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JASON PROVENCE, SUPERINTENDENT

PART A:

Requesting School District: Cascade Union Elementary School
County Health Department: District Shasta
COVID-19 Case Rate: 10.0
Date of Case Rate: February 23, 2021

PART B:

(1) For LEAs that were currently open and providing in-person instruction as of January 14, 2021, where it has been determined that, after making good-faith efforts pursuant to the K-12 Schools Guidance to meet the minimum student-to-student physical distancing guidelines in the Guidance, that meeting that minimum would require students being served through in-person instruction on January 14, 2021, to be served through distance learning.

1. The minimum distancing in any classroom is at the middle school and it is 36", measured mid-chair to edge of chair.
2. The maximum number of students and staff in a classroom is 17 in SDC classrooms and 26 in gen ed classrooms.
3. If our District's schools are required to move to minimum 4' distancing, 80% of our students will be affected.
4. If our District is required to move to minimum 4' distancing, 100% of our schools will be affected.
5. If required to move to minimum 4' distancing, the maximum number of students in a classroom will be 12.
6. Refer to the joint letter from Shasta County Public Health and Shasta County Office of Education. The District's COVID Safety Plan is attached.
7. To continue to ensure a safe working environment amid the COVID pandemic, we offer asymptomatic testing for on-site employees and students. The testing is voluntary, and individuals are encouraged to participate. The screening adds to our ability to quickly detect whether the COVID virus is active in our buildings so we can take next steps to prevent its spread. This program supplements the important and effective prevention strategies of mandatory masking in our facilities and property, daily health screenings, physical distancing, and increased cleaning of our facilities. Those that choose to participate in asymptomatic testing will receive test results as soon as possible, depending on laboratory testing volume and capacity. Participants' data will be safeguarded; no individually identifiable data will be shared publicly. We continue to provide testing for employees/students who report symptoms consistent with COVID-19, and we evaluate and incorporate new public health orders regarding testing.

PART C:

1. CalOSHA Checklist follows.
District's Cal OS lan follows.
2. Refer to the Shasta County Public Health document.
- 3a. The number of students on site for in-person instruction is difficult to ascertain. Our District opened August 2020, providing 3 options to parents – in-person, distance learning, or home school. 80% of our parents chose in-person learning, and the other 20% chose distance learning or home school. Because student attendance for in-person as well as for distance learning are recorded based on daily participation, our year-to-date records for regular in-person learning reflect an attendance rate of 93.56% in grades TK-3, and 93.45% in grades 4-6 and 91.88% in grades 7-8, for an average of 92.89%. Due to the holidays with anticipated family gatherings and the potential for increased COVID spread, for 22 days between December 1 and February 12, our District chose to proactively close districtwide for the safety of our staff and students. Now, we are back open to in-person learning and have had no COVID cases since we have reopened.

For the period December 1, 2020, through February 12, 2021, the number of staff on site for in-person instruction averaged 47 at Anderson Middle School; 29 at Anderson Heights Elementary School; and 79 at Meadow Lane Elementary School.

- 3b. We consistently encourage our staff/students to avail themselves of the local testing programs available through various local entities. Please refer to the description of asymptomatic testing, part B, number 7 above.
- 3c. Because we ask parents and staff to prescreen at home prior to coming to school, we have had only 6 instances of COVID cases on campus while potentially infectious. Of those, only 1 may have been associated with on-site transmission. In addition, we had one staff-staff transmission from staff members attending an off-campus event.



February 26, 2021

Dr. Naomi Bardach, Lead
Safe Schools for All Team

Shasta County, like other Northern California counties, has been extremely fortunate to have been able to be open for in-person instruction at most schools since school started in the fall. Our schools took seriously the guidance that was released in the spring and summer, working closely with our Shasta County Public Health (SCPH) partners. SCPH developed a specialized **School Unit** who worked with us as we considered what safety measures needed to be put in place to ensure the safety of both staff and students. With coordination provided through Shasta County Office of Education (SCOE) and support provided by SCPH, we considered a vast array of issues and worked throughout the spring and summer on reopening plans that were viable. Some of the safety measures went beyond what the state required. Other than due to staffing shortages when school personnel needed to quarantine, most of our schools have been open for face-to-face instruction all year.

Our overarching goal is to **safely maximize the number of students receiving in-person education**. Before the school year began, schools surveyed families on preferred student learning model (in-person or distance learning). Approximately 15% of families requested distance learning, thereby reducing the number of students in-person. Schools and classrooms are diverse, so our strategies across the county have been adapted based on-site conditions and feasibility of implementation. Additionally, staff, students, and families have been flexible and cooperative as our knowledge has increased around COVID-19 which has led to updating practices and protocols (e.g., face coverings, investigating probable COVID-19 cases, and updated close contact definition). Our county model is a layered approach of the following mitigation strategies, including:

- Face coverings utilized,
- Students kept in small stable groups as practicable,
- Desks and chairs spaced and staggered as much as practicable,
- Staff asymptomatic testing programs,
- Plexiglass barriers,
- Outdoor learning when feasible,
- Assigned seating and good daily attendance record keeping,
- Frequent handwashing,

- Symptom and temperature screening before entering campus,
- Increased ventilation, HVAC upgrades, air filters replacement, open windows, and air purifiers,
- Cleaning and disinfecting, and
- Education of students, staff and families.

Most important are our tools of **education** and **communication**. SCOE has provided regular written communication to our school and district leaders as well as coordinated and facilitated regular opportunities to meet virtually with the Shasta County Health Officer Dr. Karen Ramstrom and the SCPH School Unit. Each school in the county identified two COVID-19 Liaisons before school began in the fall who have met with the School Unit weekly throughout the fall and every other week since January. These meetings between COVID-19 Liaisons and SCPH's School Unit have provided ongoing communication on safety mitigation measures, clarifying updated state guidance, best practices, and common tools and resources to share with staff and families. As concerns arise within our schools, SCPH's School Unit has provided quick support and guidance. As we have learned more from SCPH, school plans and practices have been tweaked and adjusted. Common print materials have been created with coordinated distribution to our schools as we know our schools are a key avenue to provide up-to-date education and information to our community. Students and staff are staying home when sick or exposed. In most lower grades, schools are excluding entire classrooms when there is a positive case, which is more conservative than guidance requires. Some schools elected to go to distance learning for up to two weeks after the holiday break out of an abundance of caution.

Twice a week, the SCPH's School Unit monitors community disease levels and reviews case data specific to our schools. Our data since the start of the school year demonstrates that **our schools are one of the very safest places to be in the county**. Like the rest of the county, we have seen an increase in cases of staff and students proportional to community spread but have seen very limited transmission on school campuses. Shasta County Public Health has worked to disaggregate the data for each school/district applying and you will be able to see the data in each school/district's submission.

What is hard to understand is why the new California Department of Public Health Guidance for Schools released on January 14, 2021 was not informed by counties like ours who have been open for face-to-face instruction. Page 21 of this latest guidance states: "Under no circumstances should distance between student chairs be less than 4 feet." Our classrooms have been operating under the guidance of a minimum of 3 feet of space based on CDC guidance from the fall along with the Rural Association of Northern California Health Officers guidance. The 3 feet of spacing layered with our above strategies are successful and have been effective in decreasing risk of in-school transmission.

Shasta County educators are extremely fortunate to have the support of Shasta County Public Health in being prioritized for vaccines. As of Saturday, February 20, 2021, 5 school-specific vaccine clinics have been offered to school staff, and it is estimated that more than 60% of all school staff have received first does vaccines in vaccinated in February. This high percentage along with decreasing positivity rates provide another layer of protection for those within school environments.

We ask you to allow our schools to stay open with a minimum of 3 feet of distance between students. Our administrators have been measuring classrooms, and if we are required to adhere to the minimum of 4 feet of space, our schools will have to change their models, sending more than two-thirds of our students home to a hybrid model (which equates to over 10,000 students moving to hybrid who have not selected distance learning as an instructional model this year). This drastic shift will create a burden for our working families for the 2-3 days a week they would now have to be in distance learning. In addition, many teachers in Shasta County are parents themselves which may not have the same hybrid schedules as their own children, which could potentially require schools to move to a full distance learning model to accommodate their teaching staff. **Please consider letting schools who are open and keeping staff and students safe be able to operate under their existing plans and with full support of Shasta County Public Health.**

Sincerely,



Judy Flores, Superintendent of Schools



Dr. Karen Ramstrom, Shasta County Public Health Officer

Materials Required

School-based contact tracing and case investigation data including the following (please work with the local health department as needed to obtain these data):

a) The beginning and ending dates for which the information is provided
September 1, 2020-February 15, 2021

b) The criteria used by the local health department to conduct contact tracing and case investigation for school-based cases.

Shasta County Public Health's school protocols for COVID-19 cases as follows:

- 1) If a school becomes aware of a COVID-19 positive case ("confirmed case"), send home immediately.
- 2) The COVID-19 School Liaison will contact Shasta County Public Health- School Unit (by emailing DOCSchools@co.shasta.ca.us) and begin the steps below. If Public Health becomes aware of a school-related case, they will contact the COVID-19 School Liaison.
 - a) School will have the following information ready for PHSU: confirmed case's name, date of birth, last day on campus, testing date, testing location, contact information. Send a copy of COVID test result to secure fax 530-225-5074 or secure email: DOCSchools@co.shasta.ca.us, black out any additional personal identifiable information such as address and social security number. (According to US Dept Ed, FERPA allows schools to disclose records, without consent, to the appropriate officials in cases of health and safety emergencies.)
 - b) The school will ask the confirmed case for the Isolation End Date listed on the Public Health Isolation Order
 - c) If the school/childcare is licensed through California Childcare Licensing: Notify Community Care Licensing (CCL) at (530) 895-5033 and complete form LIC 624– Unusual Incident/Injury Report
- 3) The COVID-19 School Liaison determines the infectious period of the confirmed case. This information is utilized to determine school -related close contacts. Infectious period is defined:
 - a) If Confirmed Case is Symptomatic: 2 days before symptom onset through last day at school
 - b) If Confirmed Case is Asymptomatic: 2 days before COVID-19 test was taken through last day at school
- 4) Based on the infectious period, the school site's re-opening plan, class rosters and attendance, and implemented safety measures; identify and close off areas used by the confirmed case and do not use before cleaning and disinfection.
- 5) The COVID-19 School Liaison will identify and document all school-related individuals that were potentially exposed to the confirmed case based on the infectious period. These individuals are close contacts and should be documented on the Close Contacts Form. Close contacts will be quarantined at home for 10 days (following CDPH quarantine guidance through Day 14) from the last day of exposure to the confirmed case. If the individual cannot meet these quarantine requirements, then they must quarantine for 14 days.
 - a) A close contact is defined as someone who was within 6 feet of an infected person for a cumulative total of at least 15 minutes, over a 24-hour period throughout the day, regardless of face covering use or per current CDC definition of a "close contact". (Reference: <https://www.cdc.gov/coronavirus/2019-ncov/php/contact-tracing/contact-tracing-plan/appendix.html#contact>)

- b) Only close contacts of confirmed cases will need to be excluded from school. No action needs to be taken for persons who are close contacts of contacts to a confirmed case but were not directly exposed to a case.
 - c) For elementary schools and other settings in which stable classroom cohorts have been maintained: If it is difficult to determine whether individuals have met the close contact criterion, an entire cohort/classroom/other group may need to be considered exposed. In this case, all students and staff that are part of the cohort/classroom/group will be quarantined. Utilizing assigned seating rosters in the classroom and lunchroom may reduce the number of close contacts identified.
 - d) For middle schools/junior high schools, high schools, and any settings in which stable classroom cohorts have NOT been maintained: Utilize class seating rosters and consultation with teachers/staff to identify close contacts to the confirmed COVID-19 case in all classrooms and on-campus activities.
 - e) Other Places to consider: Bus, additional classrooms or offices, Lunch, Gym, & Recess, Afterschool programs
 - f) Close contacts that exhibit symptoms are encouraged to see their healthcare provider. Their healthcare provider will determine if the individual needs a COVID-19 test.
 - g) Close Contact Form includes: School, Confirmed Case Name, Close contact name, Guardian contact information, Date of birth, Home address, Date of last exposure to the confirmed case, End date of self-quarantine for each individual, Student or Staff, In-Person or Distance Learning, and Notes. The self-quarantine end date can be extended if the individual tests positive or is exposed to another positive case.
- 6) COVID-19 School Liaison submits the Close Contact Form to PHSU DOCSchools@co.shasta.ca.us as soon as possible. School may request consultation on how to determine close contacts and unique situations. PHSU will confirm the self-quarantine end dates.
- 7) The school will give the self-quarantine document to the parent/guardian of each close contact (student) or to each close contact (adult) as soon as possible, and no later than 48 hours after notification of a confirmed case.
- a) The Self-Quarantine document is provided as a separate attachment. The school must complete a Self-Quarantine for each close contact. The school will fill in the appropriate name and dates on page 1 and 2. Page 3 and 4 of the Self-Quarantine document is the symptom self-monitoring log. This log will be completed daily by the close contact while in self-quarantine.
 - b) The school is encouraged to provide a cover letter on school letterhead explaining the school's expectation and providing additional information. A sample letter notification letter is below.
 - c) These instructions can be emailed or given as a hard copy.
 - d) All communication with families must keep identifying information confidential.
 - e) The school shall submit a final list of individuals who self-quarantines were issued to, to the PHSU via DOCSchools@co.shasta.ca.us.
- 8) The COVID-19 School Liaison will also notify the school community of any COVID-19 cases in the school setting, while maintaining confidentiality of all individual involved. A sample community notification is below
- 9) Clean and disinfect area used by the confirmed case. To reduce risk of exposure, wait 24 hours before you clean and disinfect. If it is not possible to wait 24 hours, wait as long as practicable. Ensure a safe and correct application of disinfectants using personal protective equipment and ventilation.
- 10) Follow-up:
- a) The COVID-19 School Liaison will investigate any COVID-19 illness to determine if work related factors could have contributed to risk of infection. The school will update their plan as needed to prevent further cases.

- b) The individual will provide the symptom monitoring log to COVID-19 School Liaison before returning to school/work.
- i) The school is responsible for reviewing symptom monitoring logs to determine if individuals may return to school after the originally established self-quarantine end date. The school can call the individual on their last self-quarantine day to check symptoms and status.
 - (1) If no symptoms developed, individual can return as planned.
 - (2) If symptoms developed, confirm whether a doctor visit or testing occurred and apply criteria in Table 1 below, as applicable. Before returning to school, the individual must be 24-hours fever free (without the use of fever-reducing medicine), and improvement in other symptoms. Contact the PHSU via DOCSchools@co.shasta.ca.us, as needed.
- c) The COVID-19 School Liaison will notify PHSU via DOCSchools@co.shasta.ca.us if individuals on self-quarantine develop symptoms or test positive for COVID-19.

Criteria used by the local health department to ask close contacts to undergo testing after exposure (e.g., only if symptomatic, or within a set window of time after exposure).

At the beginning of the school year, testing capacity in Shasta County was extremely limited. At that time, school-related close contacts were advised to monitor for symptoms and if symptoms develop contact their healthcare provider to determine if testing is needed. As testing capacity improved, SCPH recommended testing for all close contacts 5-7 days after exposure to a confirmed case.

Additional testing criteria from Shasta County Public Health's school protocols are:

- Priorities for testing are based on symptoms, disease transmission on campus, and extent of exposure:
 - o Symptomatic students, staff, and teachers who are attending in-person classes. These individuals should see their healthcare provider for testing options. If the provider does not provide testing, complete the "Get Tested" survey on the Shasta Ready website.
 - o Close contacts of cases are recommended for testing, particularly school staff.
 - o If there is evidence of possible transmission occurring at a school with in-person instruction, all staff will be tested within 2 weeks, e.g., two or more cases in a classroom or three or more cases within a 14-day period on school campus.
 - o Staff who work in close contact with others for long periods of time, or with two or more student cohorts, or on more than one school campus should test for COVID-19 once a month. Examples could include food service, special education, nurse and health aids, and substitute teachers.
- d) The number of estimated cases across the schools being reviewed, during the reported time period, that were on a school campus during their infectious period.
During the reporting period, it is estimated that there were 6 cases on campus during their infectious period.
- e) The number of these estimated cases (from d.) that appear to have been associated with any on-site transmission, and how many in-school secondary cases occurred in association with the transmission
During the reporting period, it is estimated that there was potentially 1 case of on-campus transmission with 1 secondary case likely associated with on-campus transmission.

- f) Of the potential on-site transmissions, the number that were staff to staff transmission, student to student transmission, student to staff transmission, and staff to student transmission.
- 0 student to student transmissions
 - 0 staff to staff transmissions
 - 0 student to staff transmissions
 - 0 staff to student transmissions
- g) Remediating actions taken by the school to prevent subsequent transmission:
- Face covering use for students TK and older (previously only required 3rd grade and older)
 - Reducing number of people simultaneously using break rooms
 - Physically distancing staff while eating lunch or on break
 - Moving staff meetings, interviews, and professional development virtually or outside
 - Moving the classes or entire school to distance learning for 14 days when there are multiple cases in multiple cohorts
 - Utilizing at least weeklong distance learning periods after school holidays/breaks
 - Request staff identified as close contacts to test 5-7 days after exposure, before returning to school
- h) The number of outbreaks (three or more cases that are epidemiologically linked) in the school community with in-school transmission, and any remediating actions taken by the school to prevent subsequent outbreaks.
- During the reporting period, there were no outbreaks associated with on-campus transmission.

I hereby attest that I am duly authorized to sign and act on behalf of the Cascade Union Elementary School District, and I certify that the information provided in this request is true, accurate, and complete to the best of my knowledge.



Jason Provence
Superintendent

Local Health Officer Review:

Approved
 Not Approved

Signature: *Karen Ramstrom, DO*

Date: 03/01/2021

COVID-19 School Guidance Checklist

January 14, 2021

CALIFORNIA
ALL

Your Actions
Save Lives

Date: _____

2021 COVID-19 School Guidance Checklist

Name of Local Educational Agency or Equivalent: _____

Number of schools: _____

Enrollment: _____

Superintendent (or equivalent) Name: _____

Address: _____

Phone Number: _____

Email: _____

Date of proposed reopening: _____

County: _____

Grade Level (check all that apply)

Current Tier: _____
(please indicate Purple, Red, Orange or Yellow)

TK 2nd 5th 8th 11th

K 3rd 6th 9th 12th

1st 4th 7th 10th

Type of LEA: _____

This form and any applicable attachments should be posted publicly on the website of the local educational agency (or equivalent) prior to reopening or if an LEA or equivalent has already opened for in-person instruction. For those in the Purple Tier, materials must additionally be submitted to your local health officer (LHO), local County Office of Education, and the State School Safety Team prior to reopening.

The email address for submission to the State School Safety for All Team for LEAs in Purple Tier is:

K12csp@cdph.ca.gov

LEAs or equivalent in Counties with a case rate $\geq 25/100,000$ individuals can submit materials but cannot re-open a school until the county is below 25 cases per 100,000 (adjusted rate) for 5 consecutive days.

For Local Educational Agencies (LEAs or equivalent) in ALL TIERS:

I, _____, post to the website of the local educational agency (or equivalent) the COVID Safety Plan, which consists of two elements: the **COVID-19 Prevention Program (CPP)**, pursuant to CalOSHA requirements, and this **CDPH COVID-19 Guidance Checklist** and accompanying documents,

which satisfies requirements for the safe reopening of schools per CDPH [Guidance on Schools](#). For those seeking to open while in the Purple Tier, these plans have also been submitted to the local health officer (LHO) and the State School Safety Team.

I confirm that reopening plan(s) address the following, consistent with guidance from the California Department of Public Health and the local health department:

Stable group structures (where applicable): How students and staff will be kept in stable groups with fixed membership that stay together for all activities (e.g., instruction, lunch, recess) and minimize/avoid contact with other groups or individuals who are not part of the stable group.

Please provide specific information regarding:

How many students and staff will be in each planned stable, group structure? (If planning more than one type of group, what is the minimum and maximum number of students and staff in the groups?)

If you have departmentalized classes, how will you organize staff and students in stable groups?

If you have electives, how will you prevent or minimize in-person contact for members of different stable groups?

Entrance, Egress, and Movement Within the School: How movement of students, staff, and parents will be managed to avoid close contact and/or mixing of cohorts.

Face Coverings and Other Essential Protective Gear: How CDPH's face covering requirements will be satisfied and enforced for staff and students.

Health Screenings for Students and Staff: How students and staff will be screened for symptoms of COVID-19 and how ill students or staff will be separated from others and sent home immediately.

Healthy Hygiene Practices: The availability of handwashing stations and hand sanitizer, and how their safe and appropriate use will be promoted and incorporated into routines for staff and students.

Identification and Tracing of Contacts: Actions that staff will take when there is a confirmed case. Confirm that the school(s) have designated staff persons to support contact tracing, such as creation and submission of lists of exposed students and staff to the local health department and notification of exposed persons. Each school must designate a person for the local health department to contact about COVID-19.

Physical Distancing: How space and routines will be arranged to allow for physical distancing of students and staff.

Please provide the planned maximum and minimum distance between students in classrooms.

Maximum: _____ feet

Minimum: _____ feet. If this is less than 6 feet, please explain why it is not possible to maintain a minimum of at least 6 feet.

Staff Training and Family Education: How staff will be trained and families will be educated on the application and enforcement of the plan.

Testing of Staff: How school officials will ensure that students and staff who have symptoms of COVID-19 or have been exposed to someone with COVID-19 will be rapidly tested and what instructions they will be given while waiting for test results. Below, please describe any planned periodic asymptomatic staff testing cadence.

Staff asymptomatic testing cadence. Please note if testing cadence will differ by tier:

Testing of Students: How school officials will ensure that students who have symptoms of COVID-19 or have been exposed to someone with COVID-19 will be rapidly tested and what instructions they will be given while waiting for test results. Below, please describe any planned periodic asymptomatic student testing cadence.

Planned student testing cadence. Please note if testing cadence will differ by tier:

Identification and Reporting of Cases: At all times, reporting of confirmed positive and suspected cases in students, staff and employees will be consistent with [Reporting Requirements](#).

Communication Plans: How the superintendent will communicate with students, staff, and parents about cases and exposures at the school, consistent with privacy requirements such as FERPA and HIPAA.

Consultation: (For schools not previously open) Please confirm consultation with the following groups

Labor Organization

Name of Organization(s) and Date(s) Consulted:

Name: _____

Date: _____

Parent and Community Organizations

Name of Organization(s) and Date(s) Consulted:

Name: _____

Date: _____

If no labor organization represents staff at the school, please describe the process for consultation with school staff:

For Local Educational Agencies (LEAs or equivalent) in PURPLE:

Local Health Officer Approval: The Local Health Officer, for (state County) _____. County has certified and approved the CRP on this date: _____. If more than 7 business days have passed since the submission without input from the LHO, the CRP shall be deemed approved.

Additional Resources:

[Guidance on Schools](#)

[Safe Schools for All Hub](#)

Submitted to Shasta County Public Health
1/21/21. Emailed response received 1/22/21.

COVID-19 Prevention Program (CPP)

Cascade Union Elementary School District

This CPP is designed to control exposures to the SARS-CoV-2 virus that may occur in our workplace.

Date: January 15, 2021

Authority and Responsibility

The superintendent has overall authority and responsibility for implementing the provisions of this CPP in our workplace. In addition, all managers and supervisors are responsible for implementing and maintaining the CPP in their assigned work areas and for ensuring employees receive answers to questions about the program in a language they understand.

All employees are responsible for using safe work practices, following all directives, policies and procedures, and assisting in maintaining a safe work environment.

Identification and Evaluation of COVID-19 Hazards

We will implement the following in our workplace:

- Conduct workplace-specific evaluations using the Appendix A: Identification of COVID-19 Hazards form.
- Evaluate employees' potential workplace exposures to all persons at, or who may enter, our workplace.
- Review applicable orders and general and industry-specific guidance from the State of California, Cal/OSHA, and the local health department related to COVID-19 hazards and prevention.
- Evaluate existing COVID-19 prevention controls in our workplace and the need for different or additional controls.
- Conduct periodic inspections using the Appendix B: COVID-19 Inspections form as needed to identify unhealthy conditions, work practices, and work procedures related to COVID-19 and to ensure compliance with our COVID-19 policies and procedures.

Employee Participation

Employees and their authorized employees' representatives are encouraged to participate in the identification and evaluation of COVID-19 hazards by:

- * Utilizing email, staff meetings, and work order protocols to request PPE
- * communicating repairs
- * identifying solutions to exposure areas
- * requesting purchases or accommodations to remove hazards

The custodian and principals/superintendent use Appendix B to evaluate the facility for COVID exposures.

Employee Screening

Employees self-screen according to CDPH guidelines prior to reporting to work. Once employees are on campus, if they appear to have symptoms or report symptoms, we take temperature, screen symptoms, and isolate when appropriate.

Correction of COVID-19 Hazards

Unsafe or unhealthy work conditions, practices or procedures will be documented on the Appendix B: COVID-19 Inspections form, and corrected in a timely manner based on the severity of the hazards, as follows:

Items reported to the Superintendent will be discussed with the appropriate party for correction and remedy timeline. Follow-up measures are taken to ensure timely correction.

Controls of COVID-19 Hazards

Physical Distancing

Where possible, we ensure at least six feet of physical distancing at all times in our workplace by:

Relocating furnishings to distance employees and students

Encouraging compliance with the 6' rule

Eliminating the need for workers to be in the workplace - e.g., telework or other remote work arrangements Reducing the number of persons in an area at one time, including visitors

Implementing visual cues such as signs and floor markings to indicate where employees and others should be located or their direction and path of travel

Staggering arrival, departure, work, and break times

Adjusting work processes or procedures to allow for greater distance between employees

Transitioning to videoconference meetings

Cohorting of students

Individuals will be kept as far apart as possible when there are situations where six feet of physical distancing cannot be achieved.

Face Coverings

We provide clean, undamaged face coverings and ensure they are properly worn by employees over the nose and mouth when indoors, and when outdoors and less than six feet away from another person, including non-employees, and where required by orders from the California Department of Public Health (CDPH) or local health department.

- The office will provide a face covering to students who inadvertently fail to bring one to campus to prevent unnecessary exclusions.
- A face shield has been provided to each employee and to certain students who may need them for special instruction, i.e., speech therapy. Cleaning wipes specifically purposed for cleaning these plastic shields have been provided to each site office for distribution within the school. Face masks have been provided to both staff and students via each school site office. Additional supplies are available by contacting the District Office.
- Students must wear face coverings during arrival/dismissal, all times on campus except for during recess and PE.
- Visitors must also wear face coverings entering and exiting campus.
- All students have been given a container to store his/her face covering whenever it is removed (for meals, snacks, outdoor activities, etc.)
- Exemptions from wearing face coverings may be made for the following reasons:
 - Breathing Difficulties (documented by a doctor's note – a face shield must be worn)
 - Special Needs Students (documented and included in the student's IEP or 504 Plan)
- A verbal reminder will take place when staff or students are not wearing their face covering correctly.

- When an employee is alone in a room.
- While eating and drinking at the workplace, provided employees are at least six feet apart and outside air supply to the area, if indoors, has been maximized to the extent possible.
- Employees wearing respiratory protection in accordance with CCR Title 8 section 5144 or other safety orders.
- Employees who cannot wear face coverings due to a medical or mental health condition or disability, or who are hearing-impaired or communicating with a hearing-impaired person. Alternatives will be considered on a case-by-case basis.
- Specific tasks that cannot feasibly be performed with a face covering, where employees will be kept at least six feet apart.

Any employee not wearing a face covering, face shield with a drape or other effective alternative, or respiratory protection, for any reason, shall be at least six feet apart from all other persons unless the unmasked employee is tested at least twice weekly for COVID-19.

Engineering controls

We implement the following measures for situations where we cannot maintain at least six feet between individuals:

- Solid partitions are used in high traffic areas (i.e. the office, cafeteria, small group instruction tables) and on student desks, as needed.
- Student cohorts and seating charts are used to reduce exposure and identify close contacts.

We maximize, to the extent feasible, the quantity of outside air for our buildings with mechanical or natural ventilation systems by:

- Changing air filters frequently
- Encouraging staff to regularly open windows and doors when the weather permits, and hold physical education/music class outside, whenever possible
- Maintaining and adjusting the ventilation system

Cleaning and disinfecting

We implement the following cleaning and disinfection measures for frequently touched surfaces:

- Utilize aerosol spray/fogging machines
- Daily disinfection
- Washing and cleaning with approved COVID-killing products
- Reminding students to wash their hands regularly
- Using hand-sanitizer when appropriate
- Ensuring adequate staff, supplies, and time for cleaning to be done properly
- Informing the employees and authorized employee representatives of the frequency and scope of cleaning and disinfection

Should we have a COVID-19 case in our workplace, we will implement the following procedures:

We will follow the Shasta County Health Department guidelines.

Shared tools, equipment and personal protective equipment (PPE)

PPE must not be shared, e.g., gloves, goggles and face shields.

Items that employees come in regular physical contact with, such as phones, headsets, desks, keyboards, writing materials, instruments and tools must also not be shared, to the extent feasible. Where there must be sharing, the items will be disinfected between uses by:

- Employees will be expected to clean/sanitize materials between use
- Materials and training will be provided to employees to do clean/sanitize themselves

Sharing of vehicles will be minimized to the extent feasible, and high-touch points (for example, steering wheel, door handles, seatbelt buckles, armrests, shifter, etc.) will be disinfected between users.

Hand sanitizing

In order to implement effective hand sanitizing procedures, we:

- Evaluated and installed hand-sanitizer stations throughout the schools
- Distributed hand-sanitizer and soap throughout the school buildings
- Encourage frequent hand washing before eating and after recess
- Model proper hand washing protocols with students
- Prohibit use of hand sanitizers that contain methanol (i.e. methyl alcohol)
- Encourage employees and students to wash their hands for at least 20 seconds each time.

Personal protective equipment (PPE) used to control employees' exposure to COVID-19

We evaluate the need for PPE (such as gloves, goggles, and face shields) as required by CCR Title 8, section 3380, and provide such PPE as needed.

When it comes to respiratory protection, we evaluate the need in accordance with CCR Title 8 section 5144 when the physical distancing requirements are not feasible or maintained. [reference section 3205(c)(E) for details on required respirator and eye protection use.]

We provide and ensure use of eye protection and respiratory protection in accordance with section 5144 when employees are exposed to procedures that may aerosolize potentially infectious material such as saliva or respiratory tract fluids.

Investigating and Responding to COVID-19 Cases

This will be accomplished by using the Appendix C: Investigating COVID-19 Cases form.

Employees who had potential COVID-19 exposure in our workplace will be Offered COVID-19 testing at no cost during his/her working hours.

System for Communicating

Our goal is to ensure that we have effective two-way communication with our employees, in a form they can readily understand, and that it includes the following information:

- Who employees should report COVID-19 symptoms and possible hazards to, and how:
- * Employees should report COVID 19 Symptoms to the Site COVID 19 Liaison either verbally or electronically.
- * Our COVID 19 Liaison will work with the health staff to complete the contact tracing, and send appropriate notifications to staff, students, and parents who are identified as close contacts.
- That employees can report symptoms and hazards without fear of reprisal.
- Our procedures or policies for accommodating employees with medical or other conditions that put them at increased risk of severe COVID-19 illness.
- Where testing is not required, how employees can access COVID-19 testing:
- In the event we are required to provide testing due to a workplace exposure or outbreak, we will communicate the instructions to obtain testing, inform affected staff of the reason for the testing and the possible consequences of a positive test. Should it become necessary for us to mandate testing of our employees, they will be referred to a COVID test site during his/her regular scheduled work day or outside of that regular work day if the employee is amenable. If more than two (2) positive cases occur on a site within a period of 14 days, the site will be closed and students will be migrated to distance learning to allow for additional cleaning and disinfection.
- Information about COVID-19 hazards employees (including other employers and individuals in contact with our workplace) may be exposed to, what is being done to control those hazards, and our COVID-19 policies and procedures.

Information about COVID-19 hazards has been communicated through signage, notes, and calls home, as well as various technology notifications.

Templated notifications have been developed and distributed.

Recordkeeping procedures are in place, and employees and students are notified when they are required to quarantine and for what duration.

Training and Instruction

We will provide effective training and instruction that includes:

- Our COVID-19 policies and procedures to protect employees from COVID-19 hazards.
- Information regarding COVID-19-related benefits to which the employee may be entitled under applicable federal, state, or local laws.
- The fact that:
 - COVID-19 is an infectious disease that can be spread through the air.
 - COVID-19 may be transmitted when a person touches a contaminated object and then touches their eyes, nose, or mouth.
 - An infectious person may have no symptoms.
- Methods of physical distancing of at least six feet and the importance of combining physical distancing with the wearing of face coverings.
- The fact that particles containing the virus can travel more than six feet, especially indoors, so physical distancing must be combined with other controls, including face coverings and hand hygiene, to be effective.

- The importance of frequent hand washing with soap and water for at least 20 seconds and using hand sanitizer when employees do not have immediate access to a sink or hand washing facility, and that hand sanitizer does not work if the hands are soiled.
- Proper use of face coverings and the fact that face coverings are not respiratory protective equipment - face coverings are intended to primarily protect other individuals from the wearer of the face covering.
- COVID-19 symptoms, and the importance of obtaining a COVID-19 test and not coming to work if the employee has COVID-19 symptoms.

Appendix D: COVID-19 Training Roster will be used to document this training.

Exclusion of COVID-19 Cases

Where we have a COVID-19 case in our workplace, we will limit transmission by:

- Ensuring that COVID-19 cases are excluded from the workplace until our return-to-work requirements are met.
- Excluding employees with COVID-19 exposure from the workplace for 14 days after the last known COVID-19 exposure to a COVID-19 case.
- Continuing and maintaining an employee’s earnings, seniority, and all other employee rights and benefits whenever we’ve demonstrated that the COVID-19 exposure is work related. This will be accomplished by
- Providing employees at the time of exclusion with information on available benefits.

Reporting, Recordkeeping, and Access

It is our policy to:

- Report information about COVID-19 cases at our workplace to the local health department whenever required by law, and provide any related information requested by the local health department.
- Report immediately to Cal/OSHA any COVID-19-related serious illnesses or death, as defined under CCR Title 8 section 330(h), of an employee occurring in our place of employment or in connection with any employment.
- Maintain records of the steps taken to implement our written COVID-19 Prevention Program in accordance with CCR Title 8 section 3203(b).
- Make our written COVID-19 Prevention Program available at the workplace to employees, authorized employee representatives, and to representatives of Cal/OSHA immediately upon request.
- Use the **Appendix C: Investigating COVID-19 Cases** form to keep a record of and track all COVID-19 cases. The information will be made available to employees, authorized employee representatives, or as otherwise required by law, with personal identifying information removed.

Return-to-Work Criteria

- COVID-19 cases with COVID-19 symptoms will not return to work until all the following have occurred:
 - At least 24 hours have passed since a fever of 100.4 or higher has resolved without the use of fever-reducing medications.
 - COVID-19 symptoms have improved.
 - At least 10 days have passed since COVID-19 symptoms first appeared.
- COVID-19 cases who tested positive but never developed COVID-19 symptoms will not return to work until a minimum of 10 days have passed since the date of specimen collection of their first positive COVID-19 test.
- A negative COVID-19 test will not be required for an employee to return to work.
- If an order to isolate or quarantine an employee is issued by a local or state health official, the employee will not return to work until the period of isolation or quarantine is completed or the order is lifted. If no period was specified, then the period will be 10 days from the time the order to isolate was effective, or 14 days from the time the order to quarantine was effective.

Superintendent

J. Provence

January 15, 2021

Title of Owner or Top Management Representative

Signature

Date

COVID-19 Prevention Program

Appendix B: COVID-19 Inspections

Date: _____ Person conducting the inspection: _____

Work location evaluated: _____

Exposure Controls	Status Good	Needs Correction	Person Assigned to Correct	Date Corrected
Engineering				
Barriers/partitions				
Ventilation (fresh air and filtration maximized)				
Additional room air filtration				
Administrative				
Physical distancing				
Surface cleaning and disinfection (frequency and adequate supplies)				
Hand washing facilities (adequate numbers and supplies)				
Disinfecting & hand sanitizing solutions being used according to manufacturer instructions				
PPE (not shared, available and being worn)				
Face coverings (cleaned sufficiently often)				
Gloves				
Face shields/goggles				
Respiratory protection				

Appendix C: Investigating COVID-19 Cases

All personal identifying information of COVID-19 cases or symptoms and all employees' medical records will be kept confidential and not disclosed or reported without the employee's express written consent to any person within or outside the workplace.

Date: _____ **Person conducting the investigation:** _____

EE identification # (or non-employee* name):		Purpose for presence in the workplace:	
EE work location (or where non-employee was present in the workplace):		Date investigation was initiated:	
Was COVID-19 test offered?		Name/s of staff involved in the investigation:	
Date and time the COVID-19 case was last present in the workplace:		Date of the test result and/or diagnosis:	
Date the case first had one or more COVID-19 symptoms:		Info received regarding COVID-19 test results and onset of symptoms (may attach documentation):	
Results of the evaluation & workplace locations visited by the COVID-19 case during high-risk exposure period, and who may have been exposed (may attach additional information):			
COVID exposure notifications given: (within 1 business day, not revealing personal identifying info of COVID case)			
EE who had COVID-19 exposure and their auth. representatives.	Date:		
	Names of employees that were notified:		
Others present during the high-risk exposure period.	Date:		
	Names of individuals that were notified:		
Were there workplace conditions that may have contributed to the risk of COVID-19 exposure?		What could be done to reduce exposure to COVID-19?	
Was local health department notified?		Date:	

*Should an employer be made aware of a non-employee infection source COVID-19 status.

