COVID-19 Interim Guidance for Administrators of San Francisco K-12 Schools and Childcare Programs

Plan, Prepare, and Respond to Coronavirus Disease 2019 (COVID-19)

This guidance may be revised as the pandemic and the response to it continue to evolve, and as we gather more information. Given the rapidly changing situation, it is important to know where to find information on the COVID-19 pandemic:

Local: sf.gov; https://www.sfdph.org/dph/alerts/coronavirus.asp and https://www.sfcdcp.org/covid19
State: https://www.cdph.ca.gov/programs/cid/dcdc/pages/immunization/ncov2019.aspx
National: https://www.cdc.gov/coronavirus/2019-ncov/index.html

Who is this guidance for?

This interim guidance is intended for administrators of public and private childcare programs and K-12 schools in San Francisco. Administrators are individuals who oversee the daily operations of childcare programs and K-12 schools, and may include positions like childcare program directors, school district superintendents, principals, and assistant principals. This guidance is intended for administrators at both the school/facility and district level.

Why is this guidance being issued?

As of March 16, 2020, the Bay area is currently under shelter in place health orders. Although schools are currently closed for students, this is an important opportunity for school administrators and teachers to prepare for school re-opening and to develop distance learning curricula and teaching plans.

This guidance will help childcare programs, schools, and their partners understand how to help prevent the transmission of COVID-19 within childcare and school communities and facilities. It also aims to help childcare programs, schools, and partners react quickly should a case be identified. The guidance includes considerations to help administrators plan for the continuity of teaching and learning if there is community spread of COVID-19.

What is the role of schools in responding to COVID-19?

Based on available modelling data, in the setting of substantial community transmission, prolonged closures (greater than 4 to 8 weeks) or intermittent closures may be necessary to impact the pandemic curve of COVID-19 infection.[1] It is currently unclear how long schools should remain closed as part of a wider community mitigation strategy. We are working closely with local, state, and national public health departments to inform decision making.

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

How should schools prepare for, and respond to, COVID-19?

Additional data suggest that the benefit of school closures on the pandemic curve have the most benefit when accompanied by other strategies including handwashing and hygiene practices (citation below). It is important
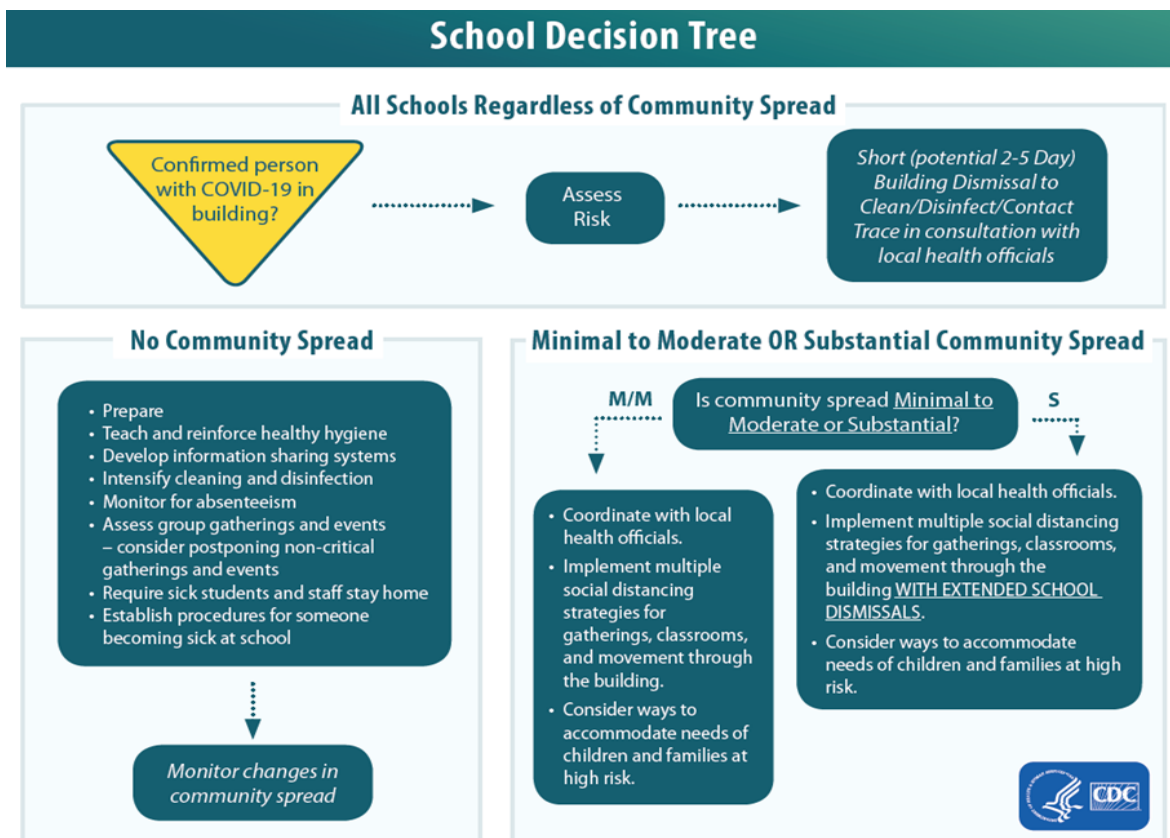
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[1] Ferguson, N. M., Laydon, D. et al. (2020). Impact of non-pharmaceutical interventions (NPIs) to reduce COVID-19 mortality and healthcare demand. London: Imperial College COVID-19 Response Team, March 16.

therefore to utilize the time while schools are closed, to ensure that these additional measures are optimized when schools re-open.

We additionally recommend that schools begin to prepare for prolonged and/or intermittent closures through development of distance learning curricula and establish mechanisms to continue providing services to economically and physically vulnerable children (i.e school-based meals on a pick-up and take-out basis, behavioral and mental health services).

The following decision tree can be used to help schools determine which set of mitigation strategies may be most appropriate for their current situation.[2]

School Decision Tree

All Schools Regardless of Community Spread

Confirmed person with COVID-19 in building? ·······▶ Assess Risk ·······▶ Short (potential 2-5 Day) Building Dismissal to Clean/Disinfect/Contact Trace in consultation with local health officials

No Community Spread

- Prepare
- Teach and reinforce healthy hygiene
- Develop information sharing systems
- Intensify cleaning and disinfection
- Monitor for absenteeism
- Assess group gatherings and events – consider postponing non-critical gatherings and events
- Require sick students and staff stay home
- Establish procedures for someone becoming sick at school

Monitor changes in community spread

Minimal to Moderate OR Substantial Community Spread

M/M ········ Is community spread <u>Minimal to Moderate or Substantial</u>? S ········

M/M:
- Coordinate with local health officials.
- Implement multiple social distancing strategies for gatherings, classrooms, and movement through the building.
- Consider ways to accommodate needs of children and families at high risk.

S:
- Coordinate with local health officials.
- Implement multiple social distancing strategies for gatherings, classrooms, and movement through the building WITH EXTENDED SCHOOL DISMISSALS.
- Consider ways to accommodate needs of children and families at high risk.

CDC

This document addresses:
- Measures to take while schools are closed
  - Activities & Operations During School Closure
  - Preparation/Planning for School Re-opening
- Scenario-based guidance
  - When there is a confirmed case at the school, regardless of level of community transmission
  - When there is minimal to moderate community transmission
  - When there is substantial community transmission
- Special Considerations
- FAQs

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[2] https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/guidance-for-schools.html

Measures to take while schools are closed

A. Activities & Operations During School Closure

- **Encourage students not to congregate in other places in the community during school closure**
  - Previous experience with outbreaks suggests that during school closures, students often continue congregating in various locations in the community and each other's homes. Messaging to the school community should be focused on avoiding all such gatherings to minimize spread of infection.

- **Implement strategies to continue education and related supports for students.**

  - **Ensure continuity of education**
    - Implement e-learning plans, including digital and distance learning options as feasible and appropriate. See California Department of Education resources on distance learning at https://www.cde.ca.gov/ls/he/hn/guidance.asp
    - Determine:
      - If a waiver is needed for state requirements of a minimum number of in-person instructional hours or school days (seat time) as a condition for funding;
      - How to convert face-to-face lessons into online lessons and how to train teachers to do so;
      - How to triage technical issues if faced with limited IT support and staff;
      - How to encourage appropriate adult supervision while children are using distance learning approaches; and
      - How to deal with the potential lack of students' access to computers and the Internet at home.
  - **Ensure continuity of meal programs.**
    - Consider ways to distribute food to students.
    - Design strategies to avoid distribution in settings where people might gather in a group or crowd. Consider options such as "grab-and-go" bagged lunches or meal delivery.
  - **Consider alternatives for providing essential medical and social services for students.**
    - Continue providing necessary services for children with special healthcare needs, or work with the state *Title V Children and Youth with Special Health Care Needs (CYSHCN) Program*.

B. Preparation/Planning for School Re-opening

- **Review, update, and implement emergency operations plans (EOPs).**
  - Ensure the plan includes strategies to reduce the spread of a wide variety of infectious diseases (e.g., seasonal influenza). This includes strategies for social distancing and school dismissal that may be used to stop or slow the spread of infectious disease. The plan should also include strategies for continuing education, meal programs, and other related services in the event of school dismissal.
  - Ensure the plan emphasizes everyday preventive actions for students and staff. For example, emphasize actions such as staying home when sick; appropriately covering coughs and sneezes; cleaning frequently touched surfaces; and washing hands often.
  - CDC has workplace resources such as posters with messages for staff about staying home when sick and how to avoid spreading germs at work.
  - Reference key resources while reviewing, updating, and implementing the EOP:

- Multiple federal agencies have developed resources on school planning principles and a 6-step process for creating plans to build and continually foster safe and healthy school communities *before*, *during*, and *after* possible emergencies. Key resources include guidance on developing high-quality school emergency operations plans guidance on developing high quality school emergency operation plans, and a companion guide on the role of school districts in developing high-quality school emergency operations plans.
    - The Readiness and Emergency Management for Schools (REMS) Technical Assistance (TA) Center contains free resources, trainings, and TA to schools and their community partners, including many tools and resources on emergency planning and response to infectious disease outbreaks.

- **Encourage students, parents, and staff to take everyday preventive actions to stop the spread of germs**
    - Require students and staff to stay home when sick.
    - Teach students, parents, and staff the importance of staying home when sick.
    - Review school policies and consider revising those that make it difficult for students and staff to stay home when sick or when caring for others who are sick.
        - Implement flexible sick leave policies for students and staff.
        - Avoid the use of perfect attendance awards.
        - Cross-train staff so that others can cover for co-workers who need to stay home.

- **Revise, test and strengthen communications plans for use with the school and local community.**
    - During a rapidly evolving pandemic, it is essential that schools have well-established mechanisms for providing emergent information to both staff and parents and have channels to receive information on absenteeism and reasons for absenteeism of both students and staff.
    - Information-sharing systems can be used for day-to-day reporting (on information such as changes in absenteeism) and disease surveillance efforts to detect and respond to an outbreak. Include strategies for sharing information with staff, students, and their families.
    - Include information about steps being taken by the school or childcare facility to prepare, and how additional information will be shared.
    - Test communication capacity, and reiterate steps that staff, students, and families can take to stay healthy and guidance that they should stay home if sick
    - Local health officials should be key partners in information sharing.

- **Train staff and reinforce healthy hygiene practices**
    - Train staff on healthy hygiene practices so they can teach these to students when schools reopen.
    - Ensure handwashing strategies include washing with soap and water for at least 20 seconds, especially after going to the bathroom; before eating; and after blowing your nose, coughing, or sneezing. If soap and water are not available and hands are not visibly dirty, use an alcohol-based hand sanitizer that contains at least 60% alcohol.
    - CDC offers several free handwashing resources that include health promotion materials, information on proper handwashing technique, and tips for families to help children develop good handwashing habits.
    - Ensure adequate supplies (e.g., soap, paper towels, hand sanitizer, tissue) are available to support healthy hygiene practices when schools reopen.

- **Train staff on intensified cleaning and disinfection efforts.**
  - o Routine cleaning and disinfection should be conducted even while a school is closed to students as long as there are any personnel onsite (i.e. staff conducting distance learning, meal preparation in school kitchens, etc.)
  - o Cleaning and disinfecting of surfaces and objects that are frequently touched are be an important component of infection control. This may include cleaning objects/surfaces not ordinarily cleaned daily (e.g., doorknobs, light switches, classroom sink handles, countertops). Clean with the cleaners typically used. Use all cleaning products according to the directions on the label. Review the list of products that are EPA-approved for use against the coronavirus that causes COVID-19 . Follow the manufacturer's instructions for all cleaning and disinfection products (e.g., concentration, application method and contact time, etc.).
  - o Provide EPA-registered disposable wipes to teachers and staff so that commonly used surfaces (e.g., keyboards, desks, remote controls) can be wiped down before use.
  - o Ensure adequate supplies to support cleaning and disinfection practices when schools reopen.

- **Establish procedures for identifying and isolating students, staff, and visitors who arrive sick or become sick at school.**
  - o Upon arrival to the facility:
    - § Students, staff, and visitors: Staff: If feasible, school nurses or appropriate staff should check each person's temperature prior to entry in the facility. Fever is defined as 100.4°F/38°C or higher. Disposable probes and gloves should be used by school staff according to universal precautions. Additional symptom screening for cough and shortness of breath should be completed. Those who have fever, cough, shortness of breath, or are otherwise ill should be sent home as soon as possible.
  - o At the facility:
    - § Advise staff to monitor for students who may be exhibiting COVID-19 or other respiratory symptoms and notify healthcare personnel (if available) within the school.
    - § Separate ill children and staff from others, immediately send ill persons home, and advise them to call their healthcare provider.
    - § Plan to have areas where these individuals can be isolated from well students and staff until they can leave the school.

- **Create a plan to monitor and respond to absenteeism when the school reopens.**
  - o Establish policies and procedures to monitor absenteeism and reasons for absenteeism when schools reopen.
  - o Develop a plan to alert local health officials about large increases in student and staff absenteeism, particularly if absences appear due to respiratory illnesses (like the common cold or the "flu," which have symptoms similar to COVID-19).
  - o Review attendance and sick leave policies. Develop policies which encourage students and staff to stay home when sick, even without documentation from doctors.
  - o Identify critical job functions and positions, and plan for alternative coverage by cross-training staff.
  - o Determine what level of absenteeism will disrupt continuity of teaching and learning.

- **Develop policies and procedures to enable social distancing when schools reopen.** Select strategies based on feasibility given the unique space and needs of the school. Not all strategies will be feasible for all schools. For example, limiting hall movement options can be particularly challenging in secondary schools. Many strategies that are feasible in primary or secondary schools may be less feasible in childcare settings. Administrators are encouraged to think creatively about all opportunities to increase the physical space between students and limit interactions in large group settings. Schools may consider strategies such as:

  o **Cancel field trips, assemblies, etc. to avoid large gatherings unless the activity can be modified to maintain all social distancing rules.** Modify activities and events such as field trips, student assemblies, athletic events or practices, special performances, parent meetings, or spirit nights to allow for smaller gatherings. For example, conduct parent meetings over a week rather than on a single day; conduct field trips in smaller groups (i.e. 10 or less); disseminate or broadcast assemblies virtually within classrooms rather than having students attend in-person)
  o **Cancel or modify classes where students are likely to be in very close contact.** For example, in physical education or choir classes, consider having teachers come to classrooms to prevent classes mixing with others in the gymnasium or music room).
  o **Increase the space between desks.** Rearrange student desks to maximize the space between students. Turn desks to face in the same direction (rather than facing each other) to reduce transmission caused from virus-containing droplets (e.g., from talking, coughing, sneezing).
  o **Increase transportation fleet or route frequency to allow for more space between students when seated on school group transportation (i.e. buses).** Students should be sitting with at least 2 empty seats between them, approximately 6 feet apart.
  o **Avoid mixing students in common areas.** For example, allow students to eat lunch and breakfast in their classrooms rather than mixing in the cafeteria. If it is not possible to suspend use of common areas, try to limit the extent to which students mix with each other, and particularly with students from other classes (e.g., stagger lunch by class, segregate lunch and recess area by class, send a few students into the library to pick out books rather than going as a class, suspend the use of lockers). Restrict hallway use through homeroom stays or staggered release of classes. Try to avoid taking multiple classes to bathrooms at once (e.g., avoid having all classes use the bathroom right after lunch or recess). In childcare or elementary school settings, consider staggering playground use rather than allowing multiple classes to play together, and limit other activities where multiple classes interact.
  o **Stagger arrival and/or dismissal times.** These approaches can limit the amount of close contact between students in high-traffic situations and times.
  o **Reduce congestion in the health office.** For example, use the health office for children with flu-like symptoms and a satellite location for first aid or medication distribution.
  o **Limit nonessential visitors.** Limit the presence of volunteers for classroom activities, mystery readers, cafeteria support, and other activities.
  o **Limit cross-school transfer of classrooms and special programs.** For example, if students are brought from multiple classes or schools for special programs (e.g., music, robotics, academic clubs), consider using distance learning to deliver the instruction or temporarily offering duplicate programs in the participating classes or schools.

- **Teach staff, students, and their families to maintain distance from each other in the school.** Educate staff, students, and their families at the same time and explain why this is important.

- **Consider ways to accommodate the needs of children, families, and staff who are at higher risk for serious illness from COVID-19.**
  - Consider if and how to honor requests of parents who may have concerns about their children attending school due to underlying medical conditions of their children or others in their home. Prolonged distance learning even when schools re-open is a reasonable consideration in this situation given the anticipated prolonged period of community transmission of COVID-19.
  - Staff who are at high-risk for complications from COVID-19 infection (> 65 years old, co-morbid conditions (heart disease, diabetes, lung disease), or immunocompromised) should be given modified duties that minimize direct and close interaction with children and students on a daily basis (i.e. teaching staff should be provided the opportunity to continue providing distance learning, custodial and maintenance staff should be allowed to work during non-school hours to the extent possible)

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SCENARIO BASED GUIDANCE

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These scenarios are based on CDC guidance and were adapted for a San Francisco context. Guidance for childcare programs and schools is organized into categories based on whether a confirmed case has entered a school and the level of community transmission (none, minimal to moderate, or substantial).

Scenario 1: Confirmed Case at the School, Regardless of Level of Community Transmission

1. **Coordinate with San Francisco Department of Public Health.** Once learning of a COVID-19 case in someone who has been in the school, immediately notify local health officials. SFDPH officials will help administrators determine a course of action. This is true even in the setting of substantial community transmission as detection and containment of outbreaks in certain settings (i.e. healthcare facilities, long term nursing facilities, and schools) will continue to be a priority for overall disease control.

2. **Dismiss students and most staff for 2-5 days.** This initial short-term dismissal allows time for the local health officials to gain a better understanding of the specific COVID-19 situation impacting the school. This allows the local health officials to help the school determine appropriate next steps, including whether an extended dismissal duration is needed to stop or slow further spread of COVID-19.

   - SFDPH recommendations for the scope (e.g., a single school, multiple schools, the full district) and duration of school dismissals will be made on a case-by-case basis using the most up-to-date information about COVID-19 and the specific cases in the community.

   - During school dismissals, also cancel extracurricular group activities, school-based afterschool programs, and large events (e.g., assemblies, spirit nights, field trips, and sporting events).

   - Discourage staff, students, and their families from gathering or socializing anywhere. This includes group childcare arrangements, as well as gathering at places like a friend's house, a favorite restaurant, or the local shopping mall.

3. **Communicate with staff, parents, and students.** Coordinate with local health officials to communicate dismissal decisions and the possible COVID-19 exposure.

   - This communication to the school community should align with the communication plan in the school's emergency operations plan.

- Plan to include messages to counter potential stigma and discrimination.
- In such a circumstance, it is critical to maintain confidentiality of the student or staff member with confirmed COVID as required by the Americans with Disabilities Act and the Family Education Rights and Privacy Act.

4. **Clean and disinfect thoroughly.**

- Close off areas used by the individuals with COVID-19 and wait as long as practical before beginning cleaning and disinfection to minimize potential for exposure to respiratory droplets. Open outside doors and windows to increase air circulation in the area. If possible, wait up to 24 hours before beginning cleaning and disinfection.
- Cleaning staff should clean and disinfect all areas (e.g., offices, bathrooms, and common areas) used by the ill persons, focusing especially on frequently touched surfaces.
- If surfaces are dirty, they should be cleaned using a detergent or soap and water prior to disinfection.
- For disinfection most common EPA-registered household disinfectants should be effective. Follow the manufacturer's instructions for all cleaning and disinfection products (e.g., concentration, application method and contact time, etc.).

5. **Make decisions about extending the school dismissal.** Temporarily dismissing childcare programs and K-12 schools is a strategy to stop or slow the further spread of COVID-19 in communities.
    - During school dismissals (after cleaning and disinfection), childcare programs and schools may stay open for staff members (unless ill) while students stay home. Keeping facilities open: a) allows teachers to develop and deliver lessons and materials remotely, thus maintaining continuity of teaching and learning; and b) allows other staff members to continue to provide services and help with additional response efforts. Decisions on which, if any, staff should be allowed in the school should be made in collaboration with the Department of Public Health.
    - Childcare and school administrators should work in close collaboration and coordination with San Francisco Public Health Department to make dismissal and large event cancellation decisions. The nature of these actions (e.g., geographic scope, duration) may change as the local outbreak situation evolves.
    - Administrators should seek guidance from local health officials to determine when students and staff should return to schools and what additional steps are needed for the school community. In addition, students and staff who are well but are taking care of or share a home with someone with a case of COVID-19 should follow instructions from local health officials to determine when to return to school.

6. **Implement strategies to continue education and related supports for students.**

    - **Ensure continuity of education**
        - o Implement e-learning plans, including digital and distance learning options as feasible and appropriate.
        - o Determine, in consultation with school district officials or other relevant state or local partners:
            - If a waiver is needed for state requirements of a minimum number of in-person instructional hours or school days (seat time) as a condition for funding;
            - How to convert face-to-face lessons into online lessons and how to train teachers to do so;
            - How to triage technical issues if faced with limited IT support and staff;

- How to encourage appropriate adult supervision while children are using distance learning approaches; and
- How to deal with the potential lack of students' access to computers and the Internet at home.

7. **Ensure continuity of meal programs.**
   - Consider ways to distribute food to students.
   - If there is community spread of COVID-19, design strategies to avoid distribution in settings where people might gather in a group or crowd. Consider options such as "grab-and-go" bagged lunches or meal delivery.

8. **Consider alternatives for providing essential medical and social services for students.**
   - Continue providing necessary services for children with special healthcare needs, or work with the state *Title V Children and Youth with Special Health Care Needs (CYSHCN) Program*.

Scenario 2: No Current Confirmed Case at the School, Mild to Moderate Community Transmission

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

1. **Coordinate with local health officials.** This should be a first step in making decisions about responses to the presence of COVID-19 in the community.

2. **Implement multiple social distancing strategies.** Select strategies based on feasibility given the unique space and needs of the school. Not all strategies will be feasible for all schools. For example, limiting hall movement options can be particularly challenging in secondary schools. Many strategies that are feasible in primary or secondary schools may be less feasible in childcare settings. Administrators are encouraged to think creatively about all opportunities to increase the physical space between students and limit interactions in large group settings. Schools may consider strategies such as:

   - **Cancel field trips, assemblies, and other large gatherings.** Cancel activities and events such as field trips, student assemblies, athletic events or practices, special performances, school-wide parent meetings, or spirit nights.

   - **Cancel or modify classes where students are likely to be in very close contact.** For example, in physical education or choir classes, consider having teachers come to classrooms to prevent classes mixing with others in the gymnasium or music room).

   - **Increase the space between desks.** Rearrange student desks to maximize the space between students. Turn desks to face in the same direction (rather than facing each other) to reduce transmission caused from virus-containing droplets (e.g., from talking, coughing, sneezing).

   - **Avoid mixing students in common areas.** For example, allow students to eat lunch and breakfast in their classrooms rather than mixing in the cafeteria. If it is not possible to suspend use of common areas, try to limit the extent to which students mix with each other, and particularly with students from other classes (e.g., stagger lunch by class, segregate lunch and recess area by class, send a few students into the library to pick out books rather than going as a class, suspend the use of lockers). Restrict hallway use through homeroom stays or staggered release of classes. Try to avoid taking multiple classes to bathrooms at once (e.g., avoid having

all classes use the bathroom right after lunch or recess). In childcare or elementary school settings, consider staggering playground use rather than allowing multiple classes to play together, and limit other activities where multiple classes interact.

- **Stagger arrival and/or dismissal times.** These approaches can limit the amount of close contact between students in high-traffic situations and times.

- **Reduce congestion in the health office.** For example, use the health office for children with flu-like symptoms and a satellite location for first aid or medication distribution.

- **Limit nonessential visitors.** Limit the presence of volunteers for classroom activities, mystery readers, cafeteria support, and other activities.

- **Limit cross-school transfer for special programs.** For example, if students are brought from multiple schools for special programs (e.g., music, robotics, academic clubs), consider using distance learning to deliver the instruction or temporarily offering duplicate programs in the participating schools.

- **Teach staff, students, and their families to maintain distance from each other in the school.** Educate staff, students, and their families at the same time and explain why this is important.

3. **Consider ways to accommodate the needs of** children and families at risk for serious illness **from COVID-19.** Consider if and how to honor requests of parents who may have concerns about their children attending school due to underlying medical conditions of their children or others in their home.

Scenario 3: No Current Confirmed Case at the School, Substantial Community Transmission

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

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

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

SPECIAL CONSIDERATIONS

Workforce at High-Risk of Complications from COVID-19 Infection

▪ Staff who are at high-risk for complications from COVID-19 infection (> 65 years old, co-morbid conditions (heart disease, diabetes, lung disease), or immunocompromised) should be given modified duties that minimize direct and close interaction with children and students on a daily basis (i.e. teaching staff should be provided the opportunity to continue providing distance learning, custodial and maintenance staff should be allowed to work during non-school hours to the extent possible)

Special Needs Students

▪ Modified services for students who have special-needs should be considered with additional provisions for social distancing when schools re-open. Enhanced teacher to student ratios may be necessary to facilitate these measures.

Food and Meal Preparation

▪ On-site food preparation facilities should follow same SFDPH guidance for restaurants and food facilities in the general community, and review FDA food safety guidance.

Childcare Programs

● Establish policies to limit the use of toys and teaching materials to those with hard, easy to clean surfaces.
● Prohibit children from bringing toys from home
● Groups of children should not mix with each other and should remain in the same group from day to day. Providers should not circulate between groups to the extent possible.

● Stagger playground use rather than allowing multiple classes to play together, and limit other activities where multiple classes interact.

● Ensure that parents do not enter the facility if they are ill by modifying pick-up or drop-off procedures as needed

FREQUENTLY ASKED QUESTIONS

After re-opening, will school be cancelled if there is a confirmed case at the school (student or school staff tests positive for COVID-19)?

In general, closure of the facility is appropriate for a period of 2-5 days for enhanced cleaning and contact tracing. Additional recommendations and longer-term closures will be decided on a case-by-case basis.

What are the recommendations for schools that have a confirmed COVID-19 case in their community?

Schools should contact the San Francisco Department of Public Health immediately for consultation and guidance. In general, closure of the facility is appropriate for a period of 2-5 days for enhanced cleaning and contact tracing. Additional recommendations and longer-term closures will be decided on a case-by-case basis.

Will parents and families be notified if their child has been in contact with a confirmed case?

Yes, at this time, people who have tested positive (cases) as well as the people in direct contact with them (contacts) will be notified by a health provider.

Will school be cancelled if a student or staff member lives with someone who has COVID-19?

No, when a student or staff member lives with someone who has tested positive for COVID-19, the student or staff member will be advised to self-monitor at home for 14 days, and to contact SFDPH if they develop symptoms. In this scenario, the school community is typically considered low-risk, and school closures are not recommended.

What are the recommendations for schools that do not have a confirmed COVID-19 case in their community?

All schools and classrooms should be equipped with hand sanitizers and tissues. Schools should reschedule or cancel medium to large events that are not essential. Schools should explore remote teaching and online options to continue learning. Also, schools should develop a plan for county-wide school closures, and families should prepare for potential closures.

Are preschool and K-12 schools responsible for monitoring children with symptoms?

Symptom monitoring and temperature checks are not required but are recommended at school entry based on available resources by staff nurses or other appropriately trained staff.

What are the recommendations for wearing masks in schools?

The CDC does NOT currently recommend the general public use facemasks to prevent COVID-19 infections.

What kinds of deep cleaning and disinfecting should schools implement?

- For routine cleaning, we recommend following guidance from the San Francisco Department of Health: https://www.sfdph.org/dph/alerts/files/COVID%E2%80%9019-Minimum-Environmental-Cleaning-Standards.pdf.
- In the event of a confirmed COVID-19 case in the community, we recommend following CDC guidance for cleaning and disinfecting: https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/cleaning-disinfection.html#Cleaning.

How can people reduce the risk of getting sick and prevent the spread of the coronavirus?

The best way for all San Franciscans to reduce their risk of getting sick, as with seasonal colds or the flu, still applies to prevent COVID-19:

- Wash hands with soap and water for at least 20 seconds.

- Cover your cough or sneeze.

- Stay home if you are sick.

- Avoid touching your face.

- Try alternatives to shaking hands, like an elbow bump or wave.

- If you have recently returned from a country, state or region with ongoing COVID-19 infections, monitor your health and follow the instructions of public health officials.

ADDITIONAL RESOURCES FOR SCHOOLS AND CHILDCARE SETTINGS
https://www.sfdph.org/dph/alerts/coronavirus.asp

https://www.cdph.ca.gov/Programs/CID/DCDC/CDPH%20Document%20Library/School%20Guidance_ADA%20Compliant_FINAL.pdf

https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/index.html

https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/guidance-for-schools.html

https://www.cdc.gov/coronavirus/2019-ncov/downloads/community-mitigation-strategy.pdf