

Reopening Plan

Sagaponack Common School District

2020-21 School Year

(Please Note: Changes in the public health situation over the course of the school year may necessitate changes to this guidance.)

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REOPENING PLAN FOR THE SAGAPONACK COMMON SCHOOL DISTRICT

I. Our Little Red School House

The Sagaponack School is one of the last remaining one-room school houses in New York State. Although our facility is small in size, we offer a full instructional program for children in grades K-3. Last year our student enrollment totaled 15 students across those four grade levels. We offer our families the opportunity for their pre-school children to attend one of two area pre-school programs. When our students complete 3rd grade, they are then able to select from one of three area school districts to continue their education through graduation at the end of 12th grade.

This plan includes the above information so that the reader may gain a better understanding of who we are and how we plan to address the challenges that have been brought on by the Novel Corona Virus (COVID-19). To say that we are unique would be an understatement. While being small can be a positive, it can also expose many additional challenges that larger school districts are in a better position to handle.

However, as we approach the 2020-21 school year, we are confident that we can make the necessary adjustments so our students can succeed in this ever-changing environment. We met last year's challenges with a high degree of success as our staff quickly moved to a virtual model when the governor's order was issued to close schools across the state in mid-March. We lost little time in moving to an instructional model that featured real-time instruction via SKYPE software. Our parents stepped up as well, working with their children to ensure that homework and assignments were completed. We did it then, and we truly believe that we can do this now.

II. The Role of Our Shared Decision-Making Committee (SDMC)

The SDMC is comprised of two teachers, a parent of a resident student, a parent of a non-resident student, a member of the community, and the superintendent/principal. One of the key functions of the SDMC is to serve as a communicator, a voice for the

constituents they represent. To this point, the members of the SDMC have reviewed this document and have added their comments and suggestions as they framed their work with their constituents kept in mind. This Reopening Plan will be approved by the Sagaponack Board of Trustees at their next regularly scheduled Board meeting.

III. Designated COVID-19 Coordinator

Superintendent/Principal: The Superintendent/Principal of Sagaponack School will serve as the coordinator of the reopening plan with assistance from the Secretary to the Superintendent/District Clerk.

IV. Communication Plan (Information to be posted in other languages as necessary.)

A. **District Website:** Once this plan is completed and submitted to NYSED for approval, it will be posted on the district's website.

B. **Remind Me App:** Over the years, we have successfully used the Remind Me App to notify parents and staff of emergency school closings, school events, etc. This useful and reliable App will continue to be used as we work through the coming school year.

C. **Emails:** The use of emails has been a dependable method for us to provide detailed messages and information to our parents. This will continue.

D. **Building Signage:** (See Appendix A)

1. Topics to include:

- a. Hand hygiene
- b. Social distancing
- c. Wearing proper face coverings/masks
- d. Respiratory hygiene
- e. Use of PPE (personal protective equipment)

V. Training for Both Staff and Students

A. Staff will participate in professional development that addresses the following topics:

1. **Hand Hygiene:** Teach and reinforce handwashing with soap and water for at least 20 seconds. Increase monitoring as needed to ensure adherence among students and staff

2. **Social Distancing:** Maintain at least six feet apart; wear a mask if less than six feet.
3. **Wearing Proper Face Coverings/Masks:** Surgical style masks of cloth coverings are acceptable. Must cover both the nose and the mouth. In some cases, a face shield that also has a mask attached to it may be used so that students can “see the teacher talking” to them. This is important for use in a related services class-Speech/Language. Department of Health guidance states the following: “Face coverings are strongly recommended at all times, except for meals and instruction with appropriate social distancing.”
4. **Respiratory Hygiene:** Encourage staff and students to cover coughs and sneezes with tissues or the corner of an elbow. Used tissues should be thrown in the trash and hands washed immediately with soap and water for at least 20 seconds. If soap and water are not readily available, the use of a hand sanitizer that contains at least 60% alcohol may be used.
5. **Signs of the Illness:** Symptoms associated with the COVID-19 are as follows:
 - Most Common:
 - Fever, dry cough, tiredness
 - Less Common:
 - Aches and pains, sore throat, diarrhea, conjunctivitis, headache, loss of taste and smell, rash on skin, or discoloration of fingers or toes
 - Serious:
 - Difficulty breathing or shortness of breath, chest pain or pressure, loss of speech or movement
- B. Students will receive regular instruction in the above topics as well. (See Appendix B: Signs of Illness)

VI. School Building Capacity

- A. Square Footage of Classrooms at the Sagaponack School
 1. When the partition is in the open position and we measure from wall to wall, the open space totals approximately 1,350 sq ft.

2. Social distancing requires six feet between each other and the wearing of a mask when this distance of six feet cannot be maintained.

VII. Enrollment Projections

- A. When the 2019-20 school year closed in June, our enrollment total was 15 students.
- B. At the same time, we projected that our enrollment for the 2020-21 school year would be 12 students.
- C. As of July 27, 2020, our potential enrollment was 35.

VIII. We May Need Additional Space

- A. With a potential enrollment of 35 students and the addition of 5-8 staff members on a daily basis, we have concluded that providing instruction for all at one time in the Sagaponack School building will not successfully meet social distancing requirements. To prepare for this possibility, we have met with architects to review the requirements for using off-site space as classrooms. We have also investigated several locations within the area that have available space. However, if the enrollment does not increase as projected, our Little Red School House may be able to meet these requirements.

IX. Three Instructional Formats for our Continuity for Learning Program

- A. Whichever format is used, the teaching staff will continue to follow the approved NYS Learning Standards across the curriculum areas.
 1. **In-Person:** This is the program that existed before schools were ordered closed by Governor Andrew Cuomo in mid-March due to COVID-19. Depending upon actual enrollment, this program could be offered in the Little Red School House as we have known it to be over the years, or in an alternate site. If enrollment increases and we are able to locate a space that meets State Education requirements, then our K and 1st grade students and the teacher of record, along with a teacher aid will remain in the Sagaponack School for in-person instruction every day. They will follow the regular daily program, complete with special area subjects (art, music, technology, physical education and Spanish). Concurrently, our 2nd and 3rd grade students along with the teacher of record

and the teacher aid and student aide, will be moved to the new space. They, as well, will follow the regular daily program, complete with special area subjects (art, music, technology, physical education, and Spanish).

2. **Hybrid:** If enrollment does not permit social distancing and our search for additional space is not successful, we will remain in the Sagaponack School and adopt a hybrid format. The two hybrid models include:
 - a. A/B Days just for kindergarten students. The Kindergarten enrollment will be divided into two groups. First group will come to the school on all A Days and participate in in-person instruction while the second group stays at home. On all B Days, the other group of Kindergarten students will come to school and participate in instruction while the first group stays at home. No virtual activity will take place when the groups are not in school. Special area subjects will be scheduled accordingly. Regular full days for grades 1-3.
 - b. A/B Days for all grades. A special calendar will be developed that will identify A/B Days for each week of the school year. On an A Day, the K-1 grades will be receiving in-person instruction at the school while grades 2-3 will participate in “live” virtual instruction at home. On a B Day, grades 2-3 will be receiving in-person instruction at the school while grades K-1 will participate in “live” virtual instruction at home. We will continue to use SKYPE as our platform for “live” virtual instruction. Special area subject teachers will be scheduled both in real time and virtually. Students can expect substantive interaction with their teachers when receiving instruction in a virtual format.
3. **Virtual:** If we are directed to close our school due to an increase in the COVID-19 infection rate, we will move to an all virtual instruction model. As stated previously, we were very successful using SKYPE to deliver instruction for our students when the schools were closed by the governor through an executive order in mid-March. We are confident that we can resume using this model if directed to close once again. We learned from our work with this model and will look to make adjustments accordingly. Finally,

students can expect substantive daily interaction with their teachers when receiving instruction in a virtual format.

X. Staffing and Human Resources

- A. **Classroom Teachers:** We realize that if our enrollment continues to grow, the need to add classroom teachers may become a reality. However, at this time, we are not in a position to take this action.

XI. Transportation

- A. **Inter Municipal Agreement:** Our student transportation is provided through an Inter Municipal Agreement (IMA) with the Sag Harbor UFSD. They handle our in-district transportation, transportation to our receiving schools and parochial/private school transportation. We do not hold before or after school co-curricular activities.
- B. The following represents various protocols that the Sag Harbor transportation department will follow during the 2020-21 school year as per their Reopening Plan:
1. **Routing to Ensure Social Distancing:** One of the primary areas of focus is ensuring students and staff can socially distance while on the bus. This may require re-routing the bus routes and adding additional bus stops.
 2. **Personal Protective Equipment:** Drivers will wear face coverings while on duty.
 3. **Sanitizing School Buses:** Disinfectant wipes will be provided to each bus so that they can be wiped down during and between bus runs. The buses will also be equipped with gloves, sanitation spray, and towels for deep cleaning after each morning and afternoon run.
 4. **Social Distancing and Personal Protective Equipment:** Students will be instructed and reminded of the proper use of face coverings and social distancing on school buses. Students will be encouraged to bring their own face covering. However, if they forget their face covering, the bus monitor will give the child(ren) a face covering. Students will be assigned seats in order to maintain social distancing. Assignments will be limited to one per seat unless a sibling is riding the bus to and from school.

XII. Arrival Protocols for Staff

- A. **Protocols:** Before leaving for school each morning, each staff member should take their own temperature. If their temperature is 100 degrees F or higher, they should not come to school that day, monitor their health throughout the day, and consult their healthcare provider as necessary.
- B. If their temperature is below 100 degrees F, the individual, upon arrival at school, will complete the following health screening on a daily basis responding to the following attestations:
 - 1. I am feeling healthy and well today.
 - 2. Within the last 14 days, I have not been in close contact with anyone who has been diagnosed with COVID-19.
 - 3. Within the last 14 days, I have not tested positive for COVID-19, nor have I been diagnosed as COVID-19 positive by a healthcare provider.
 - 4. I am not presently required to quarantine due to New York State travel advisories.
- C. If a staff member cannot attest positively to **all** of these statements, they should leave school, return home, and consult with their healthcare provider.
- D. As an added step in our arrival protocol, each staff member will have their temperature scanned. If the temperature is 100 degrees F or above, the individual will be directed to a designated area of the school, settle in, and wait for a second temp check to be administered within the hour. If after the second temp check the temperature is still at 100 degrees F or above, the individual will be directed to return to their home and consult with a healthcare provider as necessary.
- E. Each staff member will enter their information onto a weekly log. (The actual temperature will not be recorded.) (See Appendix C: Temp Check/Screening Log for Staff)

XIII. Arrival Protocols for Parents/Visitors/Vendors/Guests

All parents, visitors, vendors, and guests will follow the same protocols as indicated in Section XII. upon arrival at the school. Access to the school will be on a limited basis. Deliveries should be dropped off in a box left on the porch outside of the secretary's office. The secretary will retrieve the item once the person has left the area.

XIV. Arrival and Dismissal Protocols for Students

A. Arrival Protocols

1. Prior to leaving for school each morning, parents will conduct a temp-check of their children. If the temperature is 100 degrees F or above, the child should not come to school that morning. Essentially, if a child is not feeling well, parents should not send them to school and should consult with their healthcare provider as necessary.
2. As an added step, prior to exiting the school bus or their family vehicle each morning, children will participate in a temp check procedure. If a temperature is 100 degrees F or above, the child will be directed to a designated area of the school where they can settle in and have a second Temp Check administered within the hour. If the temperature is still 100 degrees F or above, the child's parents will be contacted and directed to come to the school to take their child home and consult with their healthcare provider as necessary.
3. A daily log will be kept. (The actual temperature will not be recorded.) (See Appendix D: Daily Temp Check Log for Students)
4. Once a child clears the temp check procedure, they will line up according to the lines/markings on the concrete sidewalk into the school and onto the school floor representing proper social distancing. Each child will then move one spot forward on the line until they reach the area where backpacks are kept, then on to their respective desks.
5. At the start of each week, parents will receive an email from the school and will be asked to attest to the following regarding their child:
 - a. Within the last 14 days, your child has not been in close contact with anyone who has been diagnosed with COVID-19.
 - b. Within the last 14 days, your child has not tested positive for COVID-19 nor has he/she been diagnosed as COVID-19 positive by a healthcare provider.

- c. Your child is not presently required to quarantine due to New York State travel advisories.
- 6. If a parent cannot positively attest to all of the above statements, then their child should not attend school; they should stay home and consult their healthcare provider. (See Appendix E: Weekly Parent Log)
- B. **Dismissal Protocols:** Teachers will organize dismissal using social distancing lines/markings as students prepare to exit the school and onto buses or to parents' vehicles.
- C. **Staggered Arrival and Dismissal Times:** We are currently exploring the possibility of staggering arrival and dismissal times. This will depend on the availability of buses and subsequent bus routes as we work with our transportation provider to address this possibility.

XV. Snacks and Lunch

- A. **Lunch Program:** We do not operate a lunch program, nor do we have students who are eligible for free and reduced-priced meals. Students bring food items from home as we do schedule daily snack and lunch times. All snack and lunch activities will take place either at individual student desks or at tables where appropriate barriers will be used.
- B. **Food Allergies:** Over the years, we have had experience with children who have food allergies. We will continue to accommodate these students as we are informed of their respective allergies.
- C. **No Sharing of Food:** This will be a major theme as well. It's a topic that will be on the staff's professional development agenda as well as regular reinforcement with students.
- D. **Hand-Washing Hygiene:** Proper hand-washing hygiene will be the subject of training for staff and students alike. At various times during the school day, staff will direct students to line up as per social distancing floor markings and await their turn at the sink to properly wash their hands. An extra focus will be placed on this activity because it has been identified as one of the most important ways to address the potential impact of COVID-19, along with social distancing and facial coverings/masks.

XVI. Recess

- A. Recess will be scheduled at various times during the school day. Whenever possible, recess will take place outside so that students and staff will be able to enjoy the fresh air. When scheduled, selected students will be directed by staff to first access their coats (if needed) and then line up on the social distancing floor markings. Students and staff will be wearing their masks while they are in line and moving outside. Once outside, a mask break will take place during which students will be able to remove their masks and access various playground equipment while also staying six feet apart from other students.
- B. During inclement weather, when going outside is not an option, staff will make various activities available for student participation. The use of barriers, face coverings/masks, and social distancing requirements will be followed.

XVII. Social-Emotional Well-Being

- A. **Guidance Plan and BOCES:** Last school year we implemented our state-mandated guidance plan. In addition to the various social emotional learning (SEL) activities that our staff implemented with our students, a certified guidance counselor visited with us to conduct SEL type activities. Several of these activities were conducted during the school closure period via SKYPE. We have contracted with BOCES once again to provide these activities during 2020-21.
- B. **Part-Time Psychologist:** We have been fortunate to secure the services of a certified part-time psychologist who assists us with meeting the needs of students who experience social-emotional issues. We are pleased that he will continue his relationship with us for the 2020-21 school year.
- C. **Professional Development:** We will once again schedule Superintendent Conference Days during the course of the school year. This year our first Superintendent Conference Day will be devoted to the implementation of our Reopening Plan and making adjustments as necessary.
- D. **Employees Assistance Program:** We contract with Eastern Suffolk BOCES to provide mental health referral services for our staff and their families. In the event that a staff member begins to experience

challenges with the job, family, etc., the EAP program is available to them and their immediate family.

XVIII. Teaching and Learning

- A. We will be sure to provide clear opportunities for equitable instruction for all our students.
- B. We will continue to follow the approved NYS Learning Standards across all curriculum areas.
- C. If we are implementing the hybrid or virtual instructional model, we will ensure to deliver substantive daily interaction between teachers and students.
- D. We will communicate our plans for teaching and learning with all parents/guardians.

XIX. Personal Protection Equipment (PPE) and other Equipment

- A. **Masks:** We will encourage parents to send their children into school with their own mask, or face covering. We will have a supply of child-sized masks to distribute as needed.
- B. **Barriers:** We plan to acquire polycarbonate/acrylic dividers that will be positioned on individual student desks and table tops.
- C. **Temp Check Station:** During arrival of students and staff, we will use a scan thermometer to assess individual temperatures. The person who administers this test will stand behind a barrier made of polycarbonate/acrylic material and reach around to scan each individual.
- D. **Face Shields with a Mask Attached:** Considering that we are working with a very young age group, we appreciate the need for children to see how we speak and how our lips move. With this in mind, we have identified a manufacturer that has designed a face shield that has a surgical mask connected to it that permits the child to “see” his/her teacher speak. We have an interest in this product and look forward to utilizing it with our children.
- E. **Disposable Gloves:** We will have a supply of these available for use as needed.

XX. Attendance/Chronic Absenteeism

- A. **Expectations for Student Attendance:** Our expectations for students to be “in school” following one of the three instructional models is no different than any other school year. We spend a great deal of time emphasizing the importance of being in attendance each and every day and work with our parents to realize this expectation.
- B. **Monitoring Student Attendance:** If a student begins to demonstrate signs of chronic absenteeism, we will contact the parents and work with them to improve the situation.

XXI. Accommodations for High-Risk Students

- A. **Response to Intervention (RtI):** We have developed and implemented a very effective RtI program. The progress of each student academically, emotionally, and physically is regularly reviewed and monitored throughout the school year. The need to move students to Tier II and Tier III is discussed and acted upon as needed. We will continue to use our RtI program to identify and assist students who display high-risk behaviors and/or academic challenges.

XXII. Technology and Connectivity

- 1. **Connectivity:** During the first few weeks of school, we will need to ascertain the level of connectivity that our students and their families have in their homes. If some families are lacking internet connections, then we will work to ensure that this is addressed. Once accomplished, we will move to implement our 1:1 initiative.
- 2. **Chromebooks:** During the last month of the school year, we were fortunate to receive a donation of 30 Chromebooks from a local supporter. When we couple these Chromebooks with the Chromebooks that we already have in our school, our intention will be to create a 1:1 initiative. We will issue a Chromebook to each student to keep at home and they will also have use of a Chromebook in the school. This will support the use of the same hardware in the home as in the school, creating a seamless opportunity for instruction to flow between the school and the home. Assignments, activities, and projects started in school can be worked on at home as the Chromebook remains constant. This will

bode well if and when we may need to move to a hybrid or a virtual instructional model.

XXIII. Special Education

1. **The Benefits of a Small School:** Both of our classroom teachers are certified as elementary and special education teachers. As a result, our students benefit from working with teachers who have developed multiple skills in meeting the individual needs of children.
2. **Response to Intervention (Rtl):** To classify a student for special education services, a school district must demonstrate that a child has worked through the Rtl process. As mentioned in Section XXI. A., we have developed and implemented this required step in the classification process for special education services. We will continue to use our Rtl program to identify and assist students who display high-risk behaviors and/or academic challenges.

XXIV. English Language Learners

1. **Contract for Services:** Over the years, we have not had many students qualify for ENL/ESL services. Going forward, if we do, we will continue to follow all requirements as detailed in Part 154 of the Commissioner's Regulations. In addition, when needed, we contract for these services from neighboring school districts.
2. **Growing One of Our Own:** Again, reflective of being a small school, one of our classroom teachers is starting to work on her TESOL certification (Teaching English as a Second Language). We are extremely supportive of this individual's desire to complete the required coursework and look forward to her many contributions to our students as she begins her studies.

XXV. Teacher and Principal Evaluation

1. Annual Professional Performance Review (APPR)
 - a. **Teachers:** Over the years, we have developed a format that supports teacher reflection of the 22 essential components of the Danielson Model. Our intention is to follow our approved APPR plan for the 2020-21 school year.
 - b. **Principal:** We have been successful in contracting with ES BOCES to bring a certified principal evaluator to our school

to work with our principal through the Multi-Dimensional leadership rubric. Our plans will be to continue this arrangement.

- c. **Evaluation in a Fully Virtual Model:** We will need to develop protocols for conducting formal observations/visits of our teachers and our principal if/when we operate virtually.

XXVI. Teacher Certification

All members of the Sagaponack instructional staff hold valid and appropriate NYS certifications. We will continue our efforts to ensure that only highly-qualified individuals are working in our classrooms.

XXVII. Additional Health and Safety Items

- A. **Signs of the Illness:** The signs of the illness associated with the CoVid-19 Corona Virus are as follows (See Appendix B: Signs of Illness):

Most Common:

Fever, dry cough, tiredness

Less Common:

Aches and pains, sore throat, diarrhea, conjunctivitis, headache, loss of taste and smell, rash on skin, or discoloration of fingers or toes

Serious:

Difficulty breathing or shortness of breath, chest pain or pressure, loss of speech or movement

- B. Quarantine, Isolation and Return to School

1. Any student or staff member who is presenting with COVID-19 exposure or symptoms will be sent home with instructions to contact their healthcare provider for assessment and testing. (A student will be placed in the isolation area and wait for a parent to pick them up. Parents will be advised to contact their healthcare provider for assessment and testing.)
2. The designated COVID-19 coordinator will contact the Suffolk County Department of Health (Dial 311) of suspected and confirmed cases if diagnostic tests results are positive for COVID-19.

3. A contact tracing log will be initiated as necessary. (See Appendix F: Contact Tracing Log)
4. According to CDC guidance, any staff member who is suspected to have close contact with someone who tests positive for COVID-19 should consider the following information:
 - a. Watch for fever of 100 degrees, cough, shortness of breath, or other symptoms of COVID-19.
 - b. If possible, stay away from others, especially people who are at higher risk for getting very sick from COVID-19.
 - c. Consult your healthcare provider if these symptoms persist.
 - d. Parents of students should follow the same guidance if symptoms persist with their children.
5. What constitutes close contact?
 - a. You are within six feet of someone who has COVID-19 for at least 15 minutes.
 - b. You provided care at home to someone who is sick with COVID-19.
 - c. You had direct physical contact with the person (touched, hugged, or kissed them.)
 - d. They sneezed, coughed, or somehow got respiratory droplets on you.
6. If a staff member or student tests positive for COVID-19, regardless of whether they are symptomatic or asymptomatic, they may return to school upon completing at least 10 days of isolation from the onset of symptoms or 10 days of isolation after the first positive test if they remain asymptomatic.
7. If a staff member or student has had close or proximate contact with a person with COVID-19 for a prolonged period of time AND is experiencing COVID-19 related symptoms, the staff member or student may return to school upon completing at least 10 days of isolation from the onset of the symptoms.
8. If a staff member or student has had close or proximate contact with a person with COVID-19 for a prolonged period of time AND is not experiencing COVID-19 related symptoms, the staff member or student may return to school upon completing 14 days of self-quarantine.

9. If a student or staff member reports that they are positive for COVID-19, the Suffolk County Department of Health will advise who should also be notified, etc. (Call 311)

10. In all cases, to return to school, the staff member or student will need a note from their healthcare provider indicating that they are, in fact, cleared to return to school.

(*Above information taken from the NYS Department of Health: "Interim Guidance for Public and Private Employees Returning to Work Following COVID-19 Infection or Exposure": See Appendix G)

C. Proper Ventilation

1. In addition to the mechanical HVAC systems, whenever possible, windows throughout the school will be opened slightly to encourage additional circulation of fresh air.

2. We are looking into the purchase of a mechanical upgrade to our HVAC system to include HEPA filtration and a UV light source.

D. Emergency Drills (Fire and Lockdowns): All existing safety/emergency drills will continue with social distancing and PPE protocols in place.

XXVIII. Cleaning and Sanitizing

A. **Cleaning of High-Touch Areas:** Staff will be encouraged to wear disposable gloves at various times during the day in order to use disinfectant wipes on high-touch areas. These include but are not limited to door knobs, desk/table tops, door push bars, etc.

B. Protocols for Cleaning and Disinfecting Schools:

1. Our custodian will use cleaning/disinfectant products that have been designed to be effective against the spread of COVID-19.

2. Each night, our custodian will conduct a cleaning protocol that will include all high-touch items/areas as well as a thorough cleaning/disinfectant of both restrooms. In addition, all floors will be either mopped with a cleaning/disinfectant product or vacuumed with a vacuum cleaner equipped with a HEPA filter.

3. On each weekend, the custodian will conduct a deep interior cleaning of the school. (See Appendix H: Daily Cleaning and Sanitizing Chart and See Appendix I: Safe Schools Program)

- C. **Hand Sanitizers:** Research has concluded that washing hands with soap and water for 20 seconds is the best way to carry out the protocol for proper hand hygiene. When this is not feasible, hand sanitizer units will be available in the school.
- D. **Playground Equipment:** The CDC recommends normal routine cleaning of playgrounds while disinfection is not required.
- E. **Physical Education Equipment:** Physical Education equipment will be cleaned in a similar manner prior to use.

XXIX. Before and/or After School Child Care Needs

- A. **Ascertain the Need:** Of the parents/families that we worked with last year, none expressed the need for child care. With the potential of a high number of new parents, the need for child care will be assessed once again.
- B. **Vendor:** If the need arises, we will direct our parents to contact the Eleanor Whitmore Early Childhood Center, located in East Hampton for possible enrollment.

XXX. Practicing What We Know to Be Effective (As per the New York State American Academy of Pediatrics/Chapter 2 Representing 1500 Pediatricians From Suffolk, Nassau, Brooklyn, and Queens (See Appendix J.):

- 1. **Wear a Mask:** All children and adults in the school should be required to wear masks at all times except when masking would endanger breathing or mental health. Periodic “mask breaks” should be scheduled during the course of the school day.
- 2. **Maintain Distancing:** Consistent with New York State guidance, students, staff and teachers should maintain six feet of social distancing, whenever possible, to reduce viral spread.
- 3. **Hand Hygiene:** Opportunities for proper hand washing and/or hand sanitizing should be taken throughout the school day. Guidelines for hand washing should include washing for at least 20 seconds.
- 4. **Symptom Isolation:** Importance should be given to advising all students, staff, and teachers to stay home if exhibiting any symptoms of illness, especially fever. Parents should be aware of keeping children home from school in the presence of any

symptoms as per the list found in Appendix B. Those who exhibit symptoms while at school should be isolated, go home, and consult their healthcare provider.

XXXI. Implementation Plan...Phase I, II, III and IV

1. **Rationale:** In New York State we have eased our way back into full operation. Barber shops, hair salons, mom and pop stores and the like have carefully reopened with a purpose. Following this lead, we believe that we should be easing our way back into school through four phases. During each of these phases we will develop, implement and practice all required protocols.
2. **Phase I:** The first week of school, September 9-11, will be reduced days ending after two and a half hours. (8:00 to 10:30 a.m.)
3. **Phase II:** The second week of school, September 14-18, will be reduced days ending after three and a half hours, inclusive of snack. (8:00 to 11:30 a.m.)
4. **Phase III:** The third week of school, September 21-25, will be reduced days ending after four and a half hours, inclusive of lunch. (8:00 to 12:30)
5. **Phase IV:** The fourth week of school, September 28 to October 2, will be full days, inclusive of all special area subjects. (8:00 to 2:30 p.m.)

XXXII. Making Adjustments and Modifications Along the Way

We all recognize that addressing the impact of the COVID-19 is a work in progress. Changes in medical research; adjustments to procedural protocols, directives from the governor's office, the New York State Education Department, the Department of Health, and the Centers for Disease Control can be expected as we implement our reopening plans. Patience, flexibility, and understanding will be the keys to our success in the long run. We look forward to working together to ensure children are safe and that effective learning takes place, whether we are using an in-person, hybrid, or virtual instructional model. Please feel free to contact us with your questions or concerns. Stay safe and be well.

Appendices:

Appendix A: Signage

Appendix B: Signs of Illness

Appendix C: Daily Attestation Sheet/Temp Check Log for Staff/
Parents/Visitors/Vendors/Guests

Appendix D: Daily Temp Check Log for Students

Appendix E: 3 Questions for Parents/Weekly

Appendix F: Contact Tracing Log

Appendix G: DOH Interim Guidance on Returning to Work/School

Appendix H: Daily Cleaning and Sanitizing Chart

Appendix I: Safe Schools Program (Cleaning and
Disinfecting Protocols)

Appendix J: NYS American Academy of Pediatrics

How to Wear Cloth Face Coverings

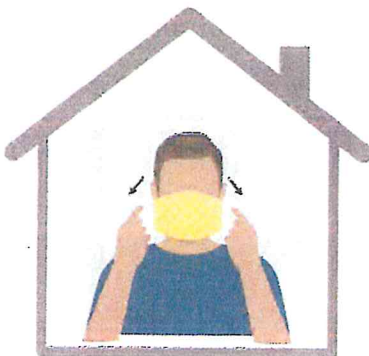
Wear your Face Covering Correctly

- Wash your hands before putting on your face covering
- Put it over your nose and mouth and secure it under your chin
- Try to fit it snugly against the sides of your face
- Make sure you can breathe easily



Use the Face Covering to Protect Others

- Wear a face covering to help protect others in case you're infected but don't have symptoms
- Wear the covering in public settings when around people outside of your household, especially when other [social distancing](#) measures are difficult to maintain
- Don't put the covering around your neck or up on your forehead
- Don't touch the face covering, and, if you do, wash your hands



Take Off Your Cloth Face Covering Carefully, When You're Home

- Untie the strings behind your head or stretch the ear loops
- Handle only by the ear loops or ties
- Fold outside corners together
- Place covering in the washing machine (learn more about [how to wash cloth face coverings](#))
- Be careful not to touch your eyes, nose, and mouth when removing and wash hands immediately after removing.

Handwashing Techniques

HAND WASHING STEPS

1



RINSE

2



SOAP

3



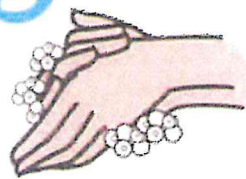
SCRUB
5 SECONDS

4



SCRUB
5 SECONDS

5



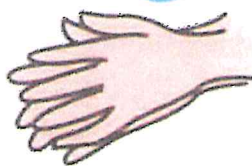
SCRUB
5 SECONDS

6



SCRUB
5 SECONDS

7



RINSE

8



DRY

Protect yourself and your family

Cover your cough and sneeze



1

COVER your mouth and nose with a tissue when you cough or sneeze.



2

Put your used tissue in the rubbish **BIN**.



3

If you don't have a tissue, cough or sneeze into your upper sleeve or elbow, **NOT YOUR HANDS**.

WASH your hands with soap and running water. Dry your hands thoroughly with a disposable paper towel or hand dryer.



4

Stay germ free and healthy

Containing COVID, The New Routines to Keep You and Your Coworkers Safe

When you're unable to social distance (6 feet apart),
a face covering is essential.

How to properly wear a face covering



Not like this—
under your chin

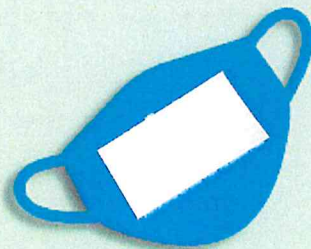


Not like this—
under your nose



Like this—
cover both your
nose and chin

Thank you for helping to keep everyone safe!



Containing COVID, The New Routines to Keep You and Your Coworkers Safe

Minimize exposure and keep yourself and others safe:



Use
Hand Sanitizer

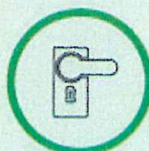
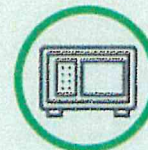
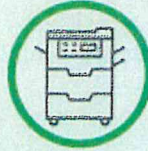
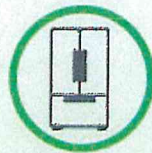


Wash
Hands



Don't Touch
Your Face

How many surfaces do you touch everyday?



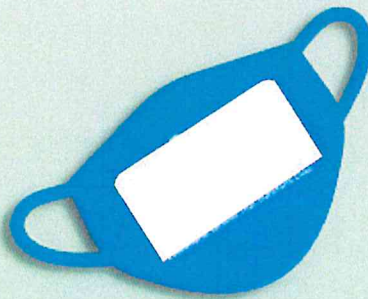
Containing COVID, The New Routines to Keep You and Your Coworkers Safe

Stay Home, Stay Safe

Not feeling well? It's OK to STAY HOME.

Feeling under the weather at work? It's OK to GO HOME.

- Let your supervisor know if you're not feeling well and need to stay home or return home.
- Talk to your supervisor about working from home if you've been exposed or infected.
- Contact Human Resources if you have any questions regarding sick time.



Your coworkers will THANK YOU.

Containing COVID, The New Routines to Keep You and Your Coworkers Safe

Instead of keeping your friends close, keep them safe

Use technology to safely connect
with your coworkers in meaningful ways:

Email



Telephone



Virtual meetings



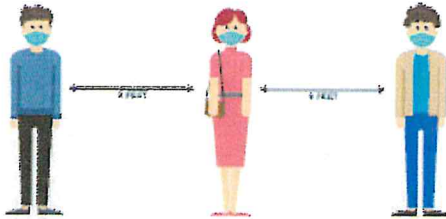
Handwritten notes



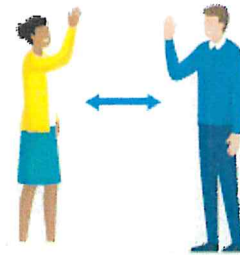
Save in-person meetings for essential conversations,
and don't forget to wear your face covering

Containing COVID, The New Routines to Keep You and Your Coworkers Safe

Maintain 6 feet of distance between
yourself and your colleagues



Greet safely
without touching



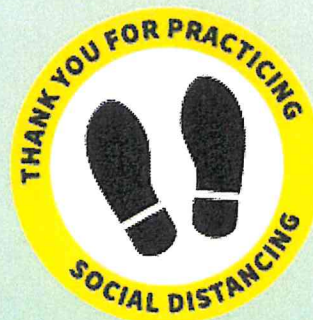
Wait in line to enter the
building or use a shared piece
of equipment



Wear a face covering
when sharing an elevator



Don't crowd restrooms



Notice to All Employees, parents, visitors, vendors, guests

We are committed to the health and well-being of all who enter our buildings. In view of the novel COVID-19 outbreak, we are taking precautionary measures to keep the workplace safe for everyone. Please help us maintain a safe environment by attesting to the following statements.

Statement #1: I am feeling healthy and well today.

Statement #2: Within the last 14 days, I have not been in close contact with anyone who has been diagnosed with COVID-19.

Statement #3: Within the last 14 days, I have not tested positive for COVID-19 nor have I been diagnosed as COVID-19 positive by a healthcare provider.

Statement #4: I am not presently required to quarantine due to New York State travel advisories.

Sign of Illness

Prior to the start of school, staff will participate in a Superintendent's Conference Day where they will meet with the school nurse from their building to learn how to recognize the signs of illness and the necessary steps to take should any student, staff or faculty member present with signs of illness.

Staff will be educated to observe the symptoms of illness:

People with COVID-19 have had a wide range of symptoms reported – ranging from mild symptoms to severe illness. Symptoms may appear 2-14 days after exposure to the virus. People with these symptoms may have COVID-19:

- Fever or chills
- Cough
- Shortness of breath or difficulty breathing
- Muscle or body aches
- Headache
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting

Additionally, staff will be educated to observe students or other staff members for signs of any type of illness such as:

- Flushed cheeks
- Rapid or difficulty breathing (without recent physical activity)
- Frequent use of the bathroom.

Students and staff exhibiting these signs with no other explanation for them will be sent to the health office for an assessment by the school nurse. Procedures outlined in the Core Health and Safety Principles.

Attestation / Temp Check Log

Name: _____

By initialing below, you are affirming "Yes" to the following statements:

Statement #1: I am feeling healthy and well today.

Statement #2: Within the last 14 days, I have not been in close contact with anyone who has been diagnosed with COVID-19.

Statement #3: Within the last 14 days I have not tested positive for COVID-19 nor have I been diagnosed as COVID-19 positive by a healthcare provider.

Statement #4: I am not presently required to quarantine due to New York State travel advisories.

	Date	Time	*Temp Check-ok?	Initials
MONDAY				
TUESDAY				
WEDNESDAY				
THURSDAY				
FRIDAY				

Your signature confirms the accuracy of the dates and times above.

Employee Signature: _____

Date: _____

Supervisor Signature: _____

Date: _____

(* Temperature is less than 100°F)

Daily Temp Check Log for Students

Name: _____

	Date	Time	* Temp Check - ok?	Initials
MONDAY				
TUESDAY				
WEDNESDAY				
THURSDAY				
FRIDAY				

(*Temperature is less than 100°F)

Weekly Attestation Statements...
Parents Responsible for Child(ren)

Name: (Child)

Name: (Parents) _____

By initialing below, you are affirming "Yes" to the following statements:

Statement #1: ^{Your child is} feeling healthy and well today.

Statement #2: Within the last 14 days, ^{your child has} not been in close contact with anyone who has been diagnosed with COVID-19.

Statement #3: Within the last 14 days, ^{your child has} I not tested positive for COVID-19 nor have I been diagnosed as COVID-19 positive by a healthcare provider.

Statement #4: ^{Your child is} not presently required to quarantine due to New York State travel advisories.

[illegible]

COVID - 19 Student Contact Tracing Log

Date: _____

Student's Name: _____

Person completing the form: _____

List the locations that the student visited throughout the course of the day:

- _____
- _____
- _____
- _____
- _____
- _____

Names of individuals that the student has come into close contact with during the school day:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Did you ride the bus? YES NO

Bus #: _____

Do you have a sibling in the district? _____

5

May 31, 2020

Interim Guidance for Public and Private Employees Returning to Work Following COVID-19 Infection or Exposure

Purpose

This interim guidance is intended to inform employers as restrictions on private and public sector activities are scaled back in different regions of the state throughout the COVID-19 public health emergency. This guidance is not intended for health care or nursing home professionals, which have separate protocols and guidance for staff to return to work. Specifically, this guidance provides protocols and policies for employees seeking to return to work after a suspected or confirmed case of COVID-19 or after the employee had close or proximate contact with a person with COVID-19.

Background

On March 7, 2020, Governor Andrew M. Cuomo issued Executive Order 202, declaring a state of emergency in response to COVID-19 as community transmission of the virus occurred throughout New York. To minimize further spread, social distancing of at least six feet must be maintained between individuals, where possible.

On March 20, 2020, Governor Cuomo issued Executive Order 202.6, directing all non-essential businesses to close in-office personnel functions. Essential businesses, as defined by Empire State Development Corporation (ESD) guidance, were not subject to the in-person restriction, but were, however, directed to comply with the guidance and directives for maintaining a clean and safe work environment issued by the New York State Department of Health (DOH).

On April 26, 2020, Governor Cuomo announced a phased approach to reopen industries and businesses in New York in phases based upon a data-driven, regional analysis. On May 4, 2020, the Governor provided that the regional analysis would consider several public health factors, including new COVID-19 infections, as well as health care system, diagnostic testing, and contact tracing capacity. On May 11, 2020, Governor Cuomo announced that the first phase of reopening would begin on May 15, 2020 in several regions of New York, based upon the previously identified regional metrics and indicators. On May 29, 2020, Governor Cuomo announced that the second phase of reopening would begin in several regions of New York.

Return to Work

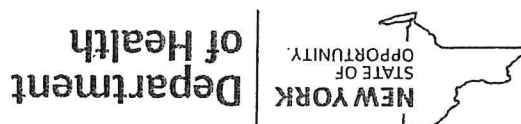
As employers slowly begin to return employees back to the workplace, diligence must be paid to the health and safety of employees, especially for those employees that previously tested positive for COVID-19 or had close or proximate contact with a person with COVID-19 for a prolonged period of time. Employers and employees should take the following actions related to COVID-19 symptoms or exposure:

- If an employee tests positive for COVID-19, regardless of whether the employee is symptomatic or asymptomatic, the employee may return to work upon completing at least 10 days of isolation from the onset of symptoms or 10 days of isolation after the first positive test if they remain asymptomatic.

SALLY DRESLIN, M.S., R.N.
Executive Deputy Commissioner

HOWARD A. ZUCKER, M.D., J.D.
Commissioner

ANDREW M. CUOMO
Governor



- New York Forward Reopening Webpage: <https://forward.ny.gov/>
- DOH COVID-19 Webpage: <https://coronavirus.health.ny.gov/home>
- CDC COVID-19 Webpage: <https://www.cdc.gov/coronavirus/2019-nCoV/index.html>

Additional Information

- If an employee is symptomatic upon arrival at work or becomes sick with COVID-19 symptoms while at the workplace, absent close or proximate contact with a person with COVID-19, the employee must be separated and sent home immediately and may return to work upon completing at least 10 days of isolation from the onset of symptoms OR upon receipt of a negative COVID-19 test result.
- If an employee is symptomatic upon arrival at work or becomes sick with COVID-19 symptoms while at the workplace, absent close or proximate contact with a person with COVID-19, the employee must be separated and sent home immediately and may return to work upon completing at least 10 days of isolation from the onset of symptoms OR upon receipt of a negative COVID-19 test result.
- If an employee has had close or proximate contact with a person with COVID-19 for a prolonged period of time AND is experiencing COVID-19 related symptoms, the employee may return to work upon completing 14 days of self-quarantine.
- If an employee has had close or proximate contact with a person with COVID-19 for a prolonged period of time AND is not experiencing COVID-19 related symptoms, the employee may return to work upon completing 14 days of self-quarantine.
- However, if such an employee is deemed essential and critical for the operation or safety of the workplace, upon a documented determination by their supervisor and a human resources (HR) representative in consultation with appropriate state and local health authorities, the exposed, asymptomatic employee may return to work so long as the employee adheres to the following practices prior to and during their work shift, which should be monitored and documented by the employer and employee:
 1. Regular monitoring: The employee must self-monitor for a temperature greater than or equal to 100.0 degrees Fahrenheit every 12 hours and symptoms consistent with COVID-19 under the supervision of their employer's occupational health program.
 2. Wear a mask: The employee must wear a face mask at all times while in the workplace for 14 days after last exposure.
 3. Social distance: The employee must continue social distancing practices, including maintaining, at least, six feet of distance from others.
 4. Clean and disinfect workspaces: The employer must continue to regularly clean and disinfect all areas, such as offices, bathrooms, common areas, and shared electronic equipment.
 5. Maintain quarantine: The employee must continue to self-quarantine and self-monitor for temperature and symptoms when not at the workplace for 14 days after last exposure.
- The New York State Department of Health considers a close contact to be someone who was within 6 feet of an infected person for at least 10 minutes starting from 48 hours before illness onset until the time the person was isolated. The local health department should be contacted if the extent of contact between an individual and a person suspected or confirmed to have COVID-19 is unclear.
- If an employee has had close or proximate contact with a person with COVID-19 for a prolonged period of time AND is experiencing COVID-19 related symptoms, the employee may return to work upon completing at least 10 days of isolation from the onset of symptoms.
- The New York State Department of Health considers a close contact to be someone who was within 6 feet of an infected person for at least 10 minutes starting from 48 hours before illness onset until the time the person was isolated. The local health department should be contacted if the extent of contact between an individual and a person suspected or confirmed to have COVID-19 is unclear.
- If an employee has had close or proximate contact with a person with COVID-19 for a prolonged period of time AND is experiencing COVID-19 related symptoms, the employee may return to work upon completing at least 10 days of isolation from the onset of symptoms.

Name: _____

New York State (NYS) requires regular cleaning and disinfection at least every day, and more frequent cleaning and disinfection of shared objects, frequently touched surfaces, and high transit areas, such as restrooms and common areas.

- Examples of high-touch surfaces and objects include meeting tables, chair armrests, doorknobs, cabinet pulls, refrigerator door handles, *desk tops*, faucets, toilets and light switches.
- Cleaning and disinfection must be performed with products identified by and registered with the Environmental Protection Agency (EPA) as effective against COVID-19.

[illegible]



Safe Schools Program

Update COVID-19 and the
SARS-CoV-2 (novel coronavirus)







Safe schools, healthy people

Your staff and students may be confronted with Coronavirus disease 2019 (COVID-19), caused by Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2), and there is a need to ensure a learning environment which is safe.

Cleaning and sanitation are essential building blocks to infection prevention and outbreak control. In all areas that you clean and sanitize, pay attention to standard operating procedures, using recommended products only.

Specific attention should be paid to hand hygiene and frequently-touched hard surfaces to avoid cross-contamination.

About coronaviruses and the enveloped SARS-CoV-2 (novel coronavirus)	2
About outbreak prevention	4
How to prevent spreading a virus during an outbreak	7
Cleaning frequently-touched surfaces to reduce risk	8
Hard surface cleaning and disinfection	8
Key touchpoints	9
Methods for hand hygiene and cleaning and disinfection	12
Cleaning up blood and other bodily spillages	13



About coronaviruses and the enveloped SARS-CoV-2 (novel coronavirus)

What is a coronavirus?

Coronaviruses (CoV) are a broad family of viruses named after the crown-like spikes on their surface. They typically cause mild to moderate upper respiratory tract disease in humans, but can also cause more severe infections such as pneumonia and other lower respiratory tract infections. There are some coronaviruses that can be transmitted from animals to people. And there is strong evidence of secondary transmission from person to person with this novel coronavirus as well.

How does the SARS-CoV-2 (novel coronavirus) compare?

In Dec 2019 the novel coronavirus was identified in several hundred people in Wuhan China, most of whom had contact with the same seafood market in Wuhan.

Some of the people infected have had pneumonia, but most have only had mild symptoms with a lower percentage of deaths than other coronavirus infections, with 10-20% of those infected requiring hospitalization for more severe forms of the disease.

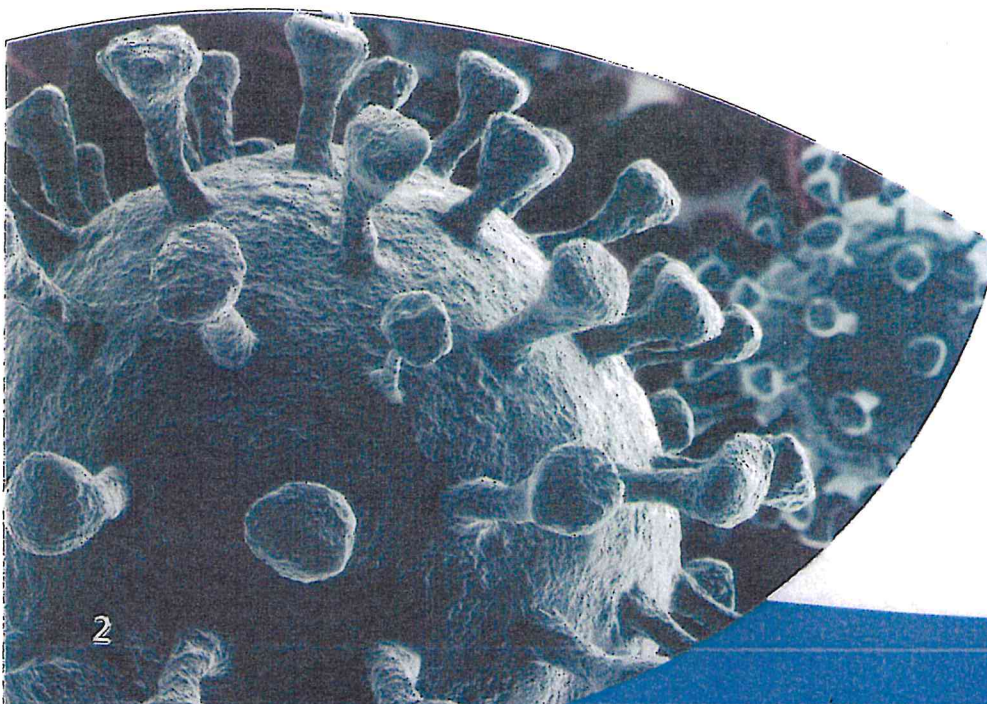
For comparison, the prior SARS-CoV had a mortality rate of 9.6% (9.6% of those people infected died from the disease) and MERS-CoV has a mortality rate of 34.5%.

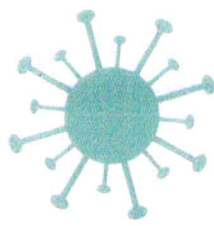


The incubation period is 1-14 days, but can be longer in rare cases. People are most contagious when showing symptoms.

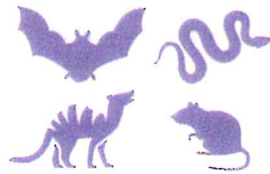
SYMPTOMS

- High fever (over 101°F or 38.3°C)
- Cough
- Breathing difficulties

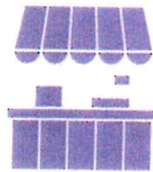




How SARS-CoV-2 spread from animals to people



Bats and game animals



Visiting seafood market,
contact with live or
dead animals

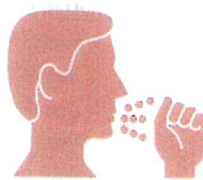


People handling the
animals or exposed to
their secretions

How SARS-CoV-2 spreads from person to person



Person to person
transmission

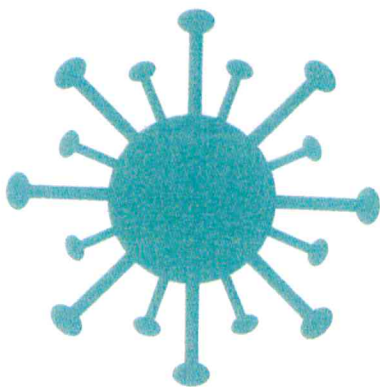


By droplets
Made when infected people
cough, sneeze or talk



Touching
Contaminated objects
or surfaces

For the most recent information on this outbreak please visit:
<https://www.who.int/emergencies/diseases/novel-coronavirus-2019>





About outbreak prevention

It is difficult to predict instances of illness or outbreak, especially when large numbers of people gather in close proximity to one another. The important factor is to be prepared.

Precautionary measures and ensuring you have the right resources to handle a speedy response can be the difference between a few isolated instances and a full blown outbreak. Ultimately outbreaks are more difficult to control and costly to business. This is why prevention is better than cure.

What is an infection?

Infections are caused by pathogens ('bugs') such as bacteria, viruses, yeasts or fungi that enter into the body. It can take some time before the microbes multiply enough to trigger the symptoms of an illness, which means an infected person may unwittingly spread the disease during this incubation period. But for most infectious diseases, person to person transmission is most likely when the infected person is symptomatic.

Instances of transmission can rapidly escalate into larger scale outbreaks which are often difficult to control and extremely damaging to health and business alike.

It is the responsibility of employers to provide a safe workplace for their staff, students and visitors, which includes the provision of adequate infection control procedures.

There are however precautions you can take to reduce the risk of an outbreak and increase your ability to control an outbreak when it does occur.

How are infections transmitted?

Pathogens can spread in a variety of ways and understanding these different modes of transmission will help your staff to adopt good infection control practices.

Coronaviruses are present in respiratory secretions in droplets that travel up to 2 meters, meaning transfers can happen through contact and droplet transmissions.

If infected people sneeze or cough they can spread germs through tiny airborne droplets. These droplets can land on surfaces. Hands and surfaces soiled with nasal and throat discharges can then aid the spread of the disease.

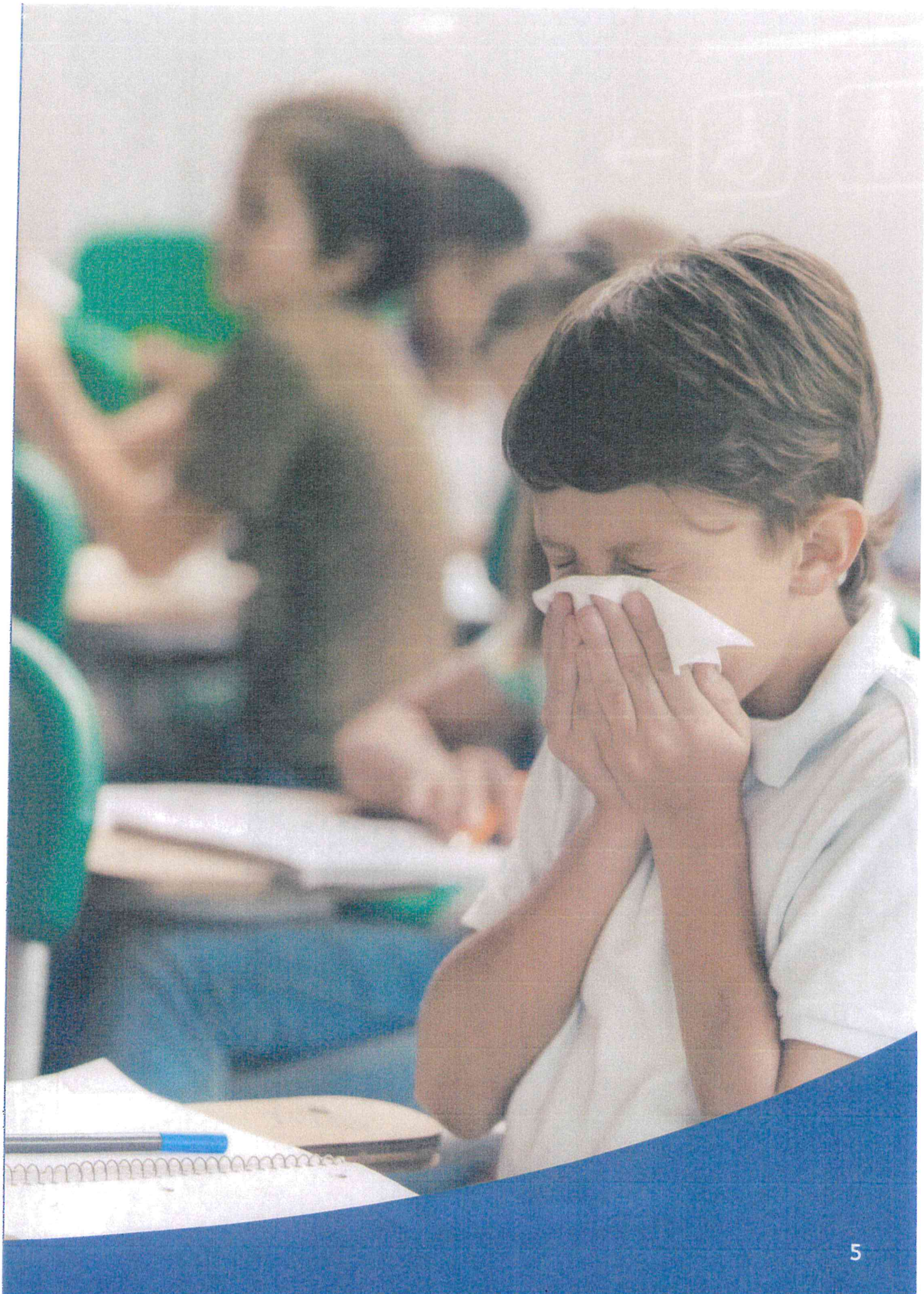
Some of the infections that are spread in this way include:

- The common cold
- Influenza
- Coronaviruses

Contaminated objects, humans or food: Cross-contamination carries pathogens from one contaminated place to another. If a person is unwell they could carry viruses, bacteria or parasites. Also, a person does not have to seem unwell to be carrying a pathogen. When ensuring pathogens are not transmitted, special attention should be paid to hand and surface hygiene.

Key touchpoints for schools:

- Athletic Equipment
- Copier / Printer
- Desk & Table Tops
- Door Handle / Light Switch
- Hard Surface Benches / Chairs
- Keyboard / Mouse
- Locker Exterior
- Pencil Sharpener
- Railings
- Telephone
- Sink / Toilet Flush Handle





How to prevent spreading a virus during an outbreak

How can you control infections?

Infections can be prevented or controlled by reducing the opportunities for infection transmission. This can be achieved by adopting basic infection control practices.

Basic infection control practice

Good infection control begins with assuming everyone is potentially infectious and following proper procedures at all times. The following provides guidelines to reducing transmission of infection:

Hand hygiene

Effective hand hygiene is the greatest single measure that you can take to prevent the spread of pathogens.

When below situations occur please perform approved methods to ensure excellent hand hygiene when you:

- Can see your hands are dirty
- Have just used the toilet
- Are about to prepare food
- Have just completed a daily task (such as emptying the bins)
- Sneezed in your hands
- Have had contact with high touch surfaces

Methods for correct hand hygiene for hand washing and hand rubbing can be viewed at the end of this document.

Special situations

Wound dressing: Broken skin wounds provide an opportunity for pathogens to penetrate the body. Individuals with cuts, burns, sores or other forms of open wounds must have the wounds covered using waterproof dressings.

Blood and bodily fluid spillages: Please use caution when cleaning up blood or bodily fluid. For public facilities bodily fluid spillages must be decontaminated to protect public health. The procedure must also protect the worker during decontamination.

Respiratory hygiene: When a person coughs or sneezes, they should cover their mouth with a disposable tissue or use their elbow. They should dispose of used tissues and perform hand hygiene after used tissue disposal.

Recommendations for laundry in case of an outbreak

Laundry recommendations for non Acute Care facilities are based on International standard RAL GZ-992 for Professional Linen Care and Good Laundry Practices. These standards ensure adequate hygiene in a normal laundry operation. However, during outbreaks such as the current SARS-CoV-2 (Coronavirus) outbreak, we recommend special procedures as outlined below:

For handling and sorting of linen, customers should follow infection prevention procedures in line with local public health guidelines or WHO guidelines*

For the wash process itself, customers should follow a locally authorized process for thermal disinfection or a process for chemo-thermal disinfection.

In case there is no locally authorized process, we recommend to follow WHO* thermal disinfection guidelines to apply a wash process with a temperature of 70°C / 158°F for 25 minutes. More stringent thermal disinfection processes - part of RAL GZ-992 with reference to RKI** - are also allowed, i.e. a wash process at 85°C / 185°F for 15 minutes or a process at 90°C / 194°F for 10 minutes.

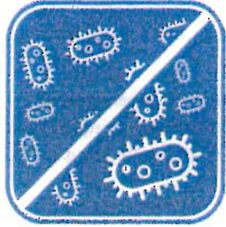
* WHO = World Health Organization

** RKI = Robert Koch Institute (public health institute in Germany)





Cleaning frequently-touched surfaces to reduce risk



Cleaning and disinfection will reduce the risk of an outbreak. Clean all areas frequently as to your standard operating procedure. During times of an outbreak, assess your facility and surfaces to increase frequency to every one to four hours.

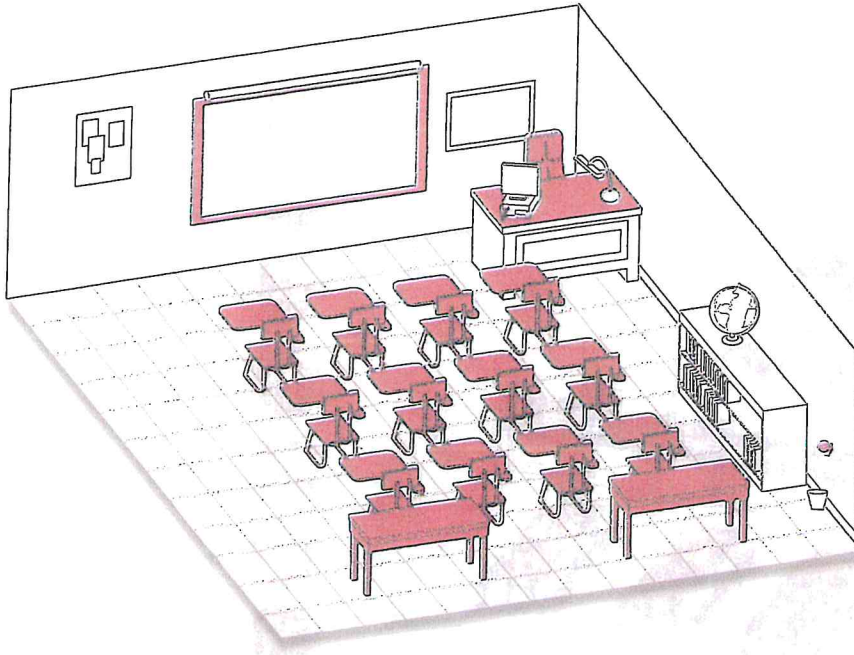
1. Maintain excellent hand hygiene
2. Use a disinfectant for targeted disinfection of frequently touched surfaces
3. Deal with blood or other bodily fluid spillages immediately

High risk areas

High risk infection areas need to be cleaned on a regular basis to create protection against pathogen spread. Certain conditions allow pathogens to spread easier from one individual to another. These include areas where traffic is high, bodily spills are frequent or where there is general low level of hygiene.

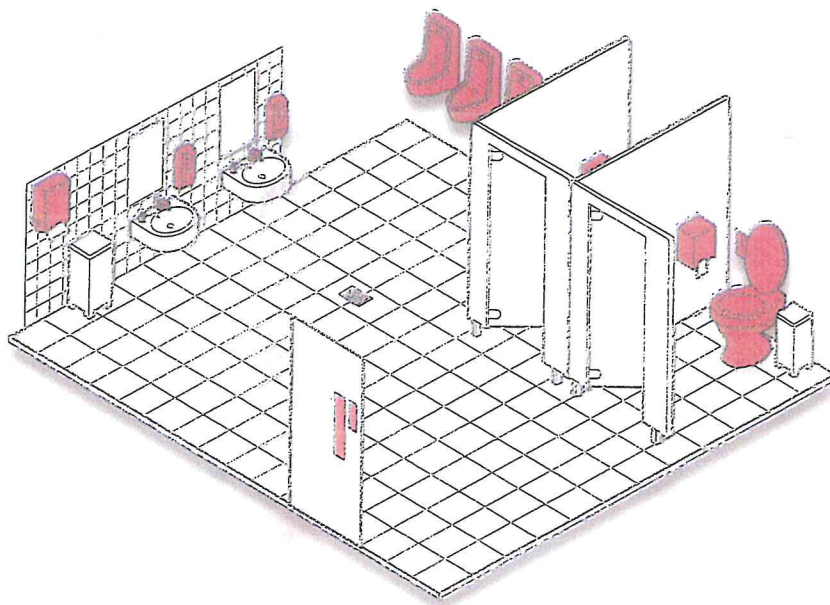


Key touchpoints:



Classrooms:

-  telephones / computers / electronics
-  desks / tables
-  switches
-  door handles
-  chairs
-  pencil sharpener / metal surfaces

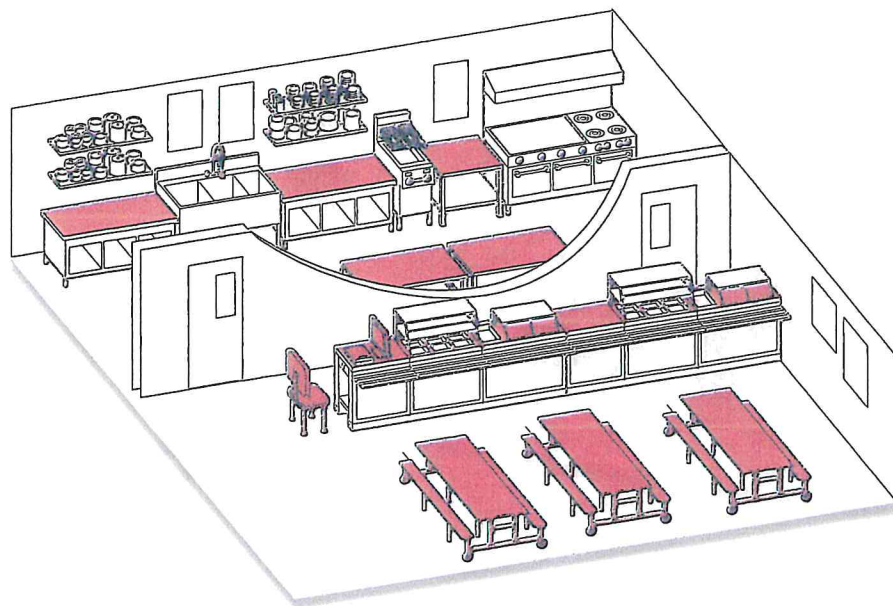


Restrooms:

-  door handles
-  switches
-  dispensers, paper towel holders
-  bathroom handles, toilet flush, shower control, taps
-  toilet seats, splash walls

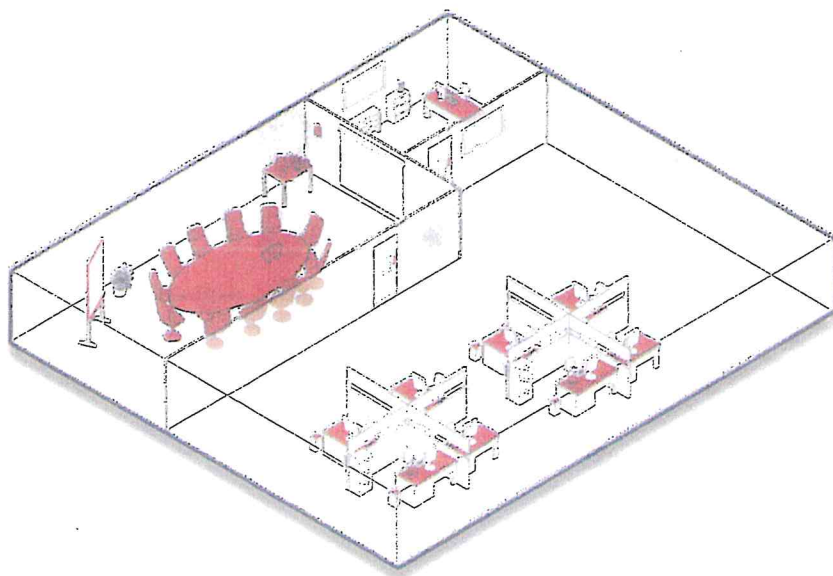


Key touchpoints:



Kitchen /Cafeteria:

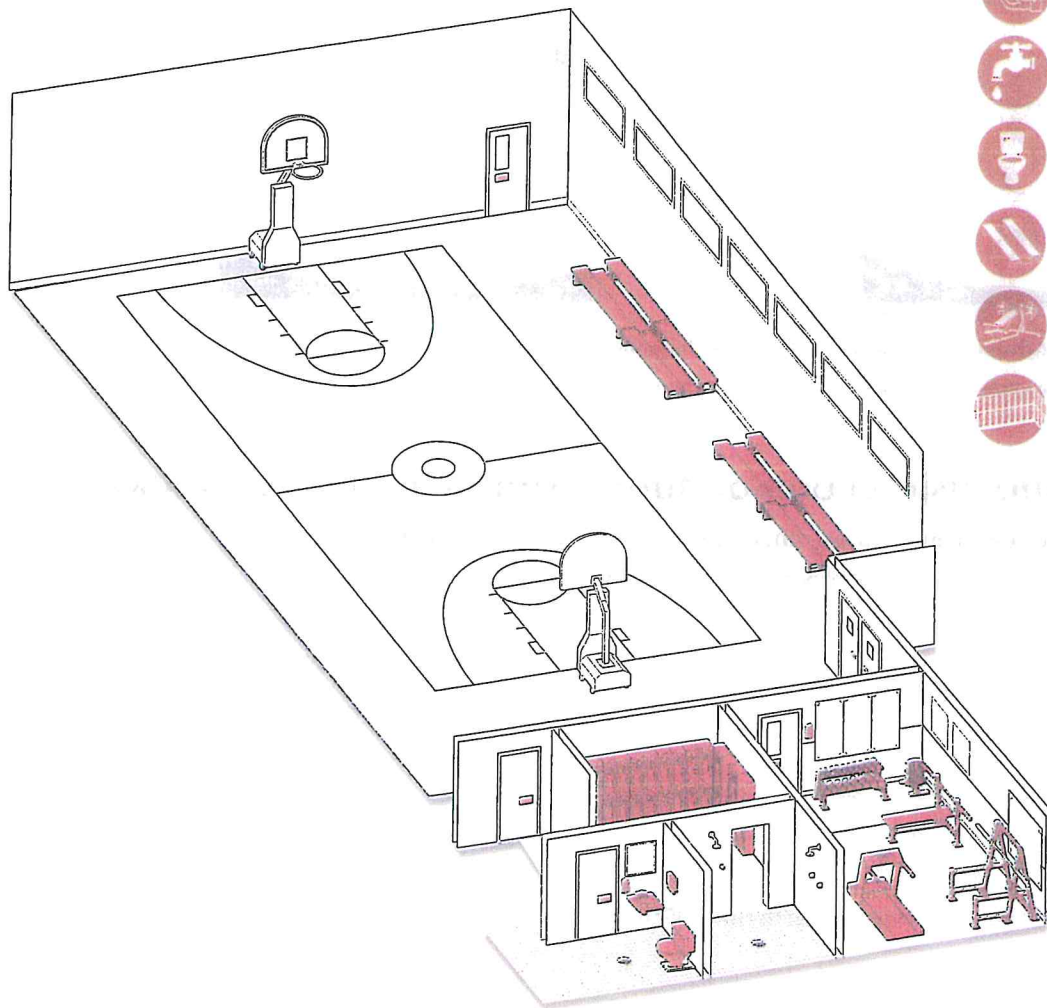
-  door handles
-  switches
-  dispensers
-  food contact surfaces
-  hand contact areas
-  taps
-  utensils
-  chairs
-  table tops
-  sneeze guards



Offices /Conference Areas:

-  telephones / computers / printers
-  desks
-  switches
-  door handles
-  metal surfaces

Key touchpoints:



Athletic Facilities:

-  door handles
-  switches
-  dispensers
-  food contact surfaces
-  sinks, shower handles
-  toilet seats and flush handles, splash walls
-  hard surface benches / chairs
-  athletic equipment
-  locker exterior



Essential areas to focus on during an outbreak

1. Apply correct hand hygiene methods

Hand washing: To wash your hands effectively, wet them, apply soap, lather it fully and rub your hands together for at least 20 seconds. Then rinse all the soap off and dry them fully with a paper towel. To make sure you have washed every part of your hands we recommend you follow this illustration.



Hand rubbing: To sanitize your hands apply 3 ml. of approved hand rub and rub them for 30 seconds. Do not rinse or dry the hands, the hand rub will evaporate.



These charts can be found at the website link below, under "Recommended Practices for Hand Hygiene":

<https://diversey.com/en/solutions/infection-prevention/outbreak-prevention/sars-cov-2-coronavirus-and-covid-19-disease>

2. Cleaning and disinfection of hard surfaces during outbreaks

Please use your standard procedures, otherwise follow these generic guidelines.

Use approved products with the correct dosing for disinfection of hard surfaces!

1. Pre-soak a disposable cloth with cleaner or disinfectant and remove gross soil (if necessary), then place in plastic bag for disposal.
2. Clean surface with a disposable cloth pre-soaked with a cleaner or disinfectant, then dispose in a plastic bag.
3. Spray the disinfectant liberally onto surface and spread with a disposable cloth making entire surface wet with the cleaner or disinfectant.
Dispose of cloth into plastic bag.
4. Allow the disinfectant to act for the necessary surface contact time. Rinse if required.
5. All soiled materials and protective clothing must be deposited into a clinical waste bag and disposed as contaminated material.
6. Wash hands thoroughly for at least 20 seconds using hand soap.

Speak to your Diversey representatives for materials.

3. Cleaning up blood and other body spillages

Please use standard operating procedures. If absent use this general advice instead.



When exposed to blood or other body fluids, please use below general guidelines:

1. Assess the size of the spill and determine whether to treat as a large spill or a small spill.
2. Perform hand hygiene and put on appropriate Personal Protective Equipment (PPE) to prevent bloodborne pathogen exposure during decontamination, including disposable latex, vinyl, or nitrile gloves, fluid resistant gowns with sleeves, face masks and eye covering (goggles or face shield).
3. Note that for certain disinfectants or if there is a risk of splashing during the cleanup, additional PPE may be required. Refer to the SDS for the disinfectant for additional information.
4. Perform one of the following procedures for small spill or large spill surface decontamination.
5. Remove PPE, dispose of PPE appropriately, and perform hand hygiene.



Small spills

1. Wipe up a small blood or body fluids spill with paper towel or similar disposable absorbent material. Discard in red bag (bio-hazard) trash.
2. Clean the surface using an appropriate cleaner or cleaner/disinfectant to remove all of the gross soil and any blood or body fluids residues. Cleaning cloths used in blood or body fluids decontamination should be treated as contaminated and laundered or disposed of appropriately.



3. Disinfect the surface with a registered disinfectant that contains a bloodborne pathogen claim and apply according to the directions on the label. Ensure surfaces stay wet for the contact time of the disinfectant, reapplying the disinfectant if needed to keep the surface wet for the full contact time. Cleaning cloths used in blood or body fluid decontamination should be treated as contaminated and laundered or disposed of appropriately.



4. Once the contact time of the disinfectant has lapsed and the surface has air dried, the surface can be returned to normal use.



Large spills

1. Absorb and/or wipe up blood or body fluids or other organic material with paper towels, absorbent granules, or similar material. Discard in red bag (bio-hazard) trash.

2. Clean the surface using an appropriate cleaner or cleaner/disinfectant to remove all of the gross soil and any blood or body fluids residues. Cleaning cloths used in blood or body fluids decontamination should be treated as contaminated and laundered or disposed of appropriately.



3. Disinfect the surface with a registered disinfectant that contains a bloodborne pathogen claim and apply according to the directions on the label. Ensure surfaces stay wet for the contact time of the disinfectant, reapplying the disinfectant if needed to keep the surface wet for the full contact time. Cleaning cloths used in blood or body fluid decontamination should be treated as contaminated and laundered or disposed of appropriately.



4. Once the contact time of the disinfectant has lapsed and the surface has air dried, the surface can be returned to normal use.

Diversey has been, and always will be, a pioneer and facilitator for life. We constantly deliver revolutionary cleaning and hygiene technologies that provide total confidence to our customers across all of our global sectors.

Diversey is headquartered in Fort Mill, SC, USA. For more information, visit www.diversey.com or follow us on social media.



NYS AAP–Chapter 2

INCORPORATED IN NEW YORK

American Academy of Pediatrics

DEDICATED TO THE HEALTH OF ALL CHILDREN®



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July 29, 2020

The New York State American Academy of Pediatrics - Chapter 2, representing 1,500 pediatricians from Suffolk, Nassau, Brooklyn and Queens, strongly support the return of students to school and in-person education. However, this must be done with the utmost attention to the safety of students, teachers, and staff. In accordance with the guidelines set forth by New York State, the Centers for Disease Control, and the national American Academy of Pediatrics, it is imperative that local epidemiology and rates of local cases of SARS-CoV-2 inform decisions about school re-entry and continued school attendance throughout the early part of the school year. Specifically, a universal masking policy, adherence to distancing guidance with the use of needed barriers, limiting school populations to reduce the chance of spread, strict attention to hand hygiene, symptom isolation, and access to widespread testing policies are needed to reduce the burden of COVID-19 in schools and communities and prevent outbreaks.

Local school districts have been given the task of creating specific plans for the safe return of students, faculty, and staff in the safest manner possible, and we believe these policies will assist that effort:

Universal Mask Policy

All children and adults in the school should be required to wear masks at all times except when masking would endanger breathing or mental health. Consistent with American Academy of Pediatrics guidelines, only children with rare, severe respiratory illness should be excluded from masking. This would not include most children with common respiratory conditions such as asthma. Threats to mental health would apply to children with sensory issues or developmental delays for whom wearing a mask could cause extreme anxiety. Types of masks may vary. We understand some parents, teachers and staff have expressed concerns with respect to wearing a mask throughout the day. Mask wearing takes some effort to get used to, but with time and patience it can be accomplished.

Further guidelines specific to proper use of masks, periodic 'mask breaks' during the course of the school day and desensitizing mask-related anxiety will be coming from local pediatricians in your area. To build tolerance for wearing a mask, we recommend children practice wearing masks during the weeks leading up to the start of school. Further guidance to help increase mask endurance and reduce mask anxiety should be discussed with your local health care provider. School Districts may also wish to provide messaging and assistance toward this effort.

Maintaining Distancing

Consistent with New York State guidance, students, staff, and teachers should maintain 6 feet of social distancing, whenever possible, to ensure the reduction of viral spread via respiratory droplets. Using physical barriers wherever possible also mitigates viral spread. Allowing smaller groups of children in the schools at one time, and using the model of smaller grouped cohorts would still further reduce the risk of spread. Alternating school attendance by specific grouped cohorts of students on certain days of the week may be helpful in schools that cannot allow full return on all days because of inability to physically distance. Deep cleaning between each cohort group attending school would also reduce exposure. Social distancing and masking should also be implemented during bus transportation.

Hand Hygiene

Multiple areas of hand washing and/or hand sanitizing must be available. Guidelines for hand washing should include washing for at least 20 seconds. Hand washing prior to eating, removal of masks, or any other activity, is important to stress. Schools should employ messaging, education and guidance regarding the importance of proper hand washing in the prevention of the spread of SARS-CoV-2 and other illnesses like influenza and gastroenteritis, that are commonly spread in a school setting.

Symptom Isolation and Access to SARS-CoV-2 Testing

Importance should be given to advising all students, staff and teachers to stay home if exhibiting any symptoms of illness, especially fever. Parents should be aware of keeping children home in the presence of any of the symptoms listed in the NYS guidelines. Symptomatic students must be isolated and must consult with their healthcare provider. Isolation of possible contacts must take place once a diagnosis of SARS-CoV-2 has been made. Accessibility to testing will be imperative to ensure the reduction of spread, and will provide information regarding local infection rates to guide further policy. When possible, schools should work in cooperation with local health departments to encourage and facilitate widespread testing of students however possible to provide the most accurate assessment of the incidence of SARS-CoV-2 in the community.

As per NYS guidelines, local health departments should assist in testing and isolation procedures after possible exposures. A contact of a person testing positive is defined as an individual who was within 6 feet for more than 10 minutes with the positive case. Duration of contact should be in accordance with local health department guidance. All guidance should be directed by the local health department and local health care personnel. Please follow state and local guidelines in preparation of schools for the return of students. As pediatricians, we would like to see the return of in person learning inside schools wherever possible, while also giving the utmost attention to the safety and health of all students, teachers, and staff.

Sincerely,

A handwritten signature in black ink, appearing to read 'S. Shah', with a stylized flourish at the end.

Shetal I. Shah MD FAAP
President, NYS AAP - Chapter 2