



# FRESNO COUNTY REOPENING SCHOOLS

Planning Assumptions & Considerations



Updated: June 30, 2020

This document is intended as a resource for Fresno County school districts, charter and faith-based schools to establish and implement procedures for reopening and operating schools after the closure due to the COVID-19 pandemic. This document will evolve over time as more information becomes available. Resources will be added or updated as information and additional materials are identified.

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# BACKGROUND

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Governor Gavin Newsom has unveiled California's Pandemic [Roadmap](#) to Modify the Stay-at-Home Order, which describes six indicators that must be met before the order can be modified or lifted.

- Ability to test, contact trace, isolate and support the exposed.
- Ability to protect those at high risk for COVID-19.
- Surge capacity for hospital and health systems.
- Therapeutic development to meet the demand.
- Ability of businesses, schools and childcare facilities to support physical distancing.
- Determination of when to reinstitute measures such as Stay-at-Home.

In his presentation, the Governor describes four stages to lifting the Stay-at-Home Order and the need to “toggle back and forth” on social restrictions in response to changing conditions until “herd immunity” is achieved in the state.

- Stage 1: Stay-at-Home Order is in place to protect our essential workforce.
- Stage 2: Stay-at-Home Order is modified to allow lower-risk workplaces to gradually reopen.
- Stage 3: Stay-at-Home Order is further modified to allow higher-risk workplaces to reopen.
- Stage 4: Stay-at-Home Order is lifted and there are no restrictions.

The reopening of schools with appropriate modifications is a part of late Stage 2. Currently, California is beginning to move from Stage 1 to Stage 2.

As the COVID-19 data continues to change across communities in Fresno County, it is evident that schools must have different procedures on campuses and district facilities to ensure the safety and well-being of students and staff.

The following assumptions are based on the current thinking of medical professionals, scientists, public health officials and guidance at the local, state and federal levels to assist districts as plans are made to reopen their campuses to students, staff and the community.



# GUIDANCE FROM THE CDC

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As some communities in the United States open K-12 schools, the Centers for Disease Control and Prevention (CDC) offers the following considerations for ways in which schools can help protect students, teachers, administrators, and staff and slow the spread of COVID-19. Schools can determine, in collaboration with [state and local health officials](#) to the extent possible, whether and how to implement these considerations while adjusting to meet the unique needs and circumstances of the local community. Implementation should be guided by what is feasible, practical, acceptable, and tailored to the needs of each community. School-based health facilities may refer to CDC's [Guidance for U.S. Healthcare Facilities](#) and may find it helpful to reference the [Ten Ways Healthcare Systems Can Operate Effectively During the COVID-19 Pandemic](#). These considerations are meant to supplement—**not replace**—any state, local, territorial, or tribal health and safety laws, rules, and regulations with which schools must comply.

## GUIDING PRINCIPLES TO KEEP IN MIND

The more people a student or staff member interacts with, and the longer that interaction, the higher the risk of COVID-19 spread. The risk of COVID-19 spread increases in school settings as follows:

**Lowest Risk:** Students and teachers engage in virtual-only classes, activities, and events.

**More Risk:** Small, in-person classes, activities, and events. Groups of students stay together and with the same teacher throughout/across school days and groups do not mix. Students remain at least 6 feet apart and do not share objects (e.g., hybrid virtual and in-person class structures, or staggered/rotated scheduling to accommodate smaller class sizes).

**Highest Risk:** Full sized, in-person classes, activities, and events. Students are not spaced apart, share classroom materials or supplies, and mix between classes and activities.

COVID-19 is mostly spread by respiratory droplets released when people talk, cough, or sneeze. It is thought that the virus may spread to hands from a contaminated surface and then to the nose or mouth, causing infection. Therefore, personal prevention practices (such as [handwashing](#), [staying home when sick](#)) and [environmental cleaning and disinfection](#) are important principles that are covered in this document. Fortunately, there are a number of actions school administrators can take to help lower the risk of COVID-19 exposure and spread during school sessions and activities.

# PROMOTING BEHAVIORS THAT REDUCE SPREAD

Schools may consider implementing several strategies to encourage behaviors that reduce the spread of COVID-19.

- **Staying Home when Appropriate**
- Educate staff and families about when they/their child(ren) should stay home and when they can return to school.
  - Actively encourage employees and students who are sick or who have recently had close contact with a person with COVID-19 to stay home. Develop policies that encourage sick employees and students to stay at home without fear of reprisal, and ensure employees, students, and students' families are aware of these policies. Consider not having perfect attendance awards, not assessing schools based on absenteeism, and offering virtual learning and telework options, if feasible.
  - Staff and students should stay home if they have tested positive for or are showing COVID-19 symptoms.
  - Staff and students who have recently had close contact with a person with COVID-19 should also stay home and monitor their health.
- CDC's criteria can help inform when employees should return to work:
  - If they have been sick with COVID-19
  - If they have recently had close contact with a person with COVID-19
- **Hand Hygiene and Respiratory Etiquette**
  - Teach and reinforce handwashing with soap and water for at least 20 seconds and increase monitoring to ensure adherence among students and staff.
    - If soap and water are not readily available, hand sanitizer that contains at least 60% alcohol can be used (for staff and older children who can safely use hand sanitizer).
  - Encourage staff and students to cover coughs and sneezes with a tissue. 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, hand sanitizer that contains at least 60% alcohol can be used (for staff and older children who can safely use hand sanitizer).
- **Cloth Face Coverings**
  - Teach and reinforce use of cloth face coverings. Face coverings may be challenging for students (especially younger students) to wear in all-day settings such as school. Face coverings should be worn by staff and students (particularly older students) as feasible, and are **most** essential in times when physical distancing is difficult. Individuals should be frequently reminded not to touch the face covering and to wash their hands frequently. Information should be provided to staff, students, and students' families on proper use, removal, and washing of cloth face coverings.
    - Note: Cloth face coverings should **not** be placed on:
      - Children younger than 2 years old
      - Anyone who has trouble breathing or is unconscious
      - Anyone who is incapacitated or otherwise unable to remove the cloth face covering without assistance
  - Cloth face coverings are meant to protect other people in case the wearer is unknowingly infected but does not have symptoms. Cloth face coverings are not surgical masks, respirators, or other medical personal protective equipment.

- **Adequate Supplies**
  - Support [healthy hygiene](#) behaviors by providing adequate supplies, including soap, hand sanitizer with at least 60 percent alcohol (for staff and older children who can safely use hand sanitizer), paper towels, tissues, disinfectant wipes, cloth face coverings (as feasible) and no-touch/foot-pedal trash cans.
- **Signs and Messages**
  - Post [signs](#) in highly visible locations (e.g., school entrances, restrooms) that promote [everyday protective measures](#) and describe how to [stop the spread](#) of germs (such as by [properly washing hands](#) and [properly wearing a cloth face covering](#)).
  - Broadcast regular [announcements](#) on reducing the spread of COVID-19 on PA systems.
  - Include messages (for example, [videos](#)) about behaviors that prevent the spread of COVID-19 when communicating with staff and families (such as on school websites, in emails, and on school [social media accounts](#)).
  - Find free CDC print and digital resources on CDC's [communications resources](#) main page.

## MAINTAINING HEALTHY ENVIRONMENTS

Schools may consider implementing several strategies to maintain healthy environments.

- **Cleaning and Disinfection**
  - [Clean and disinfect](#) frequently touched surfaces (e.g., playground equipment, door handles, sink handles, drinking fountains) within the school and on school buses at least daily or between use as much as possible. Use of shared objects (e.g., gym or physical education equipment, art supplies, toys, games) should be limited when possible, or cleaned between use.
  - If transport vehicles (e.g., buses) are used by the school, drivers should practice all safety actions and protocols as indicated for other staff (e.g., hand hygiene, cloth face coverings). To clean and disinfect school buses or other transport vehicles, see guidance for [bus transit operators](#).
  - Develop a schedule for increased, routine cleaning and disinfection.
  - Ensure [safe and correct use](#) and storage of [cleaning and disinfection products](#), including storing products securely away from children. Use products that meet [EPA disinfection criteria](#).
  - Cleaning products should not be used near children, and staff should ensure that there is adequate ventilation when using these products to prevent children or themselves from inhaling toxic fumes.
- **Shared Objects**
  - Discourage sharing of items that are difficult to clean or disinfect.
  - Keep each child's belongings separated from others' and in individually labeled containers, cubbies, or areas.
  - Ensure adequate supplies to minimize sharing of high touch materials to the extent possible (e.g., assigning each student their own art supplies, equipment) or limit use of supplies and equipment by one group of children at a time and clean and disinfect between use.
  - Avoid sharing electronic devices, toys, books, and other games or learning aids.



- **Ventilation**
  - Ensure ventilation systems operate properly and increase circulation of outdoor air as much as possible, for example, by opening windows and doors. 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.
- **Water Systems**
  - To minimize the risk of [Legionnaire's disease](#) and other diseases associated with water, [take steps](#) to ensure that all water systems and features (e.g., sink faucets, drinking fountains, decorative fountains) are safe to use after a prolonged facility shutdown. Drinking fountains should be cleaned and sanitized, but encourage staff and students to bring their own water to minimize use and touching of water fountains.
- **Modified Layouts**
  - Space seating/desks at least 6 feet apart when feasible.
  - Turn desks to face in the same direction (rather than facing each other), or have students sit on only one side of tables, spaced apart.
  - Create distance between children on school buses (g., seat children one child per row, skip rows) when possible.
- **Physical Barriers and Guides**
  - Install physical barriers, such as sneeze guards and partitions, particularly in areas where it is difficult for individuals to remain at least 6 feet apart (e.g., reception desks, point of sale).
  - Provide physical guides, such as tape on floors or sidewalks and signs on walls, to ensure that staff and children remain at least 6 feet apart in lines and at other times (e.g. guides for creating "one way routes" in hallways).
- **Communal Spaces**
  - Close communal use shared spaces such as dining halls and playgrounds with shared playground equipment if possible; otherwise, stagger use and [clean and disinfect](#) between use.
  - Add physical barriers, such as plastic flexible screens, between bathroom sinks especially when they cannot be at least 6 feet apart.
- **Food Service**
  - Have children bring their own meals as feasible, or serve individually plated meals in classrooms instead of in a communal dining hall or cafeteria, while ensuring the [safety of children with food allergies](#).
  - Use disposable food service items (e.g., utensils, dishes). If disposable items are not feasible or desirable, ensure that all non-disposable food service items are handled with gloves and washed with dish soap and hot water or in a dishwasher. Individuals should [wash their hands](#) after removing their gloves or after directly handling used food service items.
  - If food is offered at any event, have pre-packaged boxes or bags for each attendee instead of a buffet or family-style meal. Avoid sharing food and utensils and ensure the [safety of children with food allergies](#).

# MAINTAINING HEALTHY OPERATIONS

Schools may consider implementing several strategies to maintain healthy operations.

- **Protections for Staff and Children at Higher Risk for Severe Illness from COVID-19**
  - Offer options for staff at [higher risk for severe illness](#) (including older adults and people of all ages with certain underlying medical conditions) that limit their exposure risk (e.g., telework, modified job responsibilities that limit exposure risk).
  - Offer options for students at [higher risk of severe illness](#) that limit their exposure risk (e.g., virtual learning opportunities).
  - Consistent with applicable law, put in place policies to protect the privacy of people at [higher risk for severe illness](#) regarding underlying medical conditions.
- **Regulatory Awareness**
  - Be aware of local or state regulatory agency policies related to group gatherings to determine if events can be held.
- **Gatherings, Visitors, and Field Trips**
  - Pursue virtual group events, gatherings, or meetings, if possible, and promote social distancing of at least 6 feet between people if events are held. Limit group size to the extent possible.
  - Limit any nonessential visitors, volunteers, and activities involving external groups or organizations as possible – especially with individuals who are not from the local geographic area (e.g., community, town, city, county).
  - Pursue virtual activities and events in lieu of field trips, student assemblies, special performances, school-wide parent meetings, and spirit nights, as possible.
  - Pursue options to convene sporting events and participation in sports activities in ways that minimizes the risk of transmission of COVID-19 to players, families, coaches, and communities.
- **Identifying Small Groups and Keeping Them Together (Cohorting)**
  - Ensure that student and staff groupings are as static as possible by having the same group of children stay with the same staff (all day for young children, and as much as possible for older children).
  - Limit mixing between groups if possible.
- **Staggered Scheduling**
  - Stagger arrival and drop-off times or locations by cohort or put in place other protocols to limit contact between cohorts and direct contact with parents as much as possible.
  - When possible, use flexible worksites (e.g., telework) and flexible work hours (e.g., staggered shifts) to help establish policies and practices for social distancing (maintaining distance of approximately 6 feet) between employees and others, especially if social distancing is recommended by state and local health authorities.
- **Designated COVID-19 Point of Contact**
  - Designate a staff person to be responsible for responding to COVID-19 concerns (e.g., school nurse). All school staff and families should know who this person is and how to contact them.
- **Participation in Community Response Efforts**
  - Consider participating with local authorities in broader COVID-19 community response efforts (e.g., sitting on community response committees).



- **Communication Systems**
  - Put systems in place for:
    - Consistent with applicable law and privacy policies, having staff and families self-report to the school if they or their student have [symptoms](#) of COVID-19, a positive test for COVID-19, or were exposed to someone with COVID-19 within the last 14 days in accordance with [health information sharing regulations for COVID-19](#) (e.g. see “Notify Health Officials and Close Contacts” in the **Preparing for When Someone Gets Sick** section below) and other applicable federal and state laws and regulations relating to privacy and confidentiality, such as the Family Educational Rights and Privacy Act (FERPA).
    - Notifying staff, families, and the public of school closures and any restrictions in place to limit COVID-19 exposure (e.g., limited hours of operation).
- **Leave (Time Off) Policies and Excused Absence Policies**
  - Implement flexible sick leave policies and practices that enable staff to stay home when they are sick, have been exposed, or caring for someone who is sick.
    - Examine and revise policies for leave, telework, and employee compensation.
    - Leave policies should be flexible and not punish people for taking time off, and should allow sick employees to stay home and away from co-workers. Leave policies should also account for employees who need to stay home with their children if there are school or childcare closures, or to care for sick family members.
  - Develop policies for return-to-school after COVID-19 illness. CDC's [criteria to discontinue home isolation and quarantine](#) should be incorporated into these policies.
- **Back-Up Staffing Plan**
  - Monitor absenteeism of students and employees, cross-train staff, and create a roster of trained back-up staff.
- **Staff Training**
  - Train staff on all safety protocols.
  - Conduct training virtually or ensure that [social distancing](#) is maintained during training.
- **Recognize Signs and Symptoms**
  - If feasible, conduct daily health checks (e.g., temperature screening and/or [symptom checking](#)) of staff and students.
  - Health checks should be conducted safely and respectfully, and in accordance with any applicable privacy laws and regulations. School administrators may use examples of screening methods in CDC's supplemental [Guidance for Child Care Programs that Remain Open](#) as a guide for screening children and CDC's [General Business FAQs](#) for screening staff.
- **Sharing Facilities**
  - Encourage any organizations that share or use the school facilities to also follow these considerations.
- **Support Coping and Resilience**
  - Encourage employees and students to take breaks from watching, reading, or listening to news stories about COVID-19, including social media if they are feeling overwhelmed or distressed.

- Promote employees and students eating healthy, exercising, getting sleep, and finding time to unwind.
- Encourage employees and students to talk with people they trust about their concerns and how they are feeling.
- Consider posting signages for the national distress hotline: 1-800-985-5990, or text TalkWithUsto 66746

## PREPARING FOR WHEN SOMEONE GETS SICK

Schools may consider implementing several strategies to prepare for when someone gets sick.

- **Advise Staff and Families of Sick Students of Home Isolation Criteria**
  - Sick staff members or students should not return until they have met CDC's [criteria to discontinue home isolation](#).
- **Isolate and Transport Those Who are Sick**
  - Make sure that staff and families know that they (staff) or their children (families) should not come to school, and that they should notify school officials (e.g., the designated COVID-19 point of contact) if they (staff) or their child (families) become sick with COVID-19 [symptoms](#), test positive for COVID-19, or have been [exposed](#) to someone with COVID-19 symptoms or a confirmed or suspected case.
  - Immediately separate staff and [children](#) with COVID-19 [symptoms](#) (such as fever, cough, or shortness of breath) at school. Individuals who are sick should go home or to a healthcare facility depending on how severe their symptoms are, and follow [CDC guidance for caring for oneself and others who are sick](#).
  - Work with school administrators, nurses, and other healthcare providers to identify an isolation room or area to separate anyone who has COVID-19 symptoms or tests positive but does not have symptoms. School nurses and other healthcare providers should use [Standard and Transmission-Based Precautions](#) when caring for sick people. See: [What Healthcare Personnel Should Know About Caring for Patients with Confirmed or Possible COVID-19 Infection](#).
  - Establish procedures for safely transporting anyone who is sick to their home or to a healthcare facility. If you are calling an ambulance or bringing someone to the hospital, try to call first to alert them that the person may have COVID-19.

### Clean and Disinfect

- Close off areas used by a sick person and do not use these areas until after [cleaning and disinfecting](#)
- Wait at least 24 hours before cleaning and disinfecting. If 24 hours is not feasible, wait as long as possible. Ensure [safe and correct use](#) and storage of [cleaning and disinfection products](#), including storing products securely away from children.

- **Notify Health Officials and Close Contacts**

- In accordance with state and local laws and regulations, school administrators should notify [local health officials](#), staff, and families immediately of any case of COVID-19 while maintaining confidentiality in accordance with the [Americans with Disabilities Act \(ADA\)](#) and other privacy laws.
- Inform those who have had [close contact](#) with a person diagnosed with COVID-19 to stay home and [self-monitor for symptoms](#), and follow [CDC guidance](#) if symptoms develop.



# ASSUMPTIONS

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- 1. County superintendents of schools are uniquely positioned to collaborate with local officials about reopening schools and to lead discussions about changes needed in schools to protect the safety of students and staff. County offices of education can:**
  - a. Help Local Education Agencies (LEA) in the county synthesize federal, state and local guidelines into practices and procedures for reopening and operating local schools to support both education and public health goals.
  - b. Encourage local districts and charters to use the same practices whenever possible so as to send consistent messages to students, parents, community members and staff.
  - c. Communicate with parents and the community about these practices and procedures.
  
- 2. The virus that causes COVID-19 will remain in circulation until a vaccine is developed and widely used.**
  - a. Current projections are that a vaccine will not be available for broad use until early-to-mid 2021.
  - b. At this time, mitigation of the spread of COVID-19 is the best protection. Examples of mitigation practices include: Social distancing (staying at least six feet away from others), masking, frequent handwashing/hand sanitizing, good respiratory hygiene (covering coughs and sneezes) and frequent sanitizing/disinfection of work areas. Teaching and reinforcing these prevention behaviors and the promotion of the influenza vaccine will be important strategies in slowing the spread of this and other infectious diseases.
  - c. Experts believe that there will be a “second wave” of COVID-19 infection that will coincide with the influenza season in late fall and through the winter. If cases within Fresno County rise to a number that threatens our hospitals’ capacity to treat COVID-19 positive patients, it is a possibility that individual school sites, district, regional, or countywide school closures can occur (length of closures will depend on the order of the Public Health Officer).
  - d. Students and staff with significant health conditions will continue to be vulnerable towards COVID-19 infection.
  
- 3. For the schools to return to previous year’s “normal” (pre-pandemic) student attendance, with all grade levels back on campus following the previous schedules, the following must occur:**
  - a. The California Stay-at-Home Order has been lifted (Stage 4).
  - b. The number of confirmed COVID-19 cases in the county has remained constant or declined for 28 consecutive days.
  
- 4. It is anticipated that the 2020-2021 school year will begin while still under the modified Stay-At-Home Order (Late Stage 2 or Stage 3).**
  - a. Limits on group size will still be in place and stepped down in phases throughout the year.
  - b. Some form of physical distancing will be required at the start of the school year and may toggle back and forth as local health conditions dictate.

- 5. Students and staff coming back to school after lengthy Shelter-In-Place orders will experience strong emotions, such as fear, loss and isolation. There will be an increased need for mental health support available.**
  - a. The strain of prolonged social restrictions will overwhelm the coping skills of many.
  - b. Coping for people with pre-existing mental health concerns will be very difficult.
  - c. Suicide attempts and completions will rise.
  - d. Substance abuse, child abuse and domestic violence are also likely to rise.
  
- 6. The economic impacts of the pandemic will have significant and lasting impacts on schools.**
  - a. State tax revenues will fall well below those of previous years with reductions in school funding likely.
  - b. The Department of Finance Fiscal Update released on May 7 projects an overall budget deficit of \$53.4 billion over the 2019-20 and 2020-21 fiscal years.
  - c. Job layoffs and business closures will result in higher levels of unemployment, which will contribute to enrollment decline as families move in search of employment.
  - d. School nutrition programs will be needed by more students and will become a more significant portion of their access to food. Accommodations to provide continued access to meals for children who are ill or required to self-isolate may be necessary until COVID-19 is controlled.
  
- 7. School district enrollment will decline at a fast rate.**
  - a. Parent demand for enrollment in distance learning programs will increase as many will perceive them as a safer and more stable alternative to classroom-based instruction while COVID-19 is in circulation.
    - i. Charter schools with well-established distance learning programs may see increased enrollment.
    - ii. Demand for enrollment in district and charter distance learning programs will also increase each time health officials impose social controls in response to upticks and hotspots.
  
- 8. Student and employee attendance rates will decline in 2020-21.**
  - a. Students and staff with COVID-19, and those who are directly exposed, may miss two or more weeks of school. In larger households, children may be required to miss school for an extended period if the disease affects other members of their family.
  - b. School staff will become more concerned about COVID-19 symptoms and encourage students and staff with symptoms to stay home.
  - c. Fear and rumors may also negatively impact student and employee attendance rates.
  - d. Temporary employees/substitutes may be in more demand as employee absences rise.
  
- 9. Student learning outcomes going into the 2020-21 year will be uneven and vary broadly.**
  - a. Almost all students will begin the next year with learning deficits.
  - b. The most able and advantaged are likely to be better off.
  - c. The most disadvantaged are likely to suffer learning regression.

**10. When schools are allowed to reopen, operations will need to be modified to address COVID-19 in areas such as, but not necessarily limited to:**

- a. Development of criteria/plan for closing school again if necessary.
- b. Updated/accessible injury and illness prevention plan.
- c. School cleaning/disinfecting and other health/safety practices.
- d. Protective equipment.
- e. Physical distancing.
- f. Staff and labor issues.
- g. Mental/emotional support for students/staff.
- h. Communication with parents/students, employees and community.



# CONSIDERATIONS

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- 1. Carefully consider when to return schools to normal operations. Even if all requirements on social distancing are lifted (Stage 4), districts and charter schools should weigh the potential risks and benefits of returning to full operations.**
  - a. Parents may resist the idea that it is safe to return their children to school so soon after the apex of this crisis. Many staff members may share these concerns.
  - b. Consider special accommodations needed to protect vulnerable students and employees. Districts will need supplies to maintain heightened prevention measures (hand sanitizer, cleaning and disinfecting products).
  - c. Consider the physical capacity to reopen schools and the impacts the prolonged closure have played in the overall readiness to reopen. In addition, evaluate the activities, supplies and equipment that will be needed upon student and staff arrival.
  - d. Work with administration to consider the preparation needed for employees to return to the school site. Furthermore, identify any concerns and feedback from employees and prepare responses as needed.
  
- 2. Adapt all processes and timelines necessary to prepare for the new school year.**
  - a. Use job-alike groups to examine all routines used to prepare for the next school year and develop alternative means for accomplishing the needed outcomes.
  - b. Include adaptations that incorporate social distancing and online alternatives.
  - c. Include special accommodations for people who are at higher risk, those who may be sick or who must self-isolate and those who lack internet access.
  
- 3. Prepare for the possibility that the start of the 2020-21 school year may need to be delayed. Calendars with start dates earlier in the summer are more likely to be impacted than those that start in September.**
  
- 4. Create plans to restore operations in phases.**
  - a. Returning to full operations will require careful identification of the activities needed for return and the order in which they should be implemented. Create timelines and communication plans to support each phase.

# INSTRUCTIONAL PROGRAM

- 1. Create plans to assess and respond to the uneven outcomes created by school closures.**
  - a. What formative assessment tools can we use to understand the individual and collective needs of our students?
  - b. What is our plan to accelerate learning and close gaps?
  - c. Are there student groups that are more challenged in functioning at grade level that need considerations in priority return to campus, such as special education, foster youth, homeless, Title I and English learners?
  
- 2. Develop a continuum of instructional program design, including distance learning options.**
  - a. Develop robust independent study programs as an alternative for parents who want this option. Include a variety of options that allow students in independent study programs to participate in campus life, including electives, sports and dances.
  - b. Consider the need for consistent methods in how teachers interact with students - schoolwide / districtwide for enhanced teaching and learning.
  - c. Develop a system to support teachers' instruction both synchronous and asynchronous learning environments to ensure equity for students.
  - d. Consider the use of learning centers to support student learning with weekly in-person and virtual appointments for support.
  - e. Develop the capacity to provide synchronous interactive distance learning via classroom webcast as a means of providing instruction for students who cannot physically participate in classroom instruction.
  - f. Develop the capacity to provide home and hospital instruction (Education Code Section 48206.3) via the internet (Zoom or other means) to assist students who are ill, under quarantine or in self-isolation.
  - g. During closures, use a virtual learning center approach to provide individual and small-group instruction to all students at least once per week by appointment.
  - h. Provide in-person appointments using social distancing and prevention measures as an option if connectivity is not available.
  - i. Consider investing in a Learning Management System (LMS) as a platform to ensure the continuity of teaching and learning that can be used by teachers and students in both face-to-face and in distance learning scenarios. LMS's are associated with a suite of digital tools to help ensure communication, content delivery, assessments, etc.
  
- 3. Develop a continuum of strategies for implementation if social distancing is required.**
  - a. Identify all locations and times where students are in close contact with each other and create strategies to restructure those locations and activities. Consider altering bell schedules, staggering start times, creating multiple recess and lunch periods and creating multiple meal distribution points. In secondary schools, consider implementing a block schedule to reduce student movement during the day and cross-contamination of classrooms.
  
- 4. Develop procedures to identify and assist students who are experiencing homelessness.**
  - a. Develop strategies to mitigate the impact that site/office closures, limitations on walk-ins and limited office hours have on a school's ability to identify children who are eligible for McKinney-Vento support and protections.

- b. Develop procedures for regular contact with parents experiencing homelessness to prepare them for each shift in school operations.
- c. Consider transportation if required under federal mandate for students.

**5. Develop plans to support the mental health of students and families.**

- a. Implement social-emotional learning lessons to develop strong coping skills.
- b. Adapt Multi-Tiered System of Support to occur when schools are working under the modifications described above.
  - i. Implement strategies to ensure all students are highly connected to the school. Make sure all students have positive, meaningful and dependable contact with at least one employee each week.
  - ii. Implement systems to identify students who are struggling and to provide appropriate support.
  - iii. Ensure mental health support is appropriate for students who have known challenges.
  - iv. Incorporate regular check-ins with parents and offer support and resources to fit their needs. Market the availability of all community resources including All 4 Youth by electronic fliers and marketing strategies so that all stakeholders (educators, parents and students) know how to access mental health services.
  - v. Consider developing systems on how teachers / principals / other school staff reach out to students and how these contacts are documented - this applies to special education students, student in need of mental health services, and students in Tiers 2 & 3 of MTSS.
  - vi. Consider a proactive approach to encourage student connections and socializations as much as possible to help mitigate the stress, loss and fear of students not in the presence of peers.
- c. LEAs can be encouraged to:
  - i. Plan for a positive, supportive re-entry to school focused on helping students with the transition and adjusting to changes in school structure/schedule.
  - ii. Notify teachers, staff, students and parents about support services available.
  - iii. Post information on the school district's website and on social media for parents regarding helping children cope with the virus and any tragedies or loss resulting from it.
- d. Help principals and teachers understand how to:
  - i. Quickly identify students, families or staff members experiencing problems adjusting.
  - ii. Provide personal support to those struggling with minor adjustment problems.
  - iii. Provide specialized assistance and referrals when necessary for those who experience major challenges.
  - iv. Activate a mental health/student support service team (school counselor, community mental health partners and CSCT) to plan for students and staff, in conjunction with local mental health services staff, including post-traumatic stress syndrome counseling.
  - v. Share information about availability of counseling services with staff and families. For example, human resources could provide staff with information about access to Employee Assistance Programs (EAP) that can provide virtual counseling services. Students who have experienced loss or trauma during the COVID-19 pandemic will need access to counseling services with follow-up care. Schools may have site-based counseling services for students who have experienced loss or trauma or be able to provide information about community-based counseling services.



- 6. Develop and implement strategies to prevent the transmission of COVID-19 and other infectious diseases.**
  - a. Teach handwashing and coughing and sneezing etiquette at all grade levels and reinforce it regularly.
  - b. Schedule time and structure routines for handwashing at the start of each class period.
  - c. Schedule time outside for fresh air (5-10 min) throughout the day.

## SPECIAL EDUCATION

- 1. Find children who may be disabled and assess them to determine eligibility for a Section 504 Plan or IEP.**
  - a. School districts must actively and systematically seek out children suspected of having a disability.
  - b. Utilize the Fresno County SELPA "Understanding Child Find" resource to train teachers and other relevant staff about child find.
  - c. Develop a plan as a school district to find students whose pre-school closure, school closure, and/or return to school post-closure school performance (which is not just limited to academics) results in a suspicion that the student has a disability.
- 2. Consider needed alterations to each student's individualized education program (IEP).**
  - a. Even if a student is not immediately due for an IEP team meeting, gather baseline data and information in all areas when school starts, but focus, in particular, on academic and social/emotional needs. Be sure to include parents in the gathering of baseline data and information because they have been working closely with their child during school closures and will interact with their child over the summer. Parent data and information could be collected via an online survey that allows for multiple choice and open-ended responses to questions. Observations by current IEP team members may be conducted as a function of the implementation of the IEP and do not require an assessment plan in order to add to the baseline data and information.
  - b. Based on baseline data and information collected, review each student's IEP to determine if additional assessment is needed to assess the student in all areas of suspected disability and/or need; new areas may have arisen since school was last held in-person.
  - c. Based on baseline data and information collected, review each student's IEP to determine if goals, accommodations, special factors (including assistive technology and behavior), placement, services, or any other component of the IEP needs to be reviewed and revised. If so, an amendment IEP may be needed.
  - d. Be prepared to respond to parent requests for changes to a child's IEP, including, but not limited to, placement and/or added services such as independent study, continued distance learning, and/or home hospital instruction. Parent requests of this nature require an amendment IEP team meeting to be held within legal timelines to consider the request and parent concerns.
- 3. Develop a plan for completing special education assessments and convening IEP team meetings in a timely manner once school re-opens.**
  - a. Survey staff now regarding the status of all pending assessment plans and in-progress assessments.

- b. Develop a plan for how the school district will send out assessment plans when school reopens.
- c. Develop a plan for how staff will complete assessments in a timely manner; ensure that completion of assessments does not prevent the implementation of IEP services by service providers.
- d. Pull due dates from SEIS for triennial assessments that are due in the fall for which assessment plans will need to be sent out after school reopens.
- e. Pull due dates for annual and triennial IEP team meetings from SEIS to ensure that IEP team meetings are held in a timely manner.
- f. Create a master calendar for the school district that includes all of the information above to ensure that everything can be completed in a timely manner.
- g. Timeliness of assessments and IEP team meetings as well as delivery of IEP services may require some shifting of special education staff assignments.

**4. Consider the precautions relative to the threat of COVID-19 that are necessary to protect students with medical needs in school.**

- a. If a student has the need for specialized health care procedures at school, consult with student's relevant medical professional to determine if revisions need to be made to the student's health care plan and/or procedures for school. If changes are needed, an amendment IEP team meeting likely will need to be convened to add those changes to the student's health care plan in the IEP.
- b. Ensure that appropriate space is available to conduct the procedures in students' health care plans. For students whose procedures involve aerosol/aspiration (e.g. trach suctioning, oral suctioning, nebulizers, etc.) it is recommended that this be done in a separate room with only the student and appropriate staff present. Staff will need to wear appropriate personal protective equipment (PPE) (e.g., gown, mask, face shield, gloves that will not break during the procedure, etc.) and the room and supplies will need to be appropriately disinfected following the procedure. PPE will need to be changed between students and/or procedures as appropriate; thus, sufficient PPE will need to be secured before students return to school.

**5. Consider the precautions relative to the threat of COVID-19 that are necessary to protect students eligible for special education and the staff who serve them.**

- a. Prepare plans for alternative openings that work with the school district's plans for general education.
- b. Prepare to toggle on and off of distance learning if necessary for individual students and/or with the whole school.
- c. Prepare to continue to provide distance learning to some students even if school reopens for in-person instruction. For example, could the student learn via teacher instruction to the whole class if the student accesses the classroom via Zoom from home?
- d. Ensure that sufficient supplies are purchased for students to have access to their own supplies and plan to sanitize supplies between use, including, but not limited to manipulatives, sensory items, specialized seating, etc. Supplies also need to allow for sufficient space between students, including, but not limited to desks, tables, and cubbies.
- e. Determine how, if at all, mainstreaming can be implemented for students who have this on their IEPs. Prepare to disinfect desks and supplies as students move in and out of mainstreaming classrooms.
- f. Prepare to disinfect pull-out services classrooms and workspaces (e.g. resource

- and speech) if students will rotate in and out of spaces.
- g. Prepare for how students can be appropriately served if they cannot wear a mask at school (e.g. due to medical or behavioral needs).
  - h. Consider how students can be appropriately served even if they can wear a mask (e.g. if they need hand-over-hand instruction or are working on articulation and need to be able to see a staff member's mouth or the staff member needs to see the student's mouth). Does the school district need to purchase clear masks or gloves for this purpose?
  - i. Consider how much time will be needed for disinfecting spaces between students to allow for sufficient time in service providers' schedules to allow for appropriate disinfecting between service sessions; this may require a reduction in case load for some service providers.
  - j. If services will be provided in the home (e.g., during home hospital instruction), plan for precautions, PPE, and disinfecting that the school district may need to do in the home in the area where services will be provided.

## **SOCIAL EMOTIONAL AND MENTAL HEALTH**

### **1. Train staff to implement a tiered system of social/emotional and mental health intervention at each school site within the district.**

- a. Ensure that teachers are trained in, and have sufficient tools to implement classroom-based and class-wide interventions beginning the first day schools reopen.
- b. Tier 1 interventions should include a virtual tour of each school with new signs and arrows painted on the sidewalk for direction of traffic, etc. for students to familiarize themselves with campus prior to return.
- c. Tier 1 interventions should include posting teacher assignments at least a week prior to school starting. Classroom teachers should prepare a video or slideshow of their classroom, themselves wearing a mask, and classroom rules to help student prepare to enter the classroom.
- d. Tier 1 interventions should include posters on campus of social distancing and other rules/reminders (similar to those used for PBIS).
- e. As soon as possible, Tier 1 interventions should include parents in order to educate them about what to expect upon return to school campuses so that they can help prepare their children for return, too. Parents are partners in this process and the responsibility to prepare the students to return should not be left solely up to parents.
- f. Once students return to school, Tier 1 interventions should include access to stress relievers such as allowing sufficient time to process feelings and frustrations, breaks, break rooms (remember disinfecting requirements if used), sensory items (remember disinfecting requirements if used), etc. Students may need items for comfort when they return; these should not come from home, but should be bought by the school district, left at school when the student goes home at the end of the school day, and should be disinfected as appropriate.
- g. Language utilized in information for parents and students should be clear and "kid-friendly" so that returning to school is not more scary or difficult than it needs to be. Utilizing visuals rather than just words can assist with this process.
- h. Fresno County Superintendent of Schools' All 4 Youth program can be a resource in developing this system for your school district and a referral to All 4 Youth for a specific student could be made at any time appropriate during the tiered system.



2. **Develop interventions for high-needs/high-risk students to allow them to successfully re-enter school when it reopens.**
  - a. Interventions could include: reviewing rules and guidelines for being back on campus prior to return, tour of the school in-person before school starts, identification of a safe person or break location (remember sanitation rules if break location is used) before school starts, etc.
3. **Develop a system of staff support — both support for staff members and for students— that is both short-term and long-term to ensure that both students and staff have their social/emotional and mental health needs met when school reopens.**
4. **Ensure that social/emotional and mental health needs and areas of suspected disability are part of your school district’s child find process for Section 504 and special education.**
5. **Ensure that your school sites and staff know and understand the process for making referrals to Fresno County Superintendent of Schools’ All4Youth program.**
6. **Remember that alternatives to suspension are favored under the law; do not be too quick to utilize student discipline and suspension as student return to school.**
7. **Consider the importance of staff that is trained in addressing social/emotional and mental health needs of students and staff.**

## **AFTER SCHOOL / MIGRANT / FOSTER & HOMELESS YOUTH / EXTRA CURRICULAR**

1. **Develop plans to align after school services, migrant services and other extra curricular activities with new COVID-19 safety requirements (include students who remain on distance learning).**
2. **Consider how Expanded Learning (after school) programs can provide support to your students in person and virtually.**
  - a. Any after school program closure or decreased participation related to COVID-19 will receive attendance relief to protect grant funding.
  - b. The 2019-2020 school year grants from the California Department of Education (CDE), Expanded Learning Division (EXLD) has announced that the After School Education and Safety (ASES), 21st Century Community Learning Centers (CCLC), and the 21st Century High School After School Safety and Enrichment for Teens Program will be extended until December 31, 2020.
  - c. Expanded Learning programs should provide support to students, families, and communities during the COVID-19 crisis. In providing this vital support, the utmost attention should be given to the health and safety of staff and those individuals served. Allowable expanded learning program work may include:
    - i. Services related to providing federally approved afterschool meals or snack programs (Grab and Go food distribution)
    - ii. Online programming for youth that is reasonable and necessary
    - iii. Student and parent education and social-emotional well-being support
    - iv. Gathering virtual offsite student materials and information to support families
    - v. Virtual staff meetings (conference calls, Zoom meetings, Microsoft Skype, etc.)
    - vi. Curriculum work
    - vii. Lesson plans

- viii. Program data entry or validation
- ix. Online professional development
- x. Systems planning work (e.g., summer programs, evaluation, sustainability, safety, budgeting)
- xi. Other expectations and associated job tasks listed in job descriptions that are reasonable and necessary during the closure period

**3. Consider how Migrant programs can provide support to your students and families.**

- a. Parent Advisory Council (PAC) meetings have been disrupted due to the COVID 19 crisis for the current year, each district with a service agreement is required to conduct six meetings per year. The CDE is requesting a waiver from the legislators for an extension until September 21, 2020 to comply with the six PAC meetings for the 19-20 school year. The CDE is requesting the PAC meeting take place virtually and comply with the Greene Act. Six meetings will be required for the 20-21 school year for districts with a service agreement.
- b. Summer service student counts have not been waived and districts are to make efforts to provide summer services. Virtual education is the preferred method of instruction and the CDE Migrant Education Program (MEP) office has relaxed the rules on purchase of technology including internet devices.
- c. The CDE MEP has waived the wet signature requirements for all fiscal documents uploaded to the CDE, eSignatures are acceptable. This includes the ME-7, ME-1, Cover Pages, Summer Waivers, and Legal Assurances.
- d. Afterschool intervention programs should be changed to virtual if the campus is not available due to social distancing. The CDE MEP did not waive the credentialed teacher requirement for an afterschool program nor did they waive the 30 hour of instruction requirement. The purchase of technology and devices is an allowable expense.
- e. Migrant-purchased equipment and supplies may be temporarily repurposed for general education use during the closures. So if there are MEP-funded laptops, tablets, etc., that are not currently being used due to the school closures and disruptions of COVID, but the district could use these items in providing distance education to students (even non-Migrant students), then the district may temporarily repurpose the items, but should keep the following documentation: description of the items being repurposed; the funding used to buy the items; where the items are assigned for use during the duration of the COVID emergency; the date when the equipment or non-consumed supplies are returned.
- f. This authorization includes supplies, which may be consumed by the general-core program, again, without regard to Migrant status or students. The supplies and equipment should have been purchased before the disruption in programming. This is not authorization to use Migrant money to make new purchases for general/core programming. Rather, it is to repurpose existing items to facilitate the distance learning. See [Fact Sheet For Repurposing Federal Equipment and Supplies to Combat COVID-19.](#)

**4. Consider the impact Foster and Homeless youth have experienced due to COVID-19.**

- a. Foster and homeless fit into the low SES student population but also have additional barriers.
- b. There is high transiency for both foster and homeless and may go from one home to another, or are in shelters, or living in a car.
- c. Many homeless families and foster families do not have access to internet or masks and do not have the funds to supply these necessities for their students.

- d. Foster and homeless may be more in need of school meals and school supplies.
- e. Districts are still required to provide transportation for homeless students.

**5. Consider alternative methods to provide student with extra curricular activities.**

- a. Following healthy program guidelines, develop opportunities for students to practice their skills until restrictions are lifted.
- b. Consider maintaining the same group of students and coach/instructor/director during activities.

## PERSONNEL

**1. Collaborate with employee groups and/or associations when developing plans that impact their work.**

- a. LEAs are not required to completely renegotiate over subject matters that have already been negotiated. Consider carefully reviewing the current terms of bargaining unit agreements, board policies and internal operating procedures, such as safety, attendance, employee accountability systems and performance evaluations, leaves of absence and hours and work year.
- b. Consider reviewing new legislation and its impact to personnel, in response to COVID-19, such as the Emergency Sick Leave and Expanded Family Medical Leaves of Absences, to ensure compliance. Consider integrating legislative changes into current internal processes when mandate as on-going. Identify “gaps” in current bargaining unit agreements, board policies, that do not address this crisis and reduce to written Memorandums of Understandings (MOUs).
- c. Ensure compliance with current mandates, such as, but not limited to, non-discrimination policies and the interactive process, when addressing personnel matters that are now emerging as a result of COVID-19.
- d. Consider developing frequent communication and feedback systems with labor partners and all employee groups.

**2. Staffing**

- a. Consider developing a reopening/reentry timeline that is openly shared with employees.
- b. Consider expanding staffing models, such as flexible work hours, varying schedules, job sharing, hybrid teaching models, virtual learning, in support of employee safety, comfort and morale, while maintaining quality services and instruction to students and programs. Consider engaging in a one-year Memorandums of Understanding integrating expanded staffing models on a trial basis to ensure on-going effectiveness.
- c. Consider cross-training staff in certain departments (e.g. payroll) to ensure adequate coverage should an employee need to be off work to self-isolate/quarantine or take a leave of absence for a period of time.
- d. Consider reviewing all certificated employees' credentialing status and assignments; analyze what credentials they hold (e.g. supplemental authorizations, limited assignments) to allow for greater flexibility when assigning certificated personnel.

**3. Consider making work assignments and/or accommodations to protect employees in high-risk groups.**

- a. Consider reviewing all job descriptions, with a focus on the essential functions, physical demands and hazards. Consider integrating what positions require “in-person” services or can effectively telework on an on-going basis.



- b. When possible and lawfully appropriate, assign teachers in high-risk groups to independent study programs.
- c. When possible and lawfully appropriate, assign classified employees in high-risk groups to roles and environments where social distancing can be maintained.
- d. Consider conducting staff wellness campaigns openly focusing on recommended and/or required precautionary measures to mitigate the spread of COVID-19; e.g. completing daily health screening/self-certifications, prompts on employee computers to self-certify, use of Personal Protective Equipment (PPE).
- e. Consider promoting resources through the Employee Assistance Program (EAP) for employees in order that they may address personal barriers impacting their availability to work, such as locating childcare and mental wellness support.

## FACILITIES

### 1. Develop and implement strategies to prevent the transmission of COVID-19 and other infectious diseases.

- a. Consider the installation of physical barriers in reception areas, workspaces, and classrooms where the environment cannot accommodate social distancing.
- b. Schedule frequent disinfection of high-touch surfaces.

### 2. Prior to reopening:

- a. Inspect all buildings, facilities, equipment, materials, etc. and determine status and needs for resuming and maintaining operations. Maintain records on what needs to be done prior to occupancy and the ongoing maintenance that is done after reopening.
- b. Consider removing excess furniture and decluttering spaces to facilitate disinfection of surfaces.
- c. Consider acquiring handwashing stations for distribution across various campus locations (e.g. playground and common areas) to provide easy access without students and staff having to wait in long lines to wash their hands and/or touchless soap dispensers for all sinks to be used for handwashing; touchless trash cans if they are not already in use and no-contact thermometers.
- d. Obtain the necessary cleaning supplies, hand sanitizer with at least 60% alcohol and face coverings; identify new vendors for these supplies if necessary. Use cleaning products approved for use against COVID-19 on the Environmental Protection Agency (EPA) approved list and follow product instructions and Cal/OSHA requirements.
- e. Consider developing a COVID-19 exposure response procedure.
- f. Clean facility per CDC guidelines.
- g. Change air conditioning/heater filters. Thoroughly ventilate the facility.
- h. Consider posting the CDC posters ([hand washing](#), [cover while sneezing/coughing](#)) in classrooms and common areas.
- i. Consider installing sneeze guards in high-traffic areas, especially offices, the cafeteria and the nurse's office.
- j. Prepare an isolation area within the school or district building for use in the event a student or staff member becomes ill while at the school/district. Consider how the isolation area will be monitored.
- k. Inspect and clean buses.



### **3. After reopening:**

- a. Modify maintenance staff cleaning routines to provide for disinfecting of surfaces touched by multiple people during the day (work areas, counters, restrooms, doorknobs, desks, stair railings and other “high-touch” surfaces) several times a day.
- b. Clean classrooms, restrooms, all hallways, common areas and the outside of lockers daily per CDC guidelines.
- c. Ensure restrooms stay functional and stocked with soap and toilet paper.
- d. When safe to do so, leave doors open or ajar so that students and staff do not have to touch doorknobs.
- e. Implement routines for handwashing/using hand sanitizer at regular intervals.
- f. Provide hand sanitizer in each classroom that does not have access to soap and water.
- g. Discontinue use of shared food and beverage equipment in employee breakrooms.
- h. Provide adequate supplies within easy reach, including tissues and no-touch trash cans.
- i. If students or staff become ill at school, have the individual use the isolation area until transportation can be arranged. Have a supply of masks available and require the ill person to use the mask while present.
- j. Clean buses after each route.

### **4. Protective equipment**

- a. Consistent with public health guidelines, follow job-specific guidance/requirements for glove use, protective eyewear and gowns, such as requiring maintenance staff to wear gloves when cleaning or repairing restrooms.

## **FOOD SERVICE**

### **1. Develop plans to provide access to school meal programs for qualifying students who are impacted.**

- a. Develop procedures that allow a parent or an adult designated by the parent to pick up meals for children who are absent due to illness or who are required to self-isolate.
- b. If classroom and distance learning will be blended, include procedures to allow qualifying students to take home meals for the days they will not be on campus.
- c. Develop procedures to provide access to meals for qualifying students enrolled in full-time independent study programs.
- d. NOTE: Advocacy with state and federal legislators may be required to support these recommendations.

### **2. Proper PPE for staff preparing and distributing food (these recommendations will depend on public health orders).**

### **3. Social distancing requirements for food preparation, as well as during food distribution.**

### **4. Consider multiple cohorts of food service staff to ensure proper workforce numbers.**

- a. Example: If one person within a cohort has a positive COVID-19 test, that whole cohort might have to quarantine for 14 days. By having multiple cohorts available, food services would not have to stop.

# COMMUNICATIONS

## 1. Develop communication procedures for transparency and feedback.

- a. Proactive communications for all stakeholders that shares information about reopening, while addressing concerns of students and families in preparation for the return to school. LEAs can coordinate with the local emergency management agency, the Fresno County Health Department and other local officials (e.g. mental health, Fire Marshal, law enforcement, public transportation, etc.) to identify and develop structures and communications for students/parents, staff and community members related to COVID-19 and schools.
- b. LEAs and local public health officials can communicate with parents, staff and the community, information and guidelines for families about sending students to school and when to keep them at home. LEAs and local public health officials can also develop a common understanding of:
  - i. What schools will do if they have one or more positive COVID-19 case(s) on campus and/or if a student or staff member has a family member that tests positive.
  - ii. The legal responsibilities/privacy rights for communicating information about cases of the virus on school campuses.
- c. LEAs can assist with consistent messaging to parents and the community to:
  - i. Share their timeline for opening with news media, via social media, on the district/school website and on recordings on the school district main phone line.
  - ii. Revise/update the school year calendar and share with staff, parents and news media.
  - iii. Share with staff and parents information about new practices and procedures for cleaning and hand washing prior to school opening.
  - iv. Develop and send a communication targeted to vulnerable members of the school community.
  - v. Share information with families about sending students to school and when to keep them home.

# FISCAL

## 1. Develop budgets that plan for increased costs related to COVID-19 and budget cuts newly announced by the Governor.

- a. The State of California faces a \$54.3 billion budget deficit, which includes a \$19 billion decline in Proposition 98 guarantee funding. LEAs are also facing cash deferrals starting fiscal year 2019-20 and continuing into 2020-21.
  - i. Effective cash management is critical. LEAs should update cash flow estimates a minimum of once a month for the current fiscal year and into the subsequent fiscal year. Remember the phrase, "Cash is King."
  - ii. In Uncertain economic times it is best practice to follow the state adopted budget and any trailer bill language. Budget preparation and updates throughout the year will become very important to preserve ending fund balance. Multiyear projections should be updated frequently. LEAs must realize that the economic impacts from COVID-19 could extend beyond one year.

## INTERNET ACCESS / DEVICES / HOT SPOTS

- 1. Develop plans to provide every student with a device for distance learning.**
  - a. Survey families to determine computing device needs
  - b. Establish device remote management and support processes
  - c. Allocate technical support staff resources to maintain and troubleshoot devices
  - d. Identify funding sources for district funded computing devices
- 2. Develop plans to provide every student with internet access.**
  - a. Survey families to determine Internet connectivity needs
  - b. Establish eligibility criteria for providing district funded Internet access
  - c. Assess Internet provider coverage area for district boundaries and procure access accordingly
  - d. Ensure web filtering is enabled for district provided Internet
  - e. Identify funding sources for district funded Internet access

## TRANSPORTATION

- 1. Develop plans to transport students with various levels of numbers or social distancing measures allowed by the Fresno County Department of Public Health.**  
Option 1: No more than 10 people in the same space. Driver plus nine students.  
Option 2: No more than CDC or Fresno County Department of Public Health allows in the same space. Driver plus the number of students.
- 2. Create cleaning procedures for buses and drop-off points.**
- 3. Multiple drop-off points to spread out student gatherings.**
- 4. Modifying bus routes and creating service levels at these locations. Service levels include but not limited to health screening and social distance measures at pick up areas.**
- 5. Following appropriate vehicle code, develop a way to create social distancing for students on the bus.**
- 6. Develop a plan to determine how many students will need district transportation.**

## HEALTH

- 1. Health Promotion for Staff and Students.**
  - a. Use respiratory etiquette. Cover cough with tissue or sleeve. See CDC's [Healthy Habits to Prevent Flu](#) page for multilingual posters and fliers posted.
  - b. Wash hands frequently. Encourage hand washing by students and staff through:
    - i. Educating staff, students and parents on its importance.
    - ii. Establish routines for handwashing for students or use hand sanitizer every time students leave and enter the room.
  - c. If facial coverings are considered in your district, teach and reinforce the correct use, especially the donning and doffing of facial coverings. The CDC recommends facial coverings to be worn, especially in situations where social distancing is difficult.



- i. Per the CDC, facial coverings are not recommended for children under 2 years old, anyone who has trouble breathing, or anyone who would not be able to remove the covering without assistance. Social distancing will be vital in keeping these students safe while on campus.
  - ii. Districts should consult with the Fresno County Department of Public Health for the latest local recommendations on facial coverings for students and staff.
- d. Teach and reinforce illness policies for students, parents/guardians, and staff. For younger students, reinforce the importance of letting a trusted adult know when they are not feeling well.

## 2. Staff Professional Development

All staff on campus should be trained in safety actions. Trainings should be done in-person (if social distancing can be accommodated or virtually). Training topics can include:

- a. Signs and symptoms of COVID-19 infections
- b. Hygiene practices which include: handwashing and respiratory etiquette
- c. Proper use of all Personal Protective Equipment (PPE), including donning and doffing procedures, and disposal. PPE examples include: masks, gloves, face shields, and gowns.
- d. Routine cleaning and disinfecting of classroom surfaces and cleaning procedures for when a student in classroom has tested positive for COVID-19.
  - i. NOTE: any staff that use cleaning or disinfecting supplies must go through an Integrated Pest Management training before using these supplies.
  - ii. NOTE: deep cleaning of classrooms after a positive COVID-19 case is identified should be done by district custodians. Districts should discuss whether they would like teachers and paraprofessionals to do routine cleaning/disinfecting throughout the school day.
- e. Social distancing practices
- f. Importance of not sharing classroom supplies and keeping students' belongings separated from others.
- g. Classroom food considerations (no family-style meals, avoiding sharing of foods and utensils, having only pre-packaged foods)
- h. Student and staff illness procedures which include: identification of ill persons (signs and symptoms of febrile and respiratory illness), procedure for referring student to health office, isolation of sick persons, and returning to school after illness.

## 3. Health Office Considerations.

School Health Offices will look and feel considerably different during the COVID-19 re-opening. Offices will be considered clinical spaces where medical procedures and medication administration will take place. It will also be an area where potentially ill students and staff will come to be assessed. Keeping this area as clean as possible will be a high priority as we move through re-opening. The following will need to be considered:

- a. Schools need to identify an "Isolation Room", a room that is separate from the health office and away from general office traffic; where a student or staff member can be placed if there is a suspected illness. The CDC says that a corner of a classroom with partitions can be used if there is no available room available.



- i. Once an isolation room is used and the ill person vacates the room, schools should wait 24 hours before it is cleaned or disinfected. If 24 hours is not feasible, wait as long as possible before someone enters and cleans/disinfects. (please see Cleaning Protocols section from Facilities and Operations Subcommittee)
- b. When feasible, reduce chances of ill individuals from interacting with well individuals.
  - i. For daily prescribed medications, school nurses and health office staff need to carefully plan medication passes throughout the day. For times when there are multiple students that need medication, mark visual tape every six feet outside of the health office will ensure that students socially distance while waiting for their medication administration.
  - ii. Consider developing a protocol where school staff call the health office to make sure there is space to accommodate a student at that time.
  - iii. Minor first aid procedures can be done in the classroom by classroom staff. Supply each classroom with a basic first aid kit and refill them as needed.
  - iv. Consider having health office bathrooms reserved for students receiving services from the health office.
  - v. Do not allow visitors into the health office if possible.
- c. Health offices should be adequately stocked with gloves, masks/face coverings, thermometers (preferably no-touch thermometers), and face shields/goggles. The items may be used for students, staff, and/or nurse.
- d. **SPECIAL CONSIDERATION: Students with “Aerosol Generating Procedures”**
  - i. Aerosol Generating Procedures are procedures that may produce respiratory droplets when performed. Included in these procedures are tracheostomy suctioning, oral suctioning, and nebulizer treatments.
  - ii. These procedures need to be performed in a separate room, preferably with strong ventilation system. If a separate room is not available, a corner of a classroom or office can be designated as a place to perform Aerosol Generating Procedures. Appropriate social distancing from the designated corner needs to be observed.
  - iii. Practitioners performing these procedures need to wear a gown, eye protection (goggles or face shield), gloves, and surgical mask or N95 mask

#### 4. Screening for illness/infection control.

- a. Consider screening for illness/infection control for staff and students before they enter the school and/or upon entry onto buses. Although these practices may vary across the state depending upon local infection rates and conditions, local communities will benefit when school districts in the same cities and in neighboring communities implement consistent procedures. County offices can assist in the collaboration to develop these consistent practices.
  - i. Schools may use examples of screening methods in the [Centers for Disease Control and Prevention's \(CDC\) Supplemental Guidance for Child Care Programs that Remain Open](#) as a guide for screening children and [CDC's General Business FAQs](#) for screening staff.
    - If screenings will be done, determine how, when and where the checks/screenings will occur and who will do the checks/screenings.
    - If temperatures will be taken during screenings, it is recommended to use infrared thermometers (e.g. touchless thermometers) to reduce chances of contamination between student and temperature checker.
  - ii. School nurses and other healthcare providers should use [CDC's Standard- and Transmission-Based Precautions](#) when caring for sick people.

- iii. Establish procedures for safely transporting anyone who is sick home or to a healthcare facility.
- iv. Notify local health officials, staff and families immediately of a possible case, while maintaining confidentiality as required by applicable state and federal statutes (e.g. Family and Medical Leave Act (FMLA), the Americans with Disabilities Act (ADA)).
- v. Close off areas used by a sick person and do not use it again before cleaning and disinfection.
- vi. According to the CDC symptoms of COVID-19 infection can appear 2-14 days after exposure. Symptoms are listed below.
  - Cough
  - Shortness of breath or difficulty breathing
  - Fever
  - Chills
  - Muscle pain
  - Sore throat
  - New loss of taste or smell
  - LESS COMMON: nausea, vomiting, and diarrhea

For more information on COVID-19 signs and symptoms, please click here: <https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html>

#### **5. Develop protocol for when a staff or student becomes ill at school.**

Consider developing or fine-tuning district protocol for sending a student or staff home to decrease the chances for the spread of illness.

- a. Place ill student in an isolation room until they can be picked up by a parent or guardian.
- b. Place a mask on the student while they are waiting for their parent/guardian.
- c. When child is picked up, remind parent or guardian:
  - i. To follow up with their primary care physician for further medical guidance and instruction. Call the school nurse if your primary care physician determines that your child is COVID-19 positive.
  - ii. Of the criteria for returning to school (see Return to School After Illness for Student and Staff Protocol)
  - iii. That the school nurse or other designated staff will be calling them to check on the health and wellbeing of the student and to consult with parent on when student will be able to return to school.
- d. Once the student is picked up, the room should be remained vacant for 24 hours. If waiting 24 hours is not feasible, wait as long as possible before entering the room to clean and disinfect. Follow the CDC guidance on disinfecting after someone is sick.
- e. Close off areas used by a sick person and do not allow anyone to use that area until the area is cleaned and disinfected. The area should be remained vacant for 24 hours. If waiting 24 hours is not feasible, wait as long as possible before entering the room to clean and disinfect.

#### **6. Develop return-to-school after illness protocols for both staff and students.**

- a. School districts adopt their own policies for returning to school after illness for both students and staff. These policies need to be reconsidered in light of the COVID-19 crisis to make sure that students and staff do not return earlier than what is deemed safe. The following is CDC's criteria to return to school after a COVID-19 positive test:

- i. At least 3 days (72 hours) have passed since recovery defined as resolution of fever without the use of fever-reducing medications and improvement in respiratory symptoms (e.g., cough, shortness of breath); and,
- ii. At least 10 days have passed since symptoms first appeared
- b. Districts should revisit their return-to-school policies after a NON-COVID-related febrile illness occurs in either a staff member or student.

## **7. Develop a plan for Contact Tracing**

Fresno County Department of Public Health will expect institutions to perform contact tracing on students and staff that test positive for COVID-19. Schools should identify employees that are able to perform these duties. Identified employees will be trained by the Fresno County Department of Public Health.

## **8. Develop Chain of Command for communication of suspected or confirmed COVID-19 student or staff member. The following list of employees should be considered when developing district Chain of Command:**

- a. Administration (school site principal and their supervisors, if necessary)
- b. Health Services Director
- c. Department of Public Health (for guidance and support, as needed)
- d. Public Information Officer/Communications Department
- e. Facilities and Operations
- f. Human Resources (to help with employee absences, as needed)

## **9. Practice physical distancing**

Implementing physical distancing in schools will require advance planning as it will involve examining every setting, transition and activity in the school day to determine what restructuring is needed and how that will be done to maintain six feet of separation. Physical distancing options at school include:

- a. Implementing changes in the daily/weekly school schedule to decrease class size so that students and the teacher can maintain a physical distance of six feet at all times. Examples include:
  - i. Having some students come to school Monday and Wednesday and other students Tuesday and Thursday. On days students do not come to school, consider having them virtually attend part of the day using technology if possible
  - ii. Having students attend school in shifts, such as an early and a late shift (Note: If this option is under consideration, be sure to consider the time that will be needed between shifts to provide sufficient time to clean/disinfect after each shift; stagger student exit and entry times and screen incoming students).
- b. Having some grades attend school in person and other grades attend via distance learning.
- c. Having certain students (e.g. students who do not have access to distance learning from home and struggling students) attend school on campus and have the remaining students attend via distance learning.
- d. Having students with underlying conditions and those whose parents prefer to keep their children at home attend school via distance learning.
- e. Stagger times when students and staff are moving outside their classrooms/work areas to reduce the number of potential contacts and require students to stay six feet apart when transitioning from one space to another.
- f. Hold classes in larger rooms, such as the gym, library or cafeteria and space students at least six feet apart.



- g. Postponing high-contact activities/classes (e.g. PE, field trips, choir, high-contact after-school activities, such as football) and restructuring athletic, performing arts and club activities to keep students engaged while physically distant.
- h. In any locations where students need to line up, place markers on the pavement to show where students stand to maintain a distance of six feet in a single line and where lines form so that lines are at least six feet apart.
- i. Hold staff meetings virtually.
- j. To limit student exposure to many individuals during the day, districts shall consider:
  - i. Delivering meals to classrooms, the specific area in the campus designated for each class or in kiosks near locations where students will be eating.
  - ii. Having students eat lunch and snacks in the classroom or outside in designated areas for each class so that students do not mix.
  - iii. Using block schedules or rotating teachers through the classroom rather than having students change classrooms.
  - iv. Supervising boarding and seating in buses to ensure physical distancing.
  - v. Board students in the order in which they boarded in the morning.
  - vi. Stagger start times and/or have multiple drop off sites on campus to decrease chances of students congregating in one area.
- k. If not being used as individual classrooms, consider keeping libraries, gyms and playgrounds off-limits for regular use unless they can be sanitized between groups.
- l. Physical distancing options on school buses involves decreasing the number of students on individual buses so that students maintain a distance of six feet apart. Teach students how to sit on the bus to maintain that distance and, if possible, mark buses or block seats to assist in maintaining that distance.

## **RISK MANAGEMENT/LEGAL**

- 1. Consult with insurance carriers and Joint Powers Authorities (JPA) for on-line training for safety practices and other resources to minimize liability.**
- 2. Utilize your existing Injury Illness Prevention Program (IIPP) and Safety Committee process to address employee safety issues and response protocols. Consider amending existing IIPP to address specific COVID-19 response actions.**
- 3. Pursue MOUs with labor groups to address mandatory and optional training sessions regarding use of disinfectants and other cleaning chemicals, social distancing, safety equipment and products, and best safety practices.**
- 4. Pursue MOUs with labor groups to address assignment of older and medically compromised employees to positions that maximize social distancing such as on-line instructional programs and independent study.**
- 5. Pursue MOUs with labor groups to address changes in working conditions due to COVID-19 such as daily working hours, use of safety equipment and products, student attendance accounting in modified instructional programs, work assignments, scheduling flexibility, etc.**



6. **Adhere to all requirements and guidance issued by the CDE, CDC, and Fresno County Department of Public Health.**
7. **Have your legal counsel review all aspects of re-entry plans for advice and guidance.**

## **PARENTS**

1. **Determine parent considerations. – Share the public health guidelines that are constrains we have to remember when designing school programs.**
  - a. As much as possible, the parent committee should be representative of the student population, all ethnicities, all subgroups, such as English learners, Special Education, Title 1, etc..
  - b. Update student contact records regularly to ensure the information is correct.
  - c. What are the options for child care for a hybrid program where students come just a few days a week? What are parent ideas
  - d. Could a school district operate their own child care centers (if they have facilities) for staff members?
  - e. Are there possibilities that career technical education high school students that can help watch younger children as their education pathway?
  - f. For parents with special education students, how will they know what is the most effective program for their students?
  - g. How will parents with children in different grade levels manage child care? Will there be choices to have families on the same days in school?
2. **Communicating with Parents**
  - a. Ensure accessibility. Use multiple modalities, languages, and formats to reach caregivers in their native languages. Consider including phone, text, social media, or in-person communication at pick-ups.
  - b. Know who has received the information. Create a system for tracking who has received information. This can include a “read receipt” on emails, robocalls, or a personal phone call from a staff member or volunteer.
  - c. Check for understanding. Solicit feedback to see whether your communications are being received and “heard” by families. Ask families what is and is not working to leverage the voices and wisdom of diverse stakeholders. Use surveys strategically to gain insights.
  - d. Streamline communication with families. Compile information in consistent messages sent at the same time and in the same way each week. Ensure consistency within your school (this includes teachers sending messages to families in one agreed-upon way to eliminate additional stress for families with multiple children).
  - e. Be explicit about what is mandatory and what is optional. When providing resources, prioritize social-emotional health and wellness. Aim to inform, not overwhelm, and to offer places where people can learn more rather than pushing it all out at once.
  - f. Survey parents if they would choose to keep their students home on on-line learning or would they rather have them on campus.

# EARLY CARE AND EDUCATION

- 1. Prior to re-opening, develop a transition plan for staff, which includes orientation and training of staff, students, parents and visitors of the settings, review of updated policies and procedures, prevention, symptoms and transmission.**
  - a. Provide ongoing updates about COVID-19 to staff.
  - b. Staff are notified to avoid work if they exhibit acute respiratory illness and to contact their medical provider to consider COVID-19 testing.
  - c. Provide procedures to address the need to wear face coverings.
  - d. Appropriate protective equipment (face coverings, gloves, etc.) is accessible for staff and staff are aware of the locations.
  - e. Staff understands the plan to cover the classroom when staff absences occur.
  - f. Site will designate and train staff to conduct health check screenings upon children entering the site and review the denial entry procedure.
  - g. Staff will be trained to implement strategies to model for children and families reinforcing physical and physical distance.
  
- 2. Usually, the arrival and departure are the busiest times of the day. This could be mitigated by preplanning when possible.**
  - a. Post signs at entrance that include a visitor policy. Visitors should be limited.
  - b. Restrict to one entry point with designated areas for universal visual health check screenings and sign/check-in station.
  - c. Set-up parent sign-in for drop-off and departures in non-traffic designated areas when possible where physical distance is achieved.
  - d. Consider staggering pick-up and drop-off times.
  - e. Limit to one authorized adult to pick-up and drop-off child.
  - f. If available, handwashing at entry for staff, children and essential visitors.
  - g. Ensure all staff, families and essential visitors wear face covering.
  
- 3. Proactively develop a plan if a child needs to be contained to help minimize risk.**
  - a. Site should have a specific plan for managing children with symptoms of acute respiratory illness and/or COVID-19 exposure that includes a dedicated isolated room.
  - b. If a sick child has been isolated in your facility, clean and disinfect surfaces in your isolation room and areas the child has accessed.
  - c. Develop a plan for children to return to site following illness.
  - d. Develop an Infectious Disease Response Plan. See more information about this plan at [Considerations for a Child Care Program Infectious Disease Response Plan](#).
  - e. Develop alert system at each classroom to decrease transmission.
  - f. Review plan for containment as part of the staff training prior to receiving children in care.
  
- 4. Clear communication is key with parents to understand policies. Parents should receive an orientation of the new protocols and procedures prior to the reentry of children.**
  - a. Reflect changes of policies in your parent handbook.
  - b. Staff will conduct parent check-in during the child health check screen to gather additional child information.
  - c. Site will make available information about COVID-19 testing sites to parents.
  - d. All information should be available to parents in their home language.
  - e. During this period, limit parent volunteering opportunities.
  - f. Staff will provide regular communication ongoing.

- 5. During this period, the environment may need to be modified to support physical distancing.**
  - a. Develop a plan to audit and address hygiene supplies.
  - b. Develop a plan for cleaning and disinfecting frequently that includes surfaces and objects that are frequently touched, such as manipulatives. Limit the number of toys and manipulatives accessible. Clean between classes. Clean surfaces indoors and outdoors.
  - c. Label congested areas such as signage indicating where to stand to create physical distancing between families.
  - d. Designate an area to conduct visual health screening outside of the classroom when possible.
  - e. At nap time, ensure that children's naptime mats (or cribs) are spaced out, ideally six feet apart. Arrange the head of each bed alternately, in opposite directions, to lessen the possible spread of illness between children from coughing or sneezing.
  - f. Find creative ways to use yarn, masking tape or other materials for children to create their own space.
  - g. If possible, rearrange furniture and play spaces to maintain six feet separation.
  - h. Have multiple toys and manipulatives accessible that are easy to clean and sanitize throughout.
  - i. Use bedding that can be washed. Keep each child's bedding separate and consider storing in individual labeled bins, cubbies or bags. Ensure daily washing of linens.
  - j. Place posters describing handwashing steps near sinks.
  
- 6. The CDC recommends that during this period typical served family style should be avoided to eliminate children not using the same utensils.**
  - a. Have children use disposal utensils and plates for all meals.
  - b. Adults need to ensure children are washing their hands prior to and immediately afterwards.
  - c. Serve meals in the classroom instead of the cafeteria.
  - d. Set up tables and chairs with less children at each table to create physical distance.
  - e. Do not have children brush their teeth at any part of the day. Encourage parents to regularly brush teeth at home.
  
- 7. Implementation of curriculum in the classroom will be designed with the intention of creating small groups and physical distancing.**
  - a. Offer opportunities for individual play and solo activities.
  - b. Review expectations of how many friends are able to participate in different stations with children.
  - c. Include physical-emotional activities to support the expression of children's feelings such as Teaching Pyramid strategies.
  - d. Leverage your outside classroom as part of your lessons.
  - e. Staff need to wear an over-large buttoned down, long-sleeved shirt and wear long hair up off the collar (in ponytail or bun, for example) to the extent possible, when washing, feeding or holding very young children.
  - f. Bottles, bottle caps, nipples and other equipment used for bottle feeding should be thoroughly cleaned after each use by washing in a dishwasher or by washing with a bottlebrush, soap and water.
  - g. Staff and children should have multiple changes of clothes on hand at the site.
  - h. Eliminate use of water tables, sensory tables and sand play.



- i. Follow the guidance provided by Community Care Licensing (CCL) and Public Health on ratios and group size recommendations. See [CCL 20-06](#).
- j. Keep small group of students with the same teacher(s) to limit exposure.
- k. Limit groups to 10 students per teacher.
- l. Teachers consider the use of face shields during storytelling to allow for facial expressions to be visible.

**8. Implement strategies to role-play and model what physical distancing looks like by demonstrating the recommended distance when interacting with children, families and staff.**

- a. Use carpet squares, mats or other visuals for spacing.
- b. Give frequent verbal reminders to children.
- c. Create and develop a scripted story around physical distancing, as well as handwashing, proper etiquette for sneezes, coughs, etc.
- d. Send home a tip sheet for parents and caregivers to also learn about physical distancing.
- e. Taking into consideration the physical-emotional aspect of children needing something that belongs to them.

# SUMMARY

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**The Office of the Fresno County Superintendent of Schools is committed to supporting all school districts in Fresno County. The County Superintendent sincerely appreciates staff members' flexibility, cooperation and dedication to Fresno County students during these unprecedented and trying times.**

This document is intended as a resource for Fresno County school districts, charter and faith-based schools to establish and implement procedures for reopening and operating schools after the closure due to the COVID-19 pandemic. This document will evolve over time as more information becomes available. Resources will be added or updated as information and additional materials are identified. Every attempt has been made to gather and accurately summarize the best available data and recommendations from multiple sources, but the accuracy or completeness of everything in this document cannot be guaranteed. This document is provided for information and illustration purposes only, and it is not meant as public health or legal advice for any particular situation. Please consult with your legal counsel and community public health authorities regarding the appropriate use or implementation of any of the information or recommendations contained in this document for your school district.

## Appendix A: California COVID-19 Resources

1. California Collaborative for Educational Excellence Continuity Playbook  
<https://k12playbook.ccee-ca.org/>
2. California Department of Education COVID page:  
<https://www.cde.ca.gov/ls/he/hn/coronavirus.asp>
3. California Department of Education Stronger Together:  
<https://www.cde.ca.gov/ls/he/hn/strongertogether.asp>
4. Cal/OSHA Guidance on Requirements to Protect Workers from Coronavirus:  
<https://www.dir.ca.gov/dosh/coronavirus/Health-Care-General-Industry.html>
5. County of Fresno Return to Play: Youth and School-Based Sports  
<https://www.co.fresno.ca.us/home/showdocument?id=46467>
6. COVID-19 Industry Guidance: Schools and School-Based Programs:  
<https://covid19.ca.gov/pdf/guidance-schools.pdf>
7. COVID-19 Response Main Page:  
<https://covid19.ca.gov/>
8. Emotional Health Resources:  
<https://covid19.ca.gov/resources-for-emotional-support-and-well-being/>
9. FCSS Unified at Home:  
<http://unifiedathome.fcoe.org/>
10. Fresno County Department of Public Health COVID-19 Resources:  
<https://www.co.fresno.ca.us/departments/public-health/covid-19>
11. Resilience Roadmap:  
<https://covid19.ca.gov/roadmap/>
12. State Guidance for Offices:  
<https://covid19.ca.gov/pdf/guidance-office-workspaces.pdf>
13. State Report Card: Criteria for Moving to Stage 2 on the Resilience Roadmap,  
<https://www.gov.ca.gov/wp-content/uploads/2020/05/5.4-Report-Card-on-California-Resilience-Roadmap.pdf>

## Appendix B: CIF Central Section Resources

1. CIF Central Section Preliminary Guidelines: Return to Activity and Conditioning  
[http://fcoe.org/sites/fcoe.org/files/documents/CIF\\_Guidelines\\_for\\_Returning\\_to\\_Physical\\_Activity.pdf](http://fcoe.org/sites/fcoe.org/files/documents/CIF_Guidelines_for_Returning_to_Physical_Activity.pdf)