

<u>Alta Vista School- Health and Safety Plan Guidelines (rev. Aug 2022)</u>

(adapted from CDPH Guidance- <u>CDPH Guidance for K-12 Schools</u>)

You may contact the following person with any questions or comments about this protocol:

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Updated focal points for Schools from CDPH Guidance updated June 30, 2022

- SF DPH has now deferred to <u>CDPH Guidance for K-12 Schools</u> for school year 2022-2023
 - o Schools should continue in-person learning at full capacity for all grades.
 - o Testing recommendations updated.
 - o Physical distancing and cohorting are not required. These two measures are lower priority than other prevention strategies such as ventilation and vaccination to limit the impact of Covid if a person contracts it.
- "New rules for quarantine" section added.
 - o Modified quarantine for students with close contact to COVID-19 at school: if both the exposed student and the person with COVID-19 were wearing face masks, the exposed student may continue to attend school with testing.
- *AVS Covid Testing Resources
 - o Note that our continued partnership with Safer Together SF allows us to provide Covid testing on-site as needed. We will continue to screen our students and faculty if on-campus exposures occur during the school year.
- Preventing person-to-person transmission, via respiratory transmission, is more important than frequent cleaning and disinfection. COVID-19 mainly spreads from

person-to-person via respiratory transmission.

o Coronavirus is easy to kill on surfaces compared to norovirus.

- Most household cleaning products are effective. Professional deep cleaning services are generally unnecessary.
- The use of personal protective equipment (PPE) does not eliminate the need for physical distancing, portable barriers/partitions and universal face coverings. PPE can give people a false sense of security. Physical distancing, barriers and face coverings are important in preventing the spread of COVID-19 in school settings.



- Exposure risk is a gradient, rather than an all-or-nothing condition. A rule of thumb is that a person must spend at least 10-15 minutes within 6 feet of someone with COVID-19 to be at risk of infection. Shorter interactions at greater distances are lower risk. Face coverings decrease risk, and being outside is lower risk than inside. Other factors include whether the infected person was sneezing or coughing, or doing an activity that produced more respiratory droplets (singing or shouting has been shown to spread COVID-19 efficiently, particularly in enclosed spaces).
- The risk of transmission in school is low. Schools provide layers of prevention, in a structured, supervised setting where everyone must follow COVID-19 precautions. As a result, the risk of COVID-19 in schools is often lower than in less supervised settings outside of school. SFDPH recommends that families with concerns consult with their child's doctor before deciding not to send their child to school.

Section 1 - Education

- o AVS will distribute to all staff, faculty, and other employees ("Personnel") copies of the the Health and Safety Plan (or a summary of each item with information on how copies may be obtained) and any educational materials required by the Health and Safety Plan.
- o AVS will create and implement an education plan for all Personnel covering all items required in the Health and Safety Plan that apply to them.
- o AVS will update the Health and Safety Plan as appropriate while the Directive is in effect.

Section 2 - Requirements Regarding Personnel

- o The Department of Public Health has issued guidelines requiring Childcare Providers and other permitted businesses to comply with COVID-19 testing requirements for employers and businesses. AVS will ensure that all Personnel that work on-site will comply with testing requirements.
- o AVS will implement COVID-19 testing for staff as required
- o AVS will instruct all Personnel orally and in writing not to come to work at the school if they are sick.



- o AVS will instruct Personnel who stayed home or who went home based on the criteria listed on the Attachment that they must follow the criteria as well as any applicable requirements from the quarantine and isolation directives (available online at <u>www.sfdph.org/dph/alerts/coronavirus- healthorders.asp</u>) before returning to work. If they are required to self-quarantine or self-isolate, they may only return to work after they have completed self-quarantine or self-isolation. If they test negative for the virus (no virus found), they may only return to work after waiting for the amount of time listed on the Attachment after their symptoms have resolved. Personnel are not required to provide a medical clearance letter in order to return to work as long as they have met the requirements outlined on the Attachment.
- o AVS will provide a sink with soap, water and paper towels for handwashing, for all Personnel working onsite at the school. AVS will require that all Personnel wash hands at least at the start and end of each shift, after sneezing, coughing, eating, drinking, using the restroom, and frequently during each shift.
- AVS will provide hand sanitizer effective against COVID-19 throughout the school locations for Personnel. AVS will keep hand sanitizer out of the reach of young children, and supervise its use.
- o Non-medical staff at higher risk for severe COVID-19 illness will not be assigned to assess students who feel sick or monitor/care for sick students waiting to be picked up.

Section 3 - Stable and Separate Groups of Children:

- **Cohorting is no longer required.** SFDPH does not recommend cohorting if it will limit full enrollment for in-person learning. Schools should prioritize full enrollment over strict cohorting.
- o Staff and volunteers may work with more than one class or group.
- o There is no maximum group or class size
- o AVS will prioritize the use and maximization of outdoor space for activities where practicable.

Section 4 - Physical Distancing and Facilities

Physical distancing is not required.

 In many cases, AVS will move higher-risk activities (such as exercise, etc.) outside to reduce COVID-19 risk more than distancing indoors.



Non-Classroom Spaces

- AVS will limit communal activities where practicable and will consider use of non -classroom space for instruction, including outdoor space if weather permits.
- AVS will eat meals outdoors or in classrooms instead of our group dining room setting where practicable.

Section 5 - Meals and Snacks

Eating together is higher-risk for COVID-19 transmission because people must remove their face masks to eat. Children often eat with their hands and people often touch their mouths with their hands while eating. In addition, meals are usually considered time for talking together, which further increases risk, especially if people must speak loudly to be heard

- o Students will eat meals outdoors when space and weather allow.
- o Meals do not need to be individually plated or bagged..

Section 6 - Events and Gatherings

- O Outdoor Festivals, performances, and other events that involve families are allowed. Small groups for indoor tours or performances may be allowed. AVS will keep a log of all persons who attend. This will be helpful if someone at an event, tour or open house later tests positive for COVID-19.
- o AVS will redesign school tours and open houses to meet guidelines for group size, screening, face coverings, hand hygiene, and cleaning and disinfection.. AVS will keep a log of all persons present.
- o Field trips- All restrictions on field trips have been removed. Students can go on field trips to outdoor or indoor destinations. They may use shared vehicles or public transportation following the guidance outlined in this document.

<u>Section 7 – Symptom Screening for Children</u>

• AVS no longer requires health screening upon arrival on campus. Children with COVID-19 symptoms or a fever of over 100.4 will be sent home and requested to have COVID-19 testing via our health office.. Children may return to the school when they meet the criteria set forth in SFDPH/CDPH guidance on COVID-19 Health Checks at Schools, Programs for Child and Youth, available online at <u>CDPH Guidance for Schools 22-23</u> (open the "Schools, Childcare, and Youth Programs" area of the "Information and Guidance for the Public" section).



Section 9 - Face Coverings

o AVS is currently mask optional, however, in accordance with <u>CDPH Guidance for</u> <u>Schools 22-23</u> masking remains highly recommended.

<u>Section 10 - Hygiene and Sanitation</u>

- o AVS will encourage children, youth, and staff to wash their hands often with soap and water for at least 20 seconds or with hand sanitizer, especially before and after eating, after going to the bathroom, after wiping their nose, coughing, or sneezing.
- o AVS will ensure that every classroom/instructional space and common area (staff work rooms, eating areas) has hand sanitizer or a place to wash hands as needed.
- o AVS will educate children, youth and staff about basic measures to prevent the spread of infection, including covering one's coughs and sneezes and washing hands frequently.
- o AVS facilities staff will follow the manufacturer's instructions for concentration, application method, and contact time for all cleaning and disinfection products.
- o AVS will keep all cleaning materials secure and out of reach of children and ensure that there is adequate ventilation when using these products to keep children and staff from inhaling toxic fumes.
- o AVS will use products approved for use against COVID-19 on the <u>Environmental</u> <u>Protection Agency (EPA)-approved list</u> and train workers on chemical hazards, product instructions, ventilation requirements, Cal/OSHA requirements, the CDPH asthma safer cleaning methods, and as required by the Healthy Schools Act, as applicable. AVS will avoid use of products containing peroxyacetic (peracetic) acid, sodium hypochlorite (bleach), or quaternary ammonium compounds.
- o AVS will do thorough cleaning when children are not present. When cleaning, AVS will air out the space before children arrive. If using airconditioning, AVS will use the setting that brings in outside air. and check air filters and filtration systems to ensure optimal air quality.

Section 11 - Ventilation

- o AVS will ensure proper ventilation during the school day, and will introduce fresh outdoor air as much as possible. Additionally, AVS may:
 - Adjust mechanical ventilation systems to maximize fresh (outdoor) air ventilation. Minimize or eliminate return or recirculated air.



- For mechanical ventilation systems, increasing the intake of outdoor air and minimizing recirculated air should be prioritized over increasing filter efficiency during the COVID-19 pandemic.
- o If opening windows is nor possible, or poses a safety or health risk, AVS will maximize central air filtration for HVAC systems (targeted filter rating of at least MERV 13).
- o Ensure all water systems are safe to use to minimize Legionnaire's Disease.

Section 12 - Maintain Health Operations

- o The AVS nurse will be responsible for responding to COVID-19 concerns or concerns around practices, protocols, or potential exposure. The nurse will coordinate the documentation and tracking of possible exposure, in order to notify local health officials, staff and families in a prompt and responsible manner. These persons will also serve as a liaison to SFDPH.
- o AVS will monitor staff absenteeism and have a roster of trained back-up staff where available. AVS will plan for staff absences of 5-10 days due to COVID-19 infection or exposure.
- o AVS will monitor the types of illnesses and symptoms among the students and staff to help isolate them promptly.
- o The AVS nurse will be responsible for responding to COVID-19 concerns or concerns around practices, protocols, or potential exposure. The nurse will coordinate the documentation and tracking of possible exposure, in order to notify local health officials, staff and families in a prompt and responsible manner. These persons will also serve as a liaison to SFDPH.
- o AVS will maintain communication systems that allow staff and families to self-report symptoms and receive prompt notifications of exposures and closures, while maintaining confidentiality.
- o AVS will not exclude students from in-person attendance solely because of medical conditions such as diabetes, asthma, leukemia and other malignancies, and autoimmune diseases that may put them at higher risk of severe COVID-19, but will allow the child's medical team and family to determine whether in-person attendance is safe.

<u>Section 13 – Guidance on School Closure</u>

What are the criteria for closing a school?



Individual school closure is recommended based on the number of cases, the percentage of the teacher/students/staff that are positive for COVID-19, and following consultation with the SFDPH Local Health Officer. Individual school closure may be appropriate when there are multiple cases in multiple cohorts at a school.

The Local Health Officer may also determine school closure is warranted for other reasons, including results from public health investigation or other local epidemiological data.

If a school is closed for in-person learning, when may it reopen?

Schools may typically reopen after :

- Cleaning and disinfection
- Public health investigation
- Consultation with the local public health department

<u>Section 14 – Guidance on School Response if an Individual is Suspected of Having or is</u> <u>Confirmed to have COVID-19</u>

General Requirements if an individual is suspected of being infected with COVID-19:

When staff or students become sick at school

- Staff who become sick at work must notify their supervisor and leave work as soon as they can.
- Sick students will be sent home. AVS will keep students who are waiting to be picked up in a designated isolation space and make sure that they keep their face masks on.
- When a parent or guardian arrives to pick up a student, have the student walk outside to meet them, if possible, instead of allowing the parent or guardian into the building. The parent or guardian may also have COVID-19, since children are most often infected by an unvaccinated adult in their home.

See the Quick Guide for Suspected or Confirmed COVID-19 for steps to take.

- See the <u>Sf.gov Guidance for Covid exposure</u> for what to do if someone at school tests positive for COVID-19, has symptoms of COVID-19, or has close contact to someone with COVID-19.
- Schools <u>must</u> report COVID-19 cases to SFDPH at **cases.schools@sfdph.org**, per AB 86 (2021) and California Code Title 17, section 2500, schools.
- SFDPH staff will work with schools on case management and provide input on



next steps, including isolation, quarantine, and outbreak management.

- Advise sick staff members and sick students to get tested for COVID-19 as soon as possible. Encourage family members of students and staff with symptoms of COVID-19 to get tested promptly, before they can spread infection to students and staff.
- Ensure that students, including students with disabilities, have access to instruction when out of class.
- Implement the necessary processes and protocols if the school has an outbreak, in accordance with CDPH guidelines.
- Investigate the COVID-19 illness and exposures and determine if any work-related factors could have contributed to risk of infection. Update protocols as needed to prevent further cases.
- Update protocols as needed to prevent further cases. See the <u>CDPH guidelines</u>. <u>Responding to COVID-19 in the Workplace</u>.

General Requirements if an individual tests positive for COVID-19:

- Contact the SFDPH Schools and Childcare Hub as soon as possible. Call (415) 554-2830 Press 1 for COVID-19, then press 6 for Schools, or email Schools-childcaresites@sfdph.org
- Review the SF.gov guidance document "What to do when someone has suspected or confirmed COVID 19 at <u>Sf.gov Guidance for Covid Exposure</u>
- SFDPH will provide consultation and guidance to help AVS take initial steps to identify individuals who had close contact with the person with COVID-19. Exposed individuals or their families will be notified, instructed how to get tested, and when they or their child can return to school.
- AVS will notify all school staff, families, and students that an individual in the school has had confirmed COVID-19. AVS will not disclose the identity of the person, as required by the Americans with Disabilities Act, and the Family Education Rights and Privacy Act.

Returning to school after COVID-19 symptoms, exposure, or a positive test

For CDPH criteria for children return to schools,

see: CDPH Guidance for Schools 22-23

Modified Quarantine for TK-12 Students after Close Contact to COVID-19 in School

<u>CDPH now allows students who are exposed to COVID-19 in school classrooms to continue</u> <u>attending school during quarantine, under certain conditions.</u> This is because of the low risk of



spread of COVID-19 between students in TK-12 schools, even when community levels of COVID-19 have been high, and the importance of minimizing days missed from school.

Students in TK-12 schools who are not fully vaccinated for COVID-19 and have close contact in an indoor classroom setting at school can continue to attend school during quarantine if both the student and the infected person were wearing face masks consistently and correctly during the close contact.

This "modified quarantine" applies only to students who were exposed to COVID-19 in school. It does not apply to students who were exposed to COVID-19 at home, outside of school, or during extracurricular activities like school sports.

To attend school during quarantine, the student must:

- Continue to wear a face mask in school
- Get tested for COVID-19 twice a week, and

Remain free of any COVID-19 symptoms during this time

Resources

California Department of Public Health (CDPH)

- State of California Safe Schools for All Hub <u>https://schools.covid19.ca.gov/</u>
- COVID-19 Public Health Guidance for K-12 Schools, 2022-23 School Year (updated 7/12/2021)

<u>https://www.cdph.ca.gov/Programs/CDPH COVID-19/K-12-Guidance-2022-23-School-Year</u>

• K-12 School-Based COVID-19 Q&A School Year 2021-22 (rev. 3/12/2022)

K-12 Schools Guidance 2021-2022 Questions & Answers- Testing- Considerations.pdf



What measures should be taken when a student, teacher or staff member has symptoms, is a contact of someone infected, or is diagnosed with COVID-19? (per CDPH rev Aug 10, 2020)

	Student or Staff with:	Action	Communication
1.	Student or Staff has COVID-19 Symptoms (e.g., fever, cough, loss of taste or smell, difficulty breathing)	 Send home Request COVID-19 test or documentation from a healthcare provider. For children with symptoms, give the family <u>"Parent Handout: Symptom and Exposure Check/Returning to School after Symptoms"</u> School/cohort remains open 	 No Action needed
2.	Student or Staff has close contact (†) with a <u>confirmed</u> COVID- 19 case	 <u>Non-vaccinated child or staff:</u> Send home with instructions to quarantine* Request COVID-19 test <u>Vaccinated child or staff:</u> Monitor for symptoms for 5 days Do not need to quarantine if no symptoms develop If new symptoms of COVID-19 develop they should be sent home with instructions to test School/cohort remains open 	 AVS will notify staff and families of children in the cohort. Optional <u>notification</u> <u>letter</u> to staff and families of children at the school or program.
3.	Student or Staff has confirmed COVID-19 case infection	 AVS will Notify the Notify the SFDPH Schools/Childcare Response Team at cases.schools@sfdph.org or (628) 217-7499 Child or Staff: Send home with instructions to isolate at home for at least 5 days after symptoms started or from time of positive test. Send unvaccinated close contacts home to quarantine* Recommend testing for close contacts need to quarantine. The remainder of a class or cohort may continue in-person activities 	 Close contacts: Inform staff and families of children who are close contacts in-person or by phone. <u>Close Contact</u> <u>Advisory-Under</u> <u>18Quarantine Instructions -</u> <u>Under 18</u>, or <u>CloseContact Advisory-Adult</u> <u>Quarantine Instructions</u> All other staff and families: <u>General Exposure</u> <u>Advisory-Under 18</u> or <u>General Exposure</u> <u>Advisory-Adult</u> Translations online at <u>sfcdcp.org/school</u> and <u>sfcdcp.org/i&q</u>

Note: Siblings across cohorts will be treated as close contacts in the case of



COVID symptoms or a confirmed COVID infection.

Quarantine summary for <u>unvaccinated</u> individuals:

TK-12 Scho	TK-12 School			
Student	Case and Contact wore masks for duration of exposure time	Modified quarantine allowing immediate return to classroom		
	Case OR Contact were unmasked for any duration during exposure	Standard 10-day quarantine with option to shorten to 7 days if a negative test obtained after day 5		
Staff	Standard 10-day quarantine with optic negative test obtained after day 5	on to shorten to 7 days if a		
Childcare and Programs for Youth and Children				
Standard 5-day quarantine with option to return to school if a negative test obtained after day 5				
*Continue to monitor for symptoms for 10 days total in all close contact scenarios				

(*) A contact is defined as a person who is <6 feet from a case for >15 minutes. In some school situations, it may be difficult to determine whether individuals have met this criterion and an entire cohort, classroom, or other group may need to be considered exposed, particularly if people have spent time together indoors.

(++) A cohort is a stable group with fixed membership that stays together for all courses and activities (e.g., lunch, recess, etc.) and avoids contact with other persons or cohorts.