



September 14, 2020

Dear Benton and Franklin County School Administrators,

Benton-Franklin Health District (BFHD) has been monitoring COVID-19 disease activity in the bi-county area closely. Disease activity as indicated by new cases/100,000 population over 14 days has been decreasing over the last two months. Preliminary data as of 9/8/2020 for Benton County has dipped below the 75 cases/100,000/14 day benchmark recommended by Washington State Department of Health (WA DOH) for in-person hybrid learning. This indicator in combination with overall sustained trend of lower disease activity is sufficient to warrant a new recommendation on hybrid learning. At this time, Franklin County still remains above the WA DOH recommendation, but rates have been steadily dropping throughout the last month. If current trends continue, it is anticipated that Franklin County rates will drop below the DOH recommend benchmark by the middle of October, with several communities within Franklin County dropping below this benchmark even earlier.

Based on this preliminary data, Benton-Franklin Health District recommends that:

- All schools and school districts in Benton County as well as North Franklin School District, plan for implementation of in-person hybrid learning models as early as October 1, 2020.
- Pasco School District and all other schools and districts in Franklin County plan for implementation of in-person hybrid learning models as early as October 15, 2020

These dates allow for sufficient time to continue to monitor disease activity to ensure that it will not escalate significantly. These dates reflects only the public health assessment of risk of COVID-19 associated with school re-opening. Strict adherence to COVID-19 protocols, according to state and local guidance, including use of face coverings will be necessary to ensure that students and staff are able to return safely. Phased re-entry of students during transition to in-person hybrid learning is recommended.

Implementation of in-person hybrid learning models will require significant preparation for both schools and families.

- Schools need to consider the proportion of their staff and student population at higher risk for serious illness with COVID-19.
- Schools need to ensure that adequate hygiene, sanitization, and personal protective equipment (PPE) supplies are available.

Environmental Health & Community Health Centers

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- Schools need to ensure that adequate staff are available to perform the required COVID-19 precautions.
- Families need to ensure that their students' immunizations are updated, all necessary paperwork is completed, and those who require Individual Health Plans (IHP) have submitted them prior to returning to in-person learning

The sustained reduction in COVID-19 disease activity, in addition to the reduction in impact on the health care system as evidenced in hospitalization rates demonstrate a reduction in COVID-19 disease burden. Increased compliance with individual COVID-19 mitigation measures, including 98% masking in grocery stores and mandatory masking in all businesses demonstrate advancement in individual and community responsibility for reducing the spread of COVID-19 in our area. COVID-19 is still a major concern in the community and it is necessary to maintain vigilance with infection control and mitigation measures, but advancing to the hybrid learning model is not expected to pose a significantly greater risk to staff and students than their current activities. Medically fragile/high risk individuals are still recommended to work or learn remotely.

**Rationale:**

COVID-19 is a novel disease and understanding of the disease process has developed over time. Ongoing research across the globe and a growing body of data from cases has resulted in an evolution in recommendations to remain current with best practices and updated evidence. Measures implemented or recommended in the spring, or even earlier in the summer may no longer be relevant or appropriate.

Washington State Department of Health guidelines recommended distance learning until COVID-19 disease activity was at a moderate level, defined as 25 – 75 cases/100,000 over 14 days. The guidelines also recommend consideration of other local factors. In Washington State, local health officers have additional authority to make public health decisions involving their respective local health jurisdictions.

It is clear that students benefit from education. Qualitative feedback from students and families suggests that distance learning is not superior or equal to in-person classroom instruction for most students. Schools also provides additional benefits, which are magnified for populations experiencing health disparities. There are benefits to in-person school attendance that must also be considered in this decision making process. Education is a key driver for health. Groups at higher risk for health disparities overlap groups at higher risk for lack of educational attainment. Barriers to educational attainment, including lack of access to early educational support, will result in lower academic achievement as well



as lower health potential. Schools are also source for nutrition, for monitoring the well-being of children, and for supporting social and emotional development.

BFHD's recommendation is consistent with the intent of the current guidelines outlined by the State Department of Health and continues to align with state policy and guidance. BFHD will continue to monitor COVID-19 disease activity and trends closely for significant, unexpected variations and for any potential increases. SARS-CoV-2 is an emerging and novel infection, so it is important to recognize that recommendations may change as they must be rooted in best available evidence and in the status of disease activity in the future.

Sincerely,



Amy D. Person, M.D.

Health Officer, Benton-Franklin Health District

