follow all school-defined safety and personal hygiene procedures for entering the school.	Resources: MDH: Visitor and Employee Health Screening Checklist	Only essential visitors will be allowed beyond the office. All visitors will be asked the screening questions, including if they have taken a fever reducer. Visitors will sanitize as they enter and exit the school.	
Protocol 2: Parents and Volunteers: Schools will have a plan for entrance and movement within the school building for parents and volunteers to minimize exposure.	Resources:	Only essential and regular parents and volunteers will be allowed in school. Awaiting further clarification regarding the need for volunteers to sign a waiver upon entrance.	
Protocol 3: Prospective Families: Schools will have a plan for entrance and movement within the school building for prospective students and families to minimize exposure.	Resources:	Prospective families will be invited to tour the school after dismissal.	
Protocol 4: Vendors: Schools will have a plan for entrance and movement within the school building for vendors to minimize exposure.	Resources:	Only essential vendors will be allowed into the school building. After school hours will be utilized as much as possible. All others will leave supplies/materials in entry.	

<p>Protocol 5: Guests: As much as possible, schools will limit guests, activities, and facilities use involving external groups or organizations – especially with individuals who are not from the local geographic area.</p>	<p>Resources:</p>	<p>No external groups or organizations will use the school building.</p> <ul style="list-style-type: none"> - Parish visitors who use the sunroom for meetings will be provided specific protocols for cleaning the space. Cleaning protocols will include kitchen, bathrooms, and other high-traffic areas. 	
<p>Benchmark F: Student and employee movement: entrance, movement within the building and dismissal</p> <p><i>With consideration to the Principles of Reopening, schools have implemented appropriate procedures to mitigate the spread of disease while students and employees are moving into, out of and throughout the school building.</i></p>			
<p>Protocol 1: Schools will review their student arrival and dismissal procedures with consideration of public health recommendations strategies to reduce the spread of disease.</p>	<p>Resources: MDH School Planning Guide, pp. 12-13</p>	<p>Arrival</p> <ul style="list-style-type: none"> • Middle level and Grades K-4 will predominantly use two different entrances at arrival. • Visual checks will be done as students enter the building and again when entering classrooms. <p>Dismissal</p> <ul style="list-style-type: none"> • Students participating in sports or attending Kids Club will be released first from their classrooms. • Teachers will escort bus and car riders from their own classes out two different doors, one class at a time. 	

Protocol 2: Schools will develop procedures for student movement throughout the building during the school day.	Resources: MDH School Planning Guide , pp. 12-13 CDC Considerations for Schools	<ul style="list-style-type: none"> • Middle level will stagger dismissal between class periods. • Students go straight into classrooms upon arrival to school, after leaving personal items in lockers. • Stairways will be designated for one-way traffic only. • Bathrooms will be designated for particular grade levels. 	
Protocol 3: Schools will develop procedures for employee use of all shared common work spaces (e.g. lounges, restrooms, common offices, meeting spaces, work rooms).	Resources: CDC Considerations for Schools	Staff Lounge <ul style="list-style-type: none"> • Additional seating for lunch will be available in the staff lounge and in the sunroom. • Additional cleaning of the lounge will be scheduled throughout the lunch hours. Conference Room and Sunroom <ul style="list-style-type: none"> • Sanitizer will be located by the door of the room for all to use as entering and exiting. • Additional sanitizer will be available to clean chairs and surfaces after each use. Staff Bathroom <ul style="list-style-type: none"> • Additional cleaning of all staff bathrooms will be scheduled throughout the day. Workroom <ul style="list-style-type: none"> • Sanitizer will be located by the door of the room for use when entering and exiting. 	
Protocol 4: Schools will review their procedures for bathroom use.	Resources: CDC Considerations for Schools	<ul style="list-style-type: none"> • Only one classroom will be able to use a bathroom at one given time. • Bathrooms will be assigned to different grade levels. • Bathrooms will be cleaned at least 3 times a day. 	
Protocol 5: Schools will review their procedures for the use of communal spaces	Resources:	The master schedule will be adjusted between each class to provide time to clean shared equipment.	

(e.g. gym, playground, library, narthex).	<u>CDC</u> <u>Considerations for Schools</u>	Gym/LEAP <ul style="list-style-type: none"> • Sanitizer will be located by the door of the room for use when entering and exiting. • Classes outside as much as possible. Spanish <ul style="list-style-type: none"> • Sanitizer will be located by the door of the room for use when entering and exiting. • Additional sanitizer will be available to clean chairs and surfaces as needed. Music Room <ul style="list-style-type: none"> • Sanitizer will be located by the door of the room for use when entering and exiting. • Additional sanitizer will be available to clean chairs and surfaces as needed. Library <ul style="list-style-type: none"> • Sanitizer will be located by the door of the room for use when entering and exiting. • Additional sanitizer will be available to clean chairs and surfaces as needed. Computer Lab <ul style="list-style-type: none"> • Sanitizer will be located by the door of the room for use when entering and exiting. • Additional sanitizer will be available to clean chairs and surfaces as needed. Playground <ul style="list-style-type: none"> • Santizer will be located by the entrance door to the school. 	
Benchmark G: Food service plans <i>Schools have implemented appropriate procedures to mitigate the spread of disease during meal time at school.</i>			
Protocol 1: Schools will review their procedures and schedules for food service (e.g. breakfast, snack, lunch).	Resources: <u>MDH School Planning Guide</u> , p. 5	Lunch Room <ul style="list-style-type: none"> • The master schedule will be adjusted to add additional lunch times and provide spacing between groups entering and leaving the cafeteria. • Students will wash their hands before entering the cafeteria. • Students will be standing on designated spots to maintain social distance while waiting in line to check in/get lunch tray. 	

	<p><u>MDH: Hand Hygiene for Food Handlers</u></p> <p><u>MDH COVID-19 Prevention Guidance</u>, p. 4</p> <p><u>CDC Considerations for Schools</u> (Food Service)</p>	<ul style="list-style-type: none"> Students will not be entering in their lunch numbers; a new, touch-free system will be designed. Students will receive their lunch tray from an adult with all items on the tray (food, milk, condiments and utensils). Students will sit in designated spots/tables based on grade level. Students will be released intermittently. <p>Snack Time</p> <ul style="list-style-type: none"> Snack time in each classroom will be modified as necessary. 	
<p>Benchmark H: School and health office operations</p> <p><i>Schools have implemented appropriate procedures to mitigate the spread of disease in school and health office operations.</i></p>			
<p>Protocol 1: Schools will analyze and adjust their physical space and front office procedures with consideration of public health recommended</p>	<p>Resources: <u>MDH School Planning Guide</u>, p. 4-6</p>	<ul style="list-style-type: none"> Incoming and outgoing mail will be delivered in the entryway to minimize contact. Plexiglass will surround the front office desks to help prevent the spread. Visitors will be expected to follow EO 20-81, requiring face coverings.. Clorox wipes will be made available for visitors to clean surfaces upon entrance. 	

strategies to reduce the spread of disease.	CDC Considerations for Schools		
Protocol 2: Schools will review all procedures related to access and use of the health office.	Resources: MDH School Planning Guide	We have redesigned the layout of the health office to create space for possible COVID individuals and maintain privacy. We have also changed which door students and staff will enter and exit the health office.	
Benchmark I: Transportation <i>Schools have implemented procedures to mitigate the spread of disease while transporting students.</i>			
Protocol 1: Schools that manage their own transportation will analyze and adjust their transportation procedures and ensure availability of back-up drivers.	Resources: MDH School Planning Guide , p. 14	Not applicable	
Protocol 2: Schools who rely on their district for transportation will review district protocols and develop a contingency plan if the district is unable to provide transportation.	CDC Considerations for Schools (Transportation)	<ul style="list-style-type: none"> StMCS will review the district protocols and policies when they are released. If district transportation becomes unavailable, StMCSI will work with families to coordinate arrival and dismissal procedures with the introduction of greater car traffic. 	
Benchmark J: Communal prayer, the Mass and other Sacraments <i>Schools have procedures for communal prayer and the celebration of the sacraments consistent with parish protocols.</i>			
Protocol 1: Schools will analyze and adjust their Mass schedule, liturgical practices and traditions to ensure that all public	Resources: The pastor or canonical administrator will provide direction	Friday Masses and Reconciliation Services will be celebrated with modifications made in order to comply with Archdiocesan requirements. <ul style="list-style-type: none"> School Masses: <ul style="list-style-type: none"> Grades K-4 classes will sit by themselves (not with buddies). Middle-level students (Grade 5 and up) will sit in their religion classes. 	

celebrations of the Mass and other sacraments comply with Archdiocesan and parish requirements.	on parish protocols.	<ul style="list-style-type: none"> ○ Backpacks will be put in the roped-off pews in front of their seat. ○ Students will sanitize hands at check-in with their teachers. ○ One grade per bus going back to school (3 rounds instead of 2) ○ <i>Note: StMCS parents are still welcome to attend the school Mass, and students can still sit with their parents.</i> ● Reconciliation Services: <ul style="list-style-type: none"> ○ These will be held at the historic church, with students socially distanced. 	
Benchmark K: Thresholds for building closures <i>Heads of School are actively monitoring and addressing community spread of COVID-19 as it relates to decisions about short-term or long-term closure of the school building.</i>			
Protocol 1: School Level: Schools will develop transparent criteria for implementing a short-term closure of their school building. The Head of School and Pastor will consult with	Resources: Awaiting final guidance	School-Level Closure <ul style="list-style-type: none"> ● In the event of a short-term closure, the Archdiocesan representative of St. Paul and Minneapolis would be contacted regarding our need for a short term closure. ● Once approved by the Archdiocese, StMCS will announce the short term closing to the community, providing reasons and when an anticipated opening date would be available. ● Distance learning would be implemented for students in all grades. 	

the Archdiocesan Director for Catholic Education before announcing short-term closures.		<ul style="list-style-type: none"> • The campus would undergo a deep cleaning. • Child care will be available for essential workers, pending staff availability. 	
Protocol 2: Systems Level: If the governor of Minnesota declares that all public school systems across the state will close, Catholic schools will follow the Archbishop's determination on how Catholic schools will respond.	Resources:	System-Level Closure <ul style="list-style-type: none"> • StMCS will follow the determination of the Archbishop in regards to a possible closing. • A closing would be announced to the community. • Distance learning will be implemented. • The campus would undergo a deep cleaning. 	
Protocol 3: District Level: If the local public school district declares that its local public school or district will close, the Head of School and Pastor will be responsible for making a decision for its own school and will consult the Archdiocese as needed.	Resources:	Short-Term District-Level Closure <ul style="list-style-type: none"> • In the event of a short-term closure at the district level, the Archdiocesan representative of St. Paul and Minneapolis would be contacted regarding our need for a short-term closure. • If ISD 885 makes a decision to close impacts StMCS, the school will meet and determine if StMCS will need to close as well. • If StMCS determines a closure is necessary, it will be discussed with parish leadership and trustees. A closure will be announced to the community, providing the reasons for the closure and when an anticipated opening date would be available. • Distance learning would be implemented for students in all grades. • The campus would undergo a deep cleaning. • Kids Club will be available for essential workers, pending staff availability. 	

Domain IV: Communicating, Training and Educating			
Benchmark A: Communications and training <i>Schools have effectively communicated their health and safety plan to all stakeholders. Parents, staff, teachers, and all others in the school community have been educated on the health and safety procedures for shared involvement and responsibility.</i>			
Protocol 1: Schools will post signs in highly visible locations (e.g., school entrances, restrooms) that promote everyday protective measures and describe how to stop the spread of germs (such as by properly washing hands).	Resources:	<ul style="list-style-type: none"> StMCS will obtain signage in regards to handwashing, coughing and hygiene, and post throughout the school building and on our website. We will also send hygiene flyers for families to talk about and review in the beginning-of-the-year folder.. 	
Protocol 2: Schools will make regular, routine communications on reducing the spread of COVID-19.	Resources:	<ul style="list-style-type: none"> August Family Folders will include information for families on how to mitigate the spread of COVID. Information will be posted on social media on how to mitigate the spread of COVID. 	
Protocol 3: Schools will educate employees, students and families about when they/their child(ren) should stay home and when they may return to school if they	Resources: MDH: If You Are Sick: COVID-19 CDC: Coronavirus Disease 2019: Symptoms	Students and staff who display symptoms (fever of 100.4 or higher, chills, muscle pain, sore throat, loss of sense of smell or taste, or gastrointestinal symptoms of diarrhea, vomiting, or nausea) should stay home.	

have been sick, even prior to school opening.			
Protocol 4: Schools will train all employees, students, families and community members (including volunteers) in school-level procedures found in the Pandemic Preparedness and Response Plan (PPRP).	Resources:	Training <ul style="list-style-type: none"> • All staff will be trained on August 3-4. • Families will be provided PPRP information on August 5 and asked to discuss it with their children. • Students will be trained on day 1 and routinely reminded of procedures. 	
Protocol 5: The school will develop a plan for communicating a verified report of a student or employee who has tested positive for COVID-19.	Resources: MDH Planning Guide , p. 12-13	Communication The school will notify the class and employees who are working with a particular class of a positive COVID test result. Families will be provided with the procedures to follow if we believe they have been exposed. <ul style="list-style-type: none"> • Exposure information will be gathered from the student/staff if they test positive for COVID, so other employees and/or students' families can be notified. • If you have close contact with someone who tested positive for COVID (In close proximity for 15 minutes or more without a mask) then you need to follow the MDH Exposure Protocol. <i>Note: Exposure notifications will work to protect the privacy of students and staff and will not include names.</i>	
Protocol 6: Schools will communicate to families and staff their process for determining school-building closure.	Resources:	Closure Communication <ul style="list-style-type: none"> • The school building will be closed if we do not have enough teachers and substitutes to cover classes. • Building closure thresholds will follow the directives of the archdiocese. 	

Benchmark B: Supporting faith and resilience <i>Schools will encourage prayer for prudent courage in the face of the virus and draw upon the riches of the Catholic tradition to help students and employees to trust in God's providential care in the midst of turmoil and disruption.</i>			
Protocol 1: Schools will be mindful of the appropriate amount of COVID-19 information that is shared based on the development level of children.	Resources:	<ul style="list-style-type: none"> • Staff inservice will be held with school counselor Kathleen Massmann regarding mental health and appropriate information for different developmental levels • Bible stories and saint stories will be identified to use in religion classes or morning meetings to show examples of faith and resilience • We will use words such as wellness and health rather than COVID. • Teachers will do their best to ensure that discussion/questions regarding the pandemic don't overtake classroom instruction time and will allow other appropriate opportunities for students to ask questions and discuss concerns. 	
Protocol 2: Schools will be attentive and responsive to the social, spiritual, physical, and emotional needs of students and families.	Resources:	StMCS will: <ul style="list-style-type: none"> • Send a survey to families to get an idea of social, spiritual, physical and emotional needs as a result of COVID (see graphic below) • Give students a sense of control by sharing what they <i>can</i> do (e.g. hand- washing) • Remind students that the risk of children becoming seriously ill is very small • Begin the school year with outside prayer and Fr. Park introducing himself and blessing the school • Remind students that family members, staff, and members of the community are working hard to keep them safe • Distribute literature to parents and teachers with tips and suggestions about how to talk to kids about Infectious diseases based on age and development 	

		<ol style="list-style-type: none"> 1. How has your family been impacted by COVID? 2. Has this impact included the loss of a loved one (either from COVID or any other cause)? 3. Has your family experienced the loss of a job or substantial change to a job as a result of COVID? 4. Are there social concerns that you have for your family as a result of COVID? 5. Are there spiritual concerns that you have for your family as a result of COVID? 6. Are there physical concerns that you have for your family as a result of COVID? 7. Are there emotional or mental health concerns that you have for your family as a result of COVID? 8. Would you and your family like to find out more about spiritual, emotional and social support that StMCS can offer? 	
Benchmark C: Instructional continuity and contingency planning <i>Consistent with their academic programs, schools will have plans to provide an approach to hybrid learning and to efficiently transition to distance learning if needed.</i>			
Protocol 1: According to their ability, schools will have a plan to provide educational continuity for children who may not be able to be present in the school building for in-person learning (e.g. due to underlying health conditions, mental health concerns or a need to quarantine due to exposure to COVID-19).	Resources: See Appendix C and Appendix D	Distance Learning <ul style="list-style-type: none"> • Students who need to learn from home due to health concerns will be educated through the remote learning model. • The goal of this model will be to provide synchronous learning opportunities for students. Choosing Distance Learning Due to Health Concerns <ul style="list-style-type: none"> • Technology will be provided by the school upon individual family requests. • Instruction may be delivered by the teacher or support staff. • All regular assignments, tests and requirements will be the responsibility of the students when participating in remote learning. • <i>Note: Students who are learning from home by choice due to health concerns will remain on distance learning for the trimester.</i> <ul style="list-style-type: none"> ○ At the end of the trimester, coming back to the building to complete learning will be discussed with the parents, teacher and Ms. Ginther. ○ If families feel their child should return sooner, they must meet with the principal. • Students will have classes on regular school days according to the school calendar. Students in Quarantine <ul style="list-style-type: none"> • Students who are for quarantine will receive remote learning instruction during their quarantine period. 	

		<ul style="list-style-type: none"> • Instruction may be delivered by the regular teacher or support staff. • All regular assignments, tests and requirements will be the responsibility of the students when participating in remote learning. • Students who complete their quarantine period will return to school and continue with the regular classroom attendance. • Students will have classes on regular school days according to the school calendar. 	
Protocol 2: According to their ability, schools will be prepared to implement short-term and long-term distance learning plans if in-person learning should be suspended for all students in the school.	Resources: See Appendix C and Appendix D	Distance Learning <ul style="list-style-type: none"> • Distance learning will be used for all students should the school need to have a short-term or long-term shutdown due to COVID. • Devices will be used from home and/or provided by the school based on need and availability. • Instruction may be delivered by the teacher or support staff. • All regular assignments, tests and requirements will be the responsibility of the students when participating in distance learning. 	

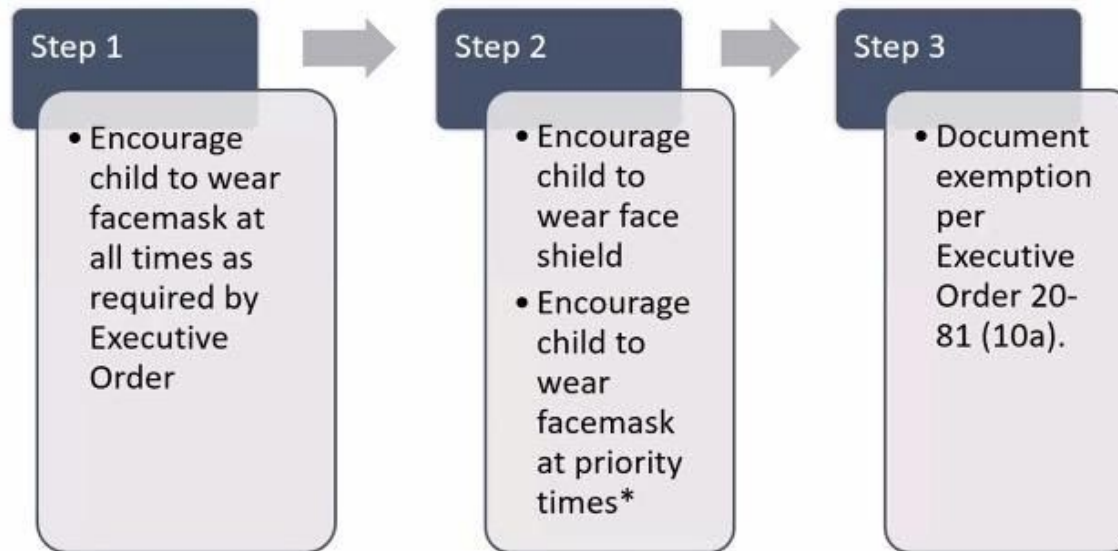
APPENDICES

APPENDIX A: Additional Health and Safety COVID-19 Resources for Schools

Resources listed here do not indicate Archdiocesan approval or endorsement

- [2020-21 MDE Minnesota Public Schools Planning Guide](#) (Minnesota Department of Education)
- [IEA Resources](#) (provided by Catholic Mutual)
- [Initial Fall Reopening Guide](#) (State of Massachusetts)
- [Recommendations for Reopening](#) (Sick Kids Children's Hospital, Canada)

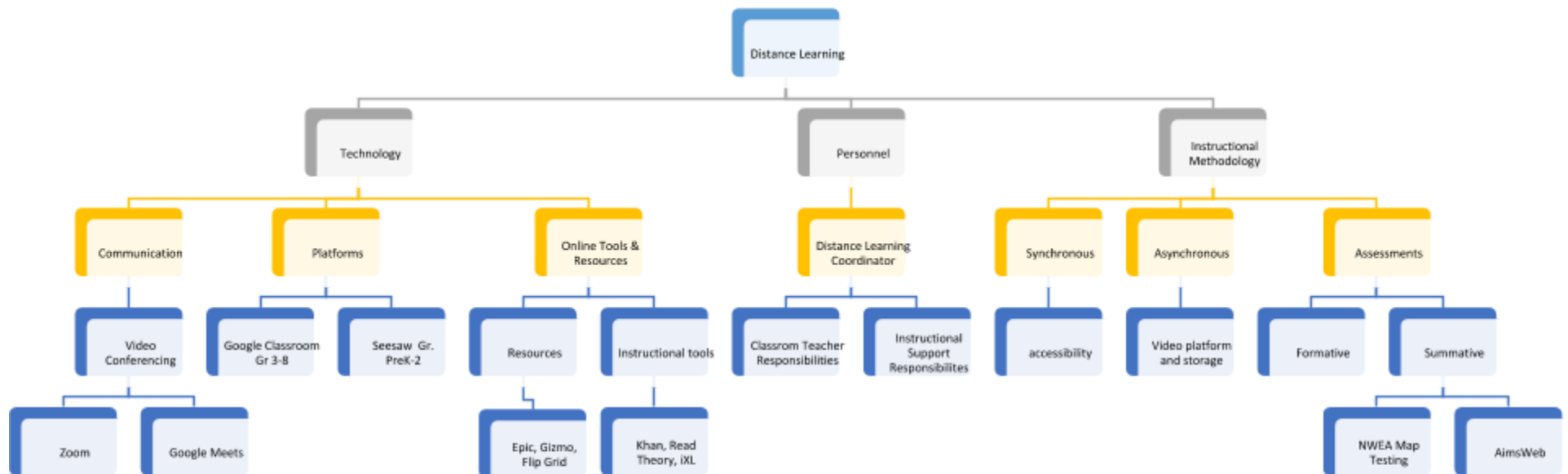
APPENDIX B: Guidance from Implementing EO 20-81 in Schools



* CDC Guidance (July 16, 2020): <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cloth-face-cover-guidance.html#feasibility-adaptations> For younger students who are unable to wear a face covering for an extended period of time: “Wearing of masks may be prioritized at times when it is difficult to maintain a distance of 6 feet from others (e.g., during carpool drop off or pick up, or when standing in line at school).”

APPENDIX C: Sample of Distance Learning Planning Framework

Named resources are examples of possible options. They are not endorsements or recommendations.



APPENDIX D: Educational Planning Models

One of the most critical decisions each school needs to consider is how to meet the academic needs of all students – those who will learn in person and those who are unable to receive instruction in school and desire virtual instruction.

Three Models for Learning:

- All students learn at school in a newly modified traditional model.
- All students learn from home – distance learning.
- A hybrid model that provides some students learning at school and some at home.

It is important to make plans that are flexible and can adapt to the ever-changing needs of your community. Every plan should consider the possibility that at some point in the 2020-2021 academic year; if there is a significantly elevated health risk, schools will need to shift to distance learning. Choices surrounding technology, responsibilities for personnel, and instructional methodology should be flexible enough to adjust to the change in educational modeling.

Questions to consider after reflecting on distance learning during the spring 2020:

Technology

- What platforms will best support/organize learning experiences for students, teachers, and parents?
- What online educational resources will help students in school and at home meet their learning goals?
- What communication tools will provide access to learning for students utilizing distance learning?

Personnel

- What are the expectations of your teachers for managing the learning of students at school and home?
- Who will be responsible for overseeing learning from home?
- How will all students with learning plans have their needs met if they are learning from home?

Instructional Methodology

- If some or all students are learning from home at any point in the school year how will the instruction be delivered – synchronous or asynchronous lessons?
- How will all students be assessed – formative and summative – if some students are learning from home? How do you ensure academic integrity?

APPENDIX E: Cleaning Log from Catholic Mutual

Cleaning Log

Date:

[illegible]

APPENDIX F: Sample Area Cleaning Chart from Catholic Mutual

Space	How Often to Clean & Disinfect	When to Clean & Disinfect	Who is Responsible
COMMON AREAS			
Main Entrance/Vestibule Door Handles and Electronic Door Assist Buttons Main Office Door Handles Bottle Fillers Check-In Counters/Front Office Counters Handrails Elevator Buttons Vending Machine Buttons, Cash Input/Output surfaces, pickup slot door Tables/Chairs in Common Areas	3 times/day	Input times	Input names and times per person
MAIN OFFICE & TEACHERS LOUNGE			
Door Handles/Inside & Outside Tables Desks Chairs - Armrests, Grip Areas Phones and Computers Break Room - Tables, Chairs, Appliance Handles, Cabinet Pulls. Remove all shared condiments	1 time/day	Input time	Input names and times per person
CLASSROOMS			
Door Handles Identify all touch points during open/closing Door Frames Light Switches Table Tops Desks Chairs (include hand grips) Cabinet handles/Pulls and Front of Doors Sink Faucets and Front Edge of Sink	1 time/day	Input time	Input names and times per person