COVID-19 School Guidance Checklist

January 14, 2021





Date:	

2021 COVID-19 School Guidance Checklist

Name of Local Educational Agency or Equ	ivalent:
Number of schools:	
Enrollment:`	
Address:	Phone Number:
	Email:
Date of proposed reopening:	
County:	Grade Level (check all that apply)
Current Tier:	\square TK \square 2 nd \square 5 th \square 8 th \square 11 th
(please indicate Purple, Red, Orange or	□ K □ 3 rd □ 6 th □ 9 th □ 12 th
Yellow)	□ 1st □ 4th □ 7th □ 10th
Type of LEA:	
This form and any applicable attachments website of the local educational agency (an LEA or equivalent has already opened the Purple Tier, materials must additionally officer (LHO), local County Office of Education prior to reopening.	or equivalent) prior to reopening or if for in-person instruction. For those in be submitted to your local health
The email address for submission to the Stain Purple Tier is: K12csp@cdph.ca.gov LEAs or equivalent in Counties with a case submit materials but cannot re-open a sch per 100,000 (adjusted rate) for 5 consecutions.	rate >=25/100,000 individuals can ool until the county is below 25 cases
The email address for submission to the Sto in Purple Tier is: <u>K12csp@cdph.ca.gov</u> <u>LEAs or equivalent in Counties with a case</u> <u>submit materials but cannot re-open a sch</u>	rate >=25/100,000 individuals can ool until the county is below 25 cases ve days.
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which satisfies requirements for the safe reopening of schools per CDPH <u>Guidance on Schools</u>. For those seeking to open while in the Purple Tier, these plans have also been submitted to the local health officer (LHO) and the State School Safety Team.

I confirm that reopening plan(s) address the following, consistent with guidance from the California Department of Public Health and the local health department: ☐ Stable group structures (where applicable): How students and staff will be kept in stable groups with fixed membership that stay together for all activities (e.g., instruction, lunch, recess) and minimize/avoid contact with other groups or individuals who are not part of the stable group. Please provide specific information regarding: How many students and staff will be in each planned stable, group structure? (If planning more than one type of group, what is the minimum and maximum number of students and staff in the groups?) If you have departmentalized classes, how will you organize staff and students in stable groups? If you have electives, how will you prevent or minimize in-person contact for members of different stable groups? ☐ Entrance, Egress, and Movement Within the School: How movement of students, staff, and parents will be managed to avoid close contact and/or mixing of cohorts. ☐ Face Coverings and Other Essential Protective Gear: How CDPH's face covering requirements will be satisfied and enforced for staff and students. ☐ **Health Screenings for Students and Staff:** How students and staff will be screened for symptoms of COVID-19 and how ill students or staff will be separated from others and sent home immediately. ☐ **Healthy Hygiene Practices:** The availability of handwashing stations and hand sanitizer, and how their safe and appropriate use will be promoted

and incorporated into routines for staff and students.

there is a confirmed case persons to support contact of exposed students and students and students are notification of exposed per the local health departments.	ng of Contacts: Actions that staff will take when . Confirm that the school(s) have designated staff ct tracing, such as creation and submission of lists staff to the local health department and ersons. Each school must designate a person for ent to contact about COVID-19.
for physical distancing of	students and staff.
Please provide the planne students in classrooms.	ed maximum and minimum distance between
Maximum:	_feet
	_feet. If this is less than 6 feet, please explain why in a minimum of at least 6 feet.
•	y Education: How staff will be trained and families application and enforcement of the plan.
who have symptoms of C COVID-19 will be rapidly t	nool officials will ensure that students and staff OVID-19 or have been exposed to someone with ested and what instructions they will be given ts. Below, please describe any planned periodic g cadence.
Staff asymptomatic testing differ by tier:	g cadence. Please note if testing cadence will
have symptoms of COVID COVID-19 will be rapidly t while waiting for test result asymptomatic student test	w school officials will ensure that students who 2-19 or have been exposed to someone with ested and what instructions they will be given ts. Below, please describe any planned periodic sting cadence. adence. Please note if testing cadence will differ
by tier:	addition in load the intermination of the control will differ

☐ Identification and Reporting of Cases: At all times, reporting of confirmed positive and suspected cases in students, staff and employees will be consistent with <u>Reporting Requirements</u> .
☐ Communication Plans: How the superintendent will communicate with students, staff, and parents about cases and exposures at the school, consistent with privacy requirements such as FERPA and HIPAA.
□ Consultation: (For schools not previously open) Please confirm consultation with the following groups □ Labor Organization Name of Organization(s) and Date(s) Consulted: Name: □ Date: □ Parent and Community Organizations Name of Organization(s) and Date(s) Consulted: Name: □ Date: □ Date: □ Date: □ Date: □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □
For Local Educational Agencies (LEAs or equivalent) in PURPLE: Local Health Officer Approval: The Local Health Officer, for (state County)
County) County has certified and approved the CSP on this date: If more than 7 business days have passed since the submission without input from the LHO, the CSP shall be deemed approved.
Additional Resources:

<u>Ac</u>

Guidance on Schools Safe Schools for All Hub