Phase Two Guidance

During Phase Two, Schools may reopen. This guidance will be in effect until we are able to better assess the impact of opening schools on the spread of COVID-19, so progression may happen independently of the District’s reopening phases. When schools reopen, the following measures should be implemented in order to help reduce the risk of COVID-19 transmission among students and staff. For additional information, visit coronavirus.dc.gov/phasetwo.

Support Safety of Employees and Students

Daily Health Screening

- Schools should perform a daily health screen for all students and staff entering the building. An individual with any of the following symptoms should not enter the school, and instead they should isolate immediately and call their healthcare provider:
  - Fever (subjective or 100.4 degrees Fahrenheit) or chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion, nausea or vomiting, diarrhea, or otherwise feeling unwell.
  - Symptoms can be evaluated before arrival (via phone or app), or upon arrival and can be based on report from caregivers.
  - If a student or staff member develops any of the symptoms above during the course of the school day, the school should have a process in place that allows them to isolate until it is safe to go home, and seek healthcare provider guidance.

Encourage Healthy Practices

- Ensure adequate supplies (e.g., soap, paper towels, hand sanitizer, tissue) to support healthy hygiene practices.
- Ensure handwashing strategies include washing with soap and water for at least 20 seconds. 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.
- Perform frequent hand hygiene (with soap and water or alcohol-based hand sanitizer).
  - Key times to perform hand hygiene include
    - Before eating food,
    - After using the toilet,
    - Before and after putting on, touching, or removing cloth face coverings or touching your face,
    - After blowing your nose, coughing, or sneezing.

High-Risk Individuals

Students and staff at high-risk for experiencing severe illness due to COVID-19 are recommended to consult with their medical provider before attending in-person activities. This includes, but not limited to:

- Chronic Lung Disease,
- Moderate to severe Asthma,
- Serious heart conditions,
• Immunocompromised conditions,
• Severe obesity (>40 Body Mass Index),
• Diabetes,
• Chronic Kidney Disease, and/or
• Liver Disease
• People 65 years and older
• Any child or staff member who has a medical condition not on this list, but is still concerned about their safety.

Preventing a Vaccine-Preventable Disease Outbreak
According to the Centers for Disease Control and Prevention (CDC) and DC Health data, the COVID-19 pandemic has resulted in a significant reduction in childhood vaccine administrations across the country including the District of Columbia and Maryland.

In order to prevent a vaccine preventable disease outbreak in a school setting, it is imperative for all students who attend in-person activities be fully vaccinated according to CDC and DC Health standards.

• Ensure a policy is in place for reviewing of immunization status of children, provision of reminders to parents, timelines for compliance, and exclusion of children who do not meet requirements.
• A review of immunizations can be found here.
• CDC has other resources regarding Vaccine-Preventable Diseases.

Implement Controls to Limit Contact
Non-Medical Face Coverings (Face Masks)
• All adults should wear non-medical face coverings or face masks at all times while at school. If an adult has a contraindication to wearing a face covering, either medical or otherwise, then that individual should not participate in in-person school activities (if feasible).
• If possible, students are highly encouraged to wear face coverings. Medical, developmental, and psychological reasons may limit the ability for some students to wear face coverings. Older children and adolescents may have less difficulty wearing a face covering compared to younger children.

For more information about non-medical face coverings or face masks, please refer to the guidance “Guidance about Masks and Other Face Coverings for the General Public” on coronavirus.dc.gov.

Social Distancing
Schools should ensure appropriate physical distancing by having:
• No more than 12 total individuals clustered in one class,
  o One additional staff (13 total individuals) can be briefly added to the class if necessary to support individual student needs.
• Pauses integrated into the schedule (alternating week schedules) to interrupt possible chains of transmission,
• Six feet of distance between each individual,
• Grouping the same students and staff together each day and throughout the day (as opposed to rotating teachers or children),
• Limiting non-essential visitors,
• No mixing between groups to include entry and exit of the building, at meal time, in the rest room, on the playground, in the hallway, and other shared spaces,
• No large group activities and activities requiring children to sit or stand in close proximity,
• Cancel activities and events such as field trips, student assemblies, athletic events or practices, special performances, school-wide parent meetings,
• Cancel or modify classes where students are likely to be in very close contact (i.e. choir class),
• 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),
• Allow students to eat lunch and breakfast in their classrooms rather than mixing in the cafeteria. If not possible, then stagger lunch by class and/or segregate lunch and recess area by class.
• Stagger arrival and/or dismissal times,
• Reduce congestion in the health office,
• Teach staff, students, and their families to maintain distance from each other in the school,
• Educate staff, students, and their families on COVID-19 and social distancing.

Potential Exposures and Positive COVID-19 Cases
• If any student or staff member has been in close contact with a person who is positive for COVID-19, then the student or staff member should not enter the school until evaluated by their healthcare provider, or have completed their quarantine period without becoming symptomatic or diagnosed with COVID-19.

• If any student or staff member has been in close contact with a person who is awaiting a COVID-19 test result, then the student or staff member should not enter the school until the close contact tests negative. If the close contact tests positive, then they should seek guidance from their healthcare provider or DC Health.

In the event that a school identifies a student or staff member who has tested COVID-19 positive, it is important for the school to establish a plan for COVID-19 exposures.

• Identify a point of contact at the school that an employee can notify if they test positive for COVID-19 and choose to disclose this information.
• Staff or students diagnosed with COVID-19 should not enter the school until they have been cleared from isolation.
• Schools should notify DC Health by emailing coronavirus@dc.gov with the following information:
  • “COVID-19 Consult” in the email subject line
  • Name and direct phone number of the best point of contact for DC Health to return the call
  • Short summary of incident/situation
• An investigator from DC Health will follow-up within 24 hours to all appropriately submitted
In consultation with DC Health, schools should have a notification process in place to share the following with staff and parents:

- Education about COVID-19, including the signs and symptoms of COVID-19
- Referral to the Guidance for Contacts of a Person Confirmed to have COVID-19, available at https://coronavirus.dc.gov
- DC Health will instruct schools on dismissals and other safety precautions in the event a known COVID-19 individual came in close contact with others at school.

### Cleaning and Disinfecting

All schools should regularly clean, disinfect and sanitize surfaces, and materials per District guidance on cleaning and disinfecting.

- Routinely clean and disinfect surfaces and objects that are frequently touched. 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.
- For all cleaning, sanitizing, and disinfecting products, follow the manufacturer’s instructions for concentration, application method, contact time, and drying time prior to use by a child. See CDC’s guidance for safe and correct application of disinfectants.

### Building Considerations

Schools that are reopening after a prolonged facility shutdown should ensure all ventilation and water systems and features (e.g. sink faucets, drinking fountains, decorative fountains) are safe to use as follows:

- Ensure ventilation systems operate properly and increase circulation of outdoor air as much as possible, for example by opening windows and doors. Increase in air circulation should be continued after reopening where safe and possible. Do not open windows and doors if doing so poses a safety or health risk (e.g., risk of falling, triggering asthma symptoms) to children using the facility.
- Flush water systems to clear out stagnant water and replace it with fresh water. This will remove any metals (e.g. lead) that may have leached in to the water and minimize the risk of Legionnaires’ disease and other diseases associated with water.
  - Further details on steps for this process can be found on the CDC website at https://www.cdc.gov/coronavirus/2019-ncov/php/building-water-system.html.

The guidelines above will continue to be updated as the outbreak evolves. Please visit https://coronavirus.dc.gov/ regularly for the most current information.