

Date: 08/11/21

2021 COVID-19 School Guidance Checklist

Name of Local Educational Agency or Equivalent:

Fallbrook Union Elementary School District

Number of schools:

9

Enrollment:

5,125

Superintendent (or equivalent) Name:

Dr. Candace Singh

Address:

321 Iowa Street

Phone Number:

760-731-5400

City

Fallbrook

Email:

bmorris@fuesd.org

Date of proposed reopening:

August 11, 2021

County:

San Diego

Current Tier:

(please indicate Purple, Red,
Orange or Yellow)

Type of LEA:

Public School District

Grade Level (check all that apply)

X TK

X 2nd

X 5th

X 8th

11th

X K

X 3rd

X 6th

9th

12th

X 1st

X 4th

X 7th

10th

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, per the [Guidance on Schools](#).

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:

- X I, Brian Morris, 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:

COVID-19 Prevention Program Plan, 2021 California Department of Public Health Guidance for Schools, COVID-19 School Guidance Checklist

- X **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.

See reopening plan guidance section Implementing distance inside and outside the classroom Page 8 & 9

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?)

20-30 students and 1 staff per classroom, stable group, in TK-8

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

NA Middle School student maintain a stable group all day with 6 periods and have drop off/pick up areas by cohorts and directional pathways.

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

Electives have seating charts, distancing, and is the only class that varies in the co-hort.

- X **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.

See reopening plan guidance section Implementing distance inside and outside the classroom Page 8.

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

See reopening plan guidance section Face Covering Page 6

- X **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.

See reopening plan guidance section Check for Signs and Symptoms Page 13 & section Plan for When a Staff Member, Child or Visitor Becomes Sick Page 14

- X **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.

See reopening plan guidance section Promote Healthy Hygiene Practices Page 3 - 5

- X **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.

See reopening plan guidance section Plan for When a Staff Member, Child or Visitor Becomes Sick Page 14 & Maintain Healthy Questions Page 15

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

See reopening plan guidance section Implementing distance inside and outside the classroom Page 8 - 11

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

Maximum: 6 feet

Minimum 3 feet

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

Teacher - student distance is maintained at 6ft from desk and students desks are 3 feet chair to chair due to square footage in the classroom.

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

See reopening plan guidance section Train All Staff and Educate Families Page 12

- X **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.

Testing for unvaccinated is weekly and not required for staff who provide proof of vaccination.

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

On site testing will be offered to support monitoring of unvaccinated staff.

- X **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.

On site testing will be offered, see the decision tree.

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

Student on site testing is offered for students who have experienced positive exposure and/ symptoms.

- ☒ **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](#).

See reopening plan guidance section Check for Signs and Symptoms & Plan for When a Staff Member, Child or Visitor Becomes Sick Pages 13 - 14

- ☒ **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.

Information is on the District website

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

FETA & CSEA

- ☒ Labor Organization

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

Name: FETA / CSEA

Date: July 27, 2021 /

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:

NA

Appendix E: Documentation of Employee COVID-19 Vaccination Status – CONFIDENTIAL

| Employee Name | Fully or Partially Vaccinated ¹ | Method of Documentation ² |
|---------------|--|--------------------------------------|
| | | |

¹Update, accordingly and maintain as confidential medical record

²Acceptable options include:

- Employees provide proof of vaccination (vaccine card, image of vaccine card or health care document showing vaccination status) and employer maintains a copy.
- Employees provide proof of vaccination. The employer maintains a record of the employees who presented proof, but not the vaccine record itself.
- Employees self-attest to vaccination status and employer maintains a record of who self-attests.

Additional Consideration #1

Multiple COVID-19 Infections and COVID-19 Outbreaks

This addendum will stay in effect until there are no new COVID-19 cases detected in the exposed group for a 14-day period.

COVID-19 testing

- We provide COVID-19 testing at no cost to all employees, during paid time, in our exposed group except for:
 - Employees who were not present during the relevant 14-day period.
 - Employees who were fully vaccinated before the multiple infections or outbreak and who do not have symptoms.
 - COVID-19 cases who did not develop symptoms after returning to work pursuant to our return-to-work criteria, no testing is required for 90 days after the initial onset of symptoms or, for COVID-19 cases who never developed symptoms, 90 days after the first positive test.
- COVID-19 testing consists of the following:
 - All employees in our exposed group are immediately tested and then again one week later. Negative COVID-19 test results of employees with COVID-19 exposure will not impact the duration of any quarantine, isolation, or exclusion period required by, or orders issued by, the local health department.
 - After the first two COVID-19 tests, we continue to provide COVID-19 testing once a week of employees in the exposed group who remain at the workplace, or more frequently if recommended by the local health department, until there are no new COVID-19 cases detected in our workplace for a 14-day period.
 - We provide additional testing when deemed necessary by Cal/OSHA.

We continue to comply with the applicable elements of our CPP, as well as the following:

1. Employees in the exposed group wear face coverings when indoors, or when outdoors and less than six feet apart (unless one of the face-covering exceptions indicated in our CPP apply).
2. We give notice to employees in the exposed group of their right to request a respirator for voluntary use if they are not fully vaccinated.
3. We evaluate whether to implement physical distancing of at least six feet between persons, or where six feet of physical distancing is not feasible, the need for use of cleanable solid partitions of sufficient size to reduce COVID-19 transmission.

COVID-19 investigation, review and hazard correction

We immediately perform a review of potentially relevant COVID-19 policies, procedures, and controls and implement changes as needed to prevent further spread of COVID-19.

The investigation and review is documented and includes:

- Investigation of new or unabated COVID-19 hazards including:
 - Our leave policies and practices and whether employees are discouraged from remaining home when sick.
 - Our COVID-19 testing policies.
 - Insufficient outdoor air.
 - Insufficient air filtration.
 - Lack of physical distancing.
- Updating the review:
 - Every thirty days that the outbreak continues.

- In response to new information or to new or previously unrecognized COVID-19 hazards.
 - When otherwise necessary.
- Implementing changes to reduce the transmission of COVID-19 based on the investigation and review. We consider:
 - Moving indoor tasks outdoors or having them performed remotely.
 - Increasing outdoor air supply when work is done indoors.
 - Improving air filtration.
 - Increasing physical distancing as much as feasible.
 - Requiring respiratory protection in compliance with section 5144.

Buildings or structures with mechanical ventilation

We will filter recirculated air with Minimum Efficiency Reporting Value (MERV) 13 or higher efficiency filters, if compatible with the ventilation system. If MERV-13 or higher filters are not compatible, we will use filters with the highest compatible filtering efficiency. We will also evaluate whether portable or mounted High Efficiency Particulate Air (HEPA) filtration units or other air cleaning systems would reduce the risk of transmission and, if so, implement their use to the degree feasible.

Additional Consideration #2

Major COVID-19 Outbreaks

This addendum will stay in effect until there are fewer than three COVID-19 cases detected in our exposed group for a 14-day period.

We continue to comply with the Multiple COVID-19 Infections and COVID-19 Outbreaks addendum, except that the COVID-19 testing, regardless of vaccination status, is made available to all employees in the exposed group twice a week, or more frequently if recommended by the local health department.

In addition to complying with our CPP and Multiple COVID-19 Infections and COVID-19 Outbreaks addendum, we also:

- Provide employees in the exposed group with respirators for voluntary use in compliance with section 5144(c)(2) and determine the need for a respiratory protection program or changes to an existing respiratory protection program under section 5144 to address COVID-19 hazards.
- Separate by six feet (except where we can demonstrate that six feet of separation is not feasible and there is momentary exposure while persons are in movement) any employees in the exposed group who are not wearing respirators required by us and used in compliance with section 5144. When it is not feasible to maintain a distance of at least six feet, individuals are as far apart as feasible.
- Install cleanable solid partitions that effectively reduce transmission between the employee and other persons at workstations where an employee in the exposed group is assigned to work for an extended period, such as cash registers, desks, and production line stations, and where the physical distancing requirement (described above) is not always maintained.
- Evaluate whether to halt some or all operations at the workplace until COVID-19 hazards have been corrected.
- Implement any other control measures deemed necessary by Cal/OSHA.

Additional Consideration #3

COVID-19 Prevention in Employer-Provided Housing

Assignment of housing units

We, to the extent feasible, reduce employee exposure to COVID-19 by assigning employee residents to distinct groups and ensure that each group remains separate from other such groups during transportation and work. Shared housing unit assignments are prioritized in the following order:

- Residents who usually maintain a household together outside of work, such as family members, will be housed in the same housing unit without other persons.
- Residents who work in the same crew or work together at the same workplace will be housed in the same housing unit without other persons.
- Employees who do not usually maintain a common household, work crew, or workplace will be housed in the same housing unit only when no other housing alternatives are feasible.

Ventilation

We ensure maximization of the quantity and supply of outdoor air and increase filtration efficiency to the highest level compatible with the existing ventilation system in housing units. If there is not a Minimum Efficiency Reporting Value (MERV) 13 or higher filter in use, portable or mounted HEPA filtration units are used, where feasible, in all sleeping areas in which there are two or more residents who are not fully vaccinated.

Face coverings

We provide face coverings to all residents and provide information to residents on when they should be used in accordance with state or local health officer orders or guidance.

Cleaning and disinfection

We ensure that:

- Housing units, kitchens, bathrooms, and common areas are effectively cleaned to prevent the spread of COVID-19. Housing units, kitchens, bathrooms, and indoor common areas are cleaned and disinfected after a COVID-19 case was present during the high-risk exposure period, if another resident will be there within 24 hours of the COVID-19 case.

See Safe School Reopening Plan Page 7

- Cleaning and disinfecting is done in a manner that protects the privacy of residents.
- Residents are instructed to not share unwashed dishes, drinking glasses, cups, eating utensils, and similar items.

Screening

We encourage residents to report COVID-19 symptoms to

COVID-19 testing

We establish, implement, maintain and communicate to residents' effective policies and procedures for COVID-19 testing of residents who had a close contact or COVID-19 symptoms.

COVID-19 cases and close contacts

We:

- Effectively quarantine residents who have had a close contact from all other residents. Effective quarantine includes providing residents who had a close contact with a private bathroom and sleeping area, with the following exceptions:
 - Fully vaccinated residents who do not have symptoms.
 - COVID-19 cases who have met our return-to-work criteria and have remained asymptomatic, for 90 days after the initial onset of symptoms, or COVID-19 cases who never developed symptoms, for 90 days after the first positive test.
- Effectively isolate COVID-19 cases from all residents who are not COVID-19 cases. Effective isolation includes housing COVID-19 cases only with other COVID-19 cases and providing COVID-19 case residents with a sleeping area and bathroom that is not shared by non-COVID-19-case residents.
- Keep confidential any personal identifying information regarding COVID-19 cases and persons with COVID-19 symptoms, in accordance with our CPP **Investigating and Responding to COVID-19 Cases**.
- End isolation in accordance with our CPP **Exclusion of COVID-19 Cases and Return to Work Criteria**, and any applicable local or state health officer orders.