

MMCA Parent Q&A regarding COVID-19 Reopening

Brief Introduction:

Fyi parents: I did this same Q&A Activity with our staff. This is an unprecedented situation - I want to be as transparent as possible on this - while I'm not going to share every question/response and some things I've slightly edited, I have included the staff Q&A as well. Between the parent and staff questions, I believe they address almost all possible question and concern areas regarding school reopening.

Within our community, I think it's fair to say different people have different opinions on how to handle COVID-19 and schools. Our reopening plan is based on what we believe is in the best interests of our students and our staff. In particular, Pediatricians, School Nurses and School Psychologists were consulted for this plan, and their opinions heavily influenced the final content.

Thanks all,
Brent

MMCA Parent Q&A's:

Q: School will be open 5 days a week on regular schedule?

- That is the plan.

Q: What is a UV-C light, how does it work, and who will be doing this?

- UV-C sanitation devices are based on ultraviolet-C light that with enough exposure deactivate viral cells. Hospitals and subways are recent examples of their use with COVID-19. MMCA School staff only will use these devices, which will clean recess and PE equipment, as well as technology devices.

Q: Increased sanitation sounds great, but are you hiring extra help so this is done twice a day? Sanitation of high touch surfaces didn't seem to be regularly happening prior to the shut down.

- We will be able to follow the C.D.C. guidelines as detailed in the plan.

Q: Air filtration...There are no studies proving the efficacy of this air filtration system against SARS-CoV-2 (Covid-19), yet it is being installed so that masks (which have preliminary data showing a reduction in Covid-19 spread by as much as 40%). This is concerning to me. Please explain the data behind this decision.

- The air purification/filtration systems we're installing have been independently certified 99%+ effective against all known bacteria, molds and viruses, including SARS-COVID-1, which is extremely similar to SARS-COVID-2. Hydrogen Peroxide is on the approved list of disinfectants for COVID-2. Ionized hydrogen peroxide will kill COVID-2 particles in the same way, whether in the air or on the surface.
- Masks: If the state/county mandates student mask usage, we will follow the mandate.

Q: How was Edgenuity chosen as the virtual option? It has very poor reviews from teachers and students.

- It's the virtual program that Rocklin Unified historically uses with its Independent Study Program and Victory High School (under its sub-brand name Odysseyware). Western Placer uses it for AP courses they don't have teachers for (as does Folsom Cordova and Elk Grove). After the PG&E related school closures for poor air quality and fire concerns, I evaluated several virtual programs, as I wanted a back-up option in a school closure scenario. While I admittedly don't 'love' any of them, I like Edgenuity the best. Edgenuity Courses 1) meet all of the state standards, 2) have been A-G certified, 3) are UC-CSU approved. In the past 18 months I have had a couple kids pilot different programs, including my own son completing (12) Edgenuity Courses. I know the programs strengths and limitations, and when we're able to transition our students back into the classroom, I believe it gives us the best shot of getting them back up to speed quickly.

Q: Have the schools become aware of the threat of toxicity of certain brands of hand sanitizer? I believe that the cdc has a list.

- Yes, we're aware of the approved hand sanitizer, and the state is supplying us gallons of it.

Q: Do kids have to wear masks?

Q: Isn't wearing mask a huge role on keeping our kids and staff safe?

Q: Masks are optional at mmca? I thought the state was mandating masks so how can school make them optional?

- As of today, we're suggesting mask use, but not mandating it. If the state/county mandate it, we'll have to follow it. Even if a mandate happens for schools, I highly doubt it will be for kids 3rd grade and younger.
- There are conflicting viewpoints regarding students and masks. The CDPH and CDE guidance for schools (as of 7/15/20) recommend masks, they don't mandate it.

Q: Will there be a sports program?

- Yes. Seasons may get moved around, and there may be restrictions on the number of fans, but the league is currently planning sports.

Q: What will aftercare look like?

- Pretty similar to prior years. Differences include 1) temperature checks before entering the room, 2) parents will not be allowed in the room - electronic sign-out outside the classroom.

Q: Will there still be after school clubs?

- Yes, but club leaders will have to follow our COVID-19 plan and we'll keep the groups smaller for contact tracing purposes.

Q: How will pick up work?

- Pretty similar as before - main difference will be we are not going to allow parents onto campus (defined by the black fences & gates up front). We are going to highly encourage parents of younger students to do the pick-up lane, and parents of older students may park on the driveway, at the church, etc.

Q: How are we looking in regards to having a girls basketball season in the Fall?

- Assuming we're allowed to play, I think both teams look pretty good. There's still high probabilities there will be seasons....the unknown is when.

Q (comment): I work in healthcare and after looking over this plan, I am VERY comfortable sending my child back to school. KUDOS to you guys!!!! This is an AMAZING plan of action and it is unfortunate that other schools don't follow this, or attempt to!

Q: If we do go back in person, but it turns out masks for students are required, can we opt out for the distance program at that time?

- Yes

Q: How will new incoming students' education level be evaluated and determined when participating in the Edgenuity distance learning program?

- There will be some orientation meetings beforehand, but generally speaking, Edgenuity courses will be grade level based. There are some elective options at the junior high level.

Q: Will all distance learning students be assigned to a classroom, regardless of the program they choose to participate in? (ie: Edgenuity or Independent Study) If so, when will the students and/or parents be notified of the assigned classroom?

- Yes. Rosters will be posted most likely the Friday afternoon before school starts.

Q: Is there a way to access Edgenuity prior to the beginning of classes, in order for new incoming students and parents to familiarize themselves with the program?

- Yes. There will be an orientation and program introduction before school starts. This is why we're having our RSVP for educational delivery method choice due by July 31st.

Q: Will distance learning students have Zoom (or the like) type meetings with teachers, or any type of communication with other students in the assigned classroom?

- No, Edgenuity is a self-contained program with a mix of predominantly video-based lessons, some live (Edgenuity based) teacher lessons, and Edgenuity-based teacher office hours for questions and tutoring.

Q: Will the assigned teachers in the Edgenuity program be from the MMCA staff? If not, will these assigned Edgenuity teachers be in communication with the student's assigned MMCA teacher?

- It will be Edgenuity employed teachers. We will have access to all completed assignments, quizzes, tests, etc. by topic, standard and subject, so we will have a very good idea of where the student is at when they are able to come back.

Q: What are the dates of each quarter-based increment for when you will be re-evaluating Placer County's Phase level?

- Placer County could enter Phase 4 at any time (though it's not looking likely any time soon). Edgenuity quarters are approximately 9 weeks each. October 1st is what we're thinking right now.

Q: If we decide to participate in a distance learning program, how and when will we be able to select that option?

- The deadline to select all 3 of the options will be July 31st.

Q: If we have been participating in Edgenuity, and we are part way through a quarter, and then feel that it is safe enough for our child to return to in-class instruction, do we have to wait until the end of that quarter for them to return to the classroom?

- If the County is in 'Phase 4', we'll let people transition back at any time; if it's not, the transitions will be at the quarterly increments.

Q: If Placer County reaches Phase 4 within this school year, and we have been participating in a distance learning program, will we have the option of participating in the Hot Lunch program (which may also include breakfast)? And if so, should we apply prior to the school year, or wait until our child attends in-class instruction?

- All families at all times during the school year will be able to participate in the Hot Lunch and (probably happening) breakfast program. We will have to designate a specified pickup time for distance learners to pick their lunches up.

Q: We pre-ordered school supplies and a school uniform T-shirt in hopes that we reach Phase 4 in the near future, but are wondering if these items will be shipped to our home address, or will we need to pick them up at the school?

- Supplies we're going to keep at school; uniforms, when available will be able to be picked up from the office when they arrive.

Q: How can I help??? We appreciate all the work the admin and teachers are doing and trust in the decisions you've made! So how can I help support you? What can I tell my kids to make the transition back to school easier for them and teachers? How can I help if parent volunteers are not an option yet?

- I think as parents we need to talk to our kids and explain why things are going to be a little different than the past. Especially for our younger students, who are not going to have a clue about any of this, they are going to take a while to get up to speed ("why can't I hug my friend?"). The more we can prepare them beforehand, the better off everyone will be.

Q: How will the school handle students that maybe showing signs of COVID 19? Will there be a place for isolation until parent's pick them up? Well their class have to quarantine? How will reduce the spread if possible exposure to others? Will temperatures be checked through out the day?

- As detailed in the plan, for students showing multiple symptoms, we will do a temperature check. If there's a fever, the student will be isolated in the Conference Room with a mask until the parent picks the child up.
- We are asking parents to check their child's temperature before they come to school; additionally, we are checking temperatures before they enter their classroom when the morning bell rings. Temperature checks will occur throughout the day for students whom we suspect may be sick.
- The County Public Health Office, who is notified of every COVID-19 positive case, will handle any quarantine decisions.

Q: We are not sure if we will be able to attend as we are between homes right now, but if Jxxxx is required to wear a mask all day during school, we cannot send him since he is asthmatic. Our preference for school is FT, 5 days, no masks. Please let us know if masks will be required to attend if/when you know. Thanks.

- Masks are currently optional for students; if they become mandatory, a face shield should be a good alternative.

Q: I am all for sending my children back to school, except if masks are required. I do not believe that young children will be able to leave their masks alone on their face without constantly touching them and then therefore transmitting all sorts of germs and bacteria to their eyes, nose, and mouth. Will there be an option that will accommodate this? In other words sending them to school as long as no masks are required but transitioning to home schooling options if masks do become required?

- Masks are currently optional for students; if they become mandatory, a face shield should be a good alternative. We could accommodate a transition to our virtual learning option (Edgenuity) with this circumstance.

Q: If mask is mandatory and if so, is there a school color policy for the mask? Will there be normal recess and lunch? How will assemblies work? Field trips?

- Beyond no vulgarity, no color policies on masks at this point
- Lunch/recess: Will now be in (4) groups (versus normal 3) to allow for two lunch tables per classroom (normally we fit 1 class per table)
- Assemblies/field trips: We won't have any until Placer County reaches Phase 4.

Q: The PDF document previously provided has not addressed the online program for pre-school program (Children's House). As our son is enrolled next year, we will be choosing the 100% full distance/remote option, what online program will be available? How will the tuition be modified?

- If we are placed in a COVID shutdown that closes our preschool, we will not charge our families tuition for every day we are not in session.
- I do not believe it's developmentally appropriate for preschoolers to have a bunch of 'screen time', so we would not be doing an on-line program for our private preschool during COVID shutdowns.
- It's looking like (and this stuff is constantly changing) public schools and private licensed child care facilities are going to be treated differently this fall - even if public schools are placed into a distance learning mode via the county/state, it's at least 60/40 that childcare facilities will remain open. It's possible that even if our K-8 program is in distance learning, Children's House could still be in session.

Q: My biggest concern is that if we are mandated to do distance learning that there is not enough contact with the teachers and my daughter just "goes through the motions" and isn't actually learning what she needs to learn.

- On balance, last spring we had the most aggressive distance learning program in the county. By comparison, the neighboring school districts basically stopped teaching, effectively only getting through $\frac{2}{3}$ of the curriculum. That said, I recognize we have areas we need to improve if we are put back into distance learning. Since there is no lockdown in place, even if schools are closed, we will be able to bring small groups of students onto campus for assessments and follow ups. We will also be increasing the frequency and quantity of our Zoom-based lessons.

Staff Q&A on COVID related concerns

Assumptions reflected within this Q&A – you’ll see them throughout the Q&A and as the underlying basis of the COVID-19 reopening plan.

Base assumptions:

- 1) Anyone that can tell you with certainty what’s going to happen tomorrow, next week, next month, next year, etc. is kidding themselves – I believe we should assume continuous fluctuations and changes and prepare accordingly.
- 2) We’re going to pretty much do whatever the County Health Doctor says we have to do, whether related to masks, distancing, on-site vs. distance-based delivery models, etc.
- 3) As the state’s COVID-19 evaluative benchmarks keep changing, I would not be surprised at all if we are placed back into distance learning during this school year – even at the beginning of the year.
 - a. Additionally, probability would state that at some point we’re going to get COVID-19 cases; with certain thresholds, it’s likely a classroom, grade-level grouping or the whole school could be placed in up to 2 weeks of temporary distance learning
 - b. As you are preparing for the new school year, I would be doing so in a way that allows for a quick transition to distance learning.
- 4) Since distance learning was pretty much a total disaster elsewhere in the state, the budget bill that was passed two weeks ago significantly changes the rules of ‘distance learning’, including for ‘hybrid’ models. It mandates DAILY LIVE TEACHER contact with minimum minutes required by grade level.
- 5) General COVID-19 risk exposure:
 - a. Defining ‘child’ as kids ages 15 and under, there is minimal evidence of child to child transmission of COVID-19.
 - i. Further, there is minimal evidence of COVID-19 affecting children (one example: nobody under age 17 has died of COVID-19 in California)
 - b. There is minimal evidence of child to adult transmission of COVID-19.
 - i. All of the COVID-19 cluster studies done in Europe the past two months during their school re-opening backs up ‘a’ and ‘b’
 - ii. The American Academy of Pediatrics (AAP) and its 67,000 members agrees with this as well and it’s one of the main reasons they’re advocating for a full return to physical school.
 1. AAP also believe that the harm caused from the lack of academic instruction during distance education and the overall mental health of children should be key in COVID-19 reopening plans
 - c. There is evidence of adult to adult COVID-19 transmission, and the plan is geared toward that.

- i. There is also evidence that almost all child infections of COVID-19 are related to adult to child transmissions.
- 6) As the reopening plan specifies, it uses information and guidelines available from dozens of sources. It also reflects consultations with public health officials, doctors (particularly pediatricians), school psychologists, teachers and school nurses. It's not perfect and it's going to evolve.

Q&A:

Q: If a student I am in contact with tests positive, will I need to quarantine?

Q: If a student tests positive, what does that mean for the rest of the students in the class?

What if a parent of a student in the class tests positive?

- Depends, and will be dictated by the County Health Doctor. Last threshold I heard her using was 'sustained close contact of more than 30 minutes'. Generally, she's taken the position that if you're physically distancing from others you haven't been in 'sustained close contact.'
- It's possible that the County Health Doctor will put the whole class into quarantine with one positive case; it's probable she will at two or more probable cases. If the whole class is placed into quarantine, we would instantly convert that class into a temporary distance learning model (similar to Spring).
- We (meaning every public school in the county) have been told to be ready for (and expect at some point in the school year that it will happen):
 - o An individual class to be placed in quarantine;
 - o A grade level grouping to be placed in quarantine; and
 - o The entire school to be placed into quarantine

Q: How do we do fire drills under these conditions?

- Start to finish of a fire drill is less than 10 minutes; since this is not a 'sustained close contact', we will continue doing them. Also, given all the cluster studies done thus far worldwide, there are very few examples of 'COVID-19 clusters' from daylight outdoor events (super-majority of the large COVID-19 clusters for people testing positive have been household-related, followed by long term care facilities for the elderly, and then adult entertainment venues like nightclubs/bars). With us continuously moving within an outdoor environment for almost all of a fire drill, I have minimal exposure concerns.
 - o I do think 3' spacing on lines is do-able when we're at our 'line up spot' at the park, and I likewise think we can make sure we have at least 6' between classrooms at the park.

Q: How do we do lockdown drills under these conditions?

- Lockdown drill lasts less than 3 minutes (e.g., not a ‘sustained close contact’), and can still be done with adults physically distanced from each other and the students. They will continue.

Q: How do we do earthquake drills under these conditions?

- Same answer as lockdown drills.

Q: How do we do evacuation drills under these conditions?

- Same answer as fire drills.

Q: Guidelines for the prevention of COVID-19 suggest keeping windows and doors open in order to keep the virus from spreading, do these precautions overrule lockdown precautions about keeping doors and windows shut and locked?

- No, lockdown protocols would supersede the COVID-19 guidelines
- The guidelines were written based on most classrooms in California a) having windows that open and b) having antiquated HVAC Systems. Most newer schools with D.S.A. (Division of State Architect) approved designs (including MMCA) intentionally don’t have windows that can open for security purposes. Likewise, our HVAC systems can bring in outside air in addition to recirculated air within the classrooms, and they will be running continuously with the recommended mix of recirculated/outside air.

Q: How are classrooms being cleaned and disinfected?

- Our plan +/- follows the cleaning guidelines for COVID-19 as recommended by C.D.C.
- Items like Exterior door handles, sinks, community bathrooms, etc. will be getting cleaned throughout the day by the custodians.
- One of the main reasons we’ve installed an air purification system that includes ionized hydrogen peroxide being continuously blown into the room is that it’s going to provide continuous sanitation to every surface area that’s within the room. Ionized H2O2 particles kill every virus or bacteria particle that they come in contact with, whether airborne or on a surface.

Q: Virus particulates are circulated from toilet flushing. School toilets do not have lids. Who will clean the bathrooms - both the general use student ones, teacher ones in the office, and the ones in individual classrooms - after each use?

- Generally, same answer as 15...CDC does recommend more frequent physical cleaning which we will be doing. Additionally, the aerosolized H2O2 from the newly installed air purification systems within each HVAC unit should eliminate any airborne viral particulates from toilet flushing almost instantaneously.

Q: What happens if a parent would like to homeschool or pull their child out and later re-enroll them when there has been a drop in cases?

- As detailed in the reopening plan, assuming the parent is choosing our long-term distance learning option they will be committing for at least 1 quarter* of distance learning. At each quarter interval, they will have the opportunity to either 1) continue distance learning (if the county is not in phase 4 of reopening) or 2) enroll in our site-based program. Parents who choose a different homeschool option than what we're providing are disenrolled from our school, and whether or not they could come back would depend on where they are within our Waiting List at that point.
 - o *1 quarter: Edgenuity, the program that we're going with for our virtual learning option, is quarters-based (while we're trimester based)...we'll be using the quarterly cut-offs as re-enrolling windows into our site-based program.

Q: What safety measures are being put in place for non-teaching staff such as counselors, speech therapists, OT, etc.?

- Generally, the same expectations and measures as expected of the rest of the staff.
- There is minimal evidence of child to adult COVID-19 transmission
- Our Speech, Psych, OT, APE, School Nurse, etc. will all be following similar COVID-19 mitigations on the other sites they serve.
- As adults, each of us choose to go to different grocery stores, gyms, doctor's offices, hair salons, and literally dozens of other entities not listed here. I don't think it's realistic to ask all of us to go to the same places now. The goal of this plan is to minimize COVID-19 transmission risks; even if we end up in complete distance learning mode again, COVID-19 transmission risks will not be fully eliminated.

Q: What options are there for teachers who have asthma?

- Face shields.

Q: Two reusable masks and two disposable masks and a face shield are not enough to properly ensure a teacher does not contract or spread the virus in a fully attended in person setting - what more is going to be done?

- Face shields and cloth masks are reusable.
- This is part of our state-provided PPE allotment. Allegedly, the state will be providing this allotment amount every 2 months during the duration of the pandemic.
- We will backfill face shields, cloth masks, disposable masks, hand sanitizer, etc. as necessary if state allotments are coming up short.

Q: Are there going to be extra masks beyond the two reusable masks/two disposable masks per student in case they have forgotten theirs when they come to school?

- Assuming student mask wearing is mandatory (I'll address students in masks in more detail via a different question), I'd envision parents to provide their mask of choice for their child(ren), and we could use both the cloth masks and disposable masks as backups for when they forget.

Q: What happens if a teacher or assistant needs to make physical contact with a student (example: redirecting a K during lineup)?

- I think we need to keep things within context. Since there's minimal chance of child to adult COVID-19 transmission, as long as we're minimizing our sustained direct contact, there are still going to be times, especially within our PreK-3rd grade age groups, when we're going to have teacher initiated physical contact with a student – if this contact was appropriate pre-COVID-19, it's appropriate during COVID-19.

Q: What about teachers, staff, or students in the Learning Center?

- Same circumstances as our K-8 classrooms.

Q: How will we address the mental health needs of our students in a safe and effective manner considering social distancing and the events of the last six months?

- I think the mental health elements of the COVID-19 shutdown is the best argument for why kids should be back in 'physical school' every day. In my homework on all of this, among many, I've consulted with School Psychologists, School Nurses and Pediatricians while developing the reopening plan. The short answer on this is that all of the people I've talked to within these three groups say that the most effective way to address the mental health needs of our students at school during COVID-19 is to provide them with as 'normal' a school experience as possible given the circumstances. The American Academy of Pediatrics (AAP) generally advocates this position as well.
- With our younger students, we're going to have kids do developmentally 'normal' things like walk up to a teacher and give them a hug. While we as educators shouldn't be encouraging that during COVID-19, I don't want that student 'getting in trouble' for a developmentally appropriate choice. Bigger picture, if we see kids with COVID-19 specific mental health related issues, we can refer to our School Psychologist for a check-in and possible counseling.

Q: How are classes and grade levels, primarily the lower grades and Children's House, which require close contact and collaboration for content and social-emotional development supposed to prevent the virus from spreading?

Q: When it comes to younger students, particularly at our Montessori based school, the curriculum is play-based and hands-on. How will play-based learning work? How will blocks, games, manipulatives, puzzles, etc. be sanitized constantly?

Q: How are we supposed to share textbooks, for example, I do not have a full class set of the text books? How about laptops? Desks when we switch classes? Pencil sharpeners? Etc.?

- Honestly, I don't think it's realistic to expect preK to 3rd grade students to do actions to 'prevent virus from spreading.' Frankly, I think it's debatable to expect 'virus prevention' measures from any student 8th grade and under. What we can do is provide an environment that mitigates the risks, including:
 - o Installing air purification systems with continuous flows of ionized hydrogen peroxide that will eliminate 99%+ of any viral or bacterial particles in the air and on the surfaces of everything within the classrooms, e.g., a near continuous sanitation
 - o Clean common surface contacts (ex. Exterior door handles, sinks, etc.) frequently
 - o More obvious focus on hand hygiene (via handwashing and hand sanitizer use) – example: having kids sanitize their hands in between jobs will minimize the limited chance of any surface-based exposure.
 - o Using UVC devices to sanitize playground and technology-related equipment
 - o Limit the adult 'close contact' interactions with kids; we do this by:
 - Limiting direct teacher – student contact
 - Eliminating non-staff adults from campus during the school day
 - Make available study carrels w/ clear plastic fronts (for desks and tables that don't have at least 3' spacing between them) and vertical plexiglass sheets for use as tabletop dividers for circle tables and kidney tables.
 - Spacing kids out more at lunch time (we'll have 2 lunch tables per class instead of our usual 1 when we go with 4 lunch groups instead of 3).
 - o Again, context: worldwide, I'm not aware of any COVID-19 cluster occurring in a school setting within a preK-8th grade age range. There are a couple high school-based clusters internationally (most recently in Israel), but none 8th grade and under. The current belief is COVID-19 spread is based on adult to adult and adult to child transmission, not child to child or child to adult.

Q: Masks:

- Ultimately, if the County Health Doctor or the state mandates wearing a mask inside, we'll follow it.
- I believe all school districts within the county in their initial plans have student mask wearing as optional; it was about a 60/40 split on mandating staff to wear shields/masks. Here is the basic rationale for why our initial plan has student/staff mask wearing as optional:
 - o The original CDPH and CDE guidelines did NOT mandate masks for students or staff; they suggested their use as a possible mitigation when physical distancing wasn't possible.
 - o There is minimal evidence of child to child and child to adult COVID-19 transmission 8th grade and under.
 - o With almost 3 months worth of data available now worldwide from other countries that have reopened their schools, there has been no material difference in COVID-19 school outbreaks between countries mandating mask wearing at school (ex. South Korea, Japan, Vietnam, etc.) versus countries with optional mask wearing at school for students and staff (Denmark, Norway, Canada, etc.)
 - o Masks in general rationale (paraphrasing the County Health Doctor): With COVID-19 seemingly having so many asymptomatic or mildly symptomatic carriers, masks can limit the spread of aerosolized COVID-19 droplets from sneezes and coughing. They MAY provide the wearer with some protection from getting COVID-19...emphasize MAY because there's not much evidence empirically proving this at this point. Historically, there are studies that show N95 masks and surgical masks can provide some protection against viruses, but not much showing cloth masks can protect you from a virus – there's even recent NIH approved studies on this from a couple years ago that showed the opposite - wearing cloth masks made it more likely you'd catch a virus than someone not wearing a mask.
 - o Bigger picture Q: With elementary aged students, is wearing a mask going to make it more likely or less likely that a student touches their face more? If the answer is more likely, then wearing a mask probably doesn't bring a benefit for the student. There are pediatrician groups, school nurse associations, school psychologist groups, etc. that are essentially of this mindset.
 - Further, I suggest we test ourselves on this as well. Have you tried to wear a cloth mask for 8 straight hours yet without touching your face? Personally, as someone who is very mildly asthmatic myself, I can go about 20 minutes in a mask before I need unimpeded oxygen.
 - o Wearing masks outside: I am not at all a fan of any of our students wearing masks during outdoor play or PE activities, especially during 85 degree plus weather.

Kids don't know their bodies as well as adults do, and I have significant concerns regarding kids choking on their masks during play, having restricted oxygen when they're exerted, and potentially getting mild CO2 poisoning from their breath exhalation being restricted by their masks.

Q: Can I require students to bring all their own materials so they do not have to share in order to minimize transfer of the virus?

- Directly no. Indirectly, some of our classrooms use cubbies and pencil boxes with each of their students for them to keep most of their individual student supplies (pencils, pens, crayons, markers, scissors, etc.) individual, and you could deploy something like that to minimize shared materials.
- There is minimal evidence of surface transfer COVID-19 viral transmission amongst children. Further, our new air purification systems will be providing a continuous flow of ionized hydrogen peroxide that will eliminate 99%+ of all airborne or surface-based virus and bacteria particulates.

Q: What cleaning supplies are we allowed to use in our classrooms that neutralize COVID-19 and will it be provided?

- Any of the ones listed on the C.D.C. 'approved' list. With an air purification system based on ionized hydrogen peroxide, liquid hydrogen peroxide will be one of the cleaners we use, and yes, the school will be providing cleaner.

Q: What is the protocol in a classroom with only one sink on how to have all students wash their hands multiple times a day? What is the protocol to monitor the bathroom numbers and the situation where many students are sharing a single bathroom?

Q: Will bathrooms have monitors to ensure that only a certain number of students enter at a time?

- We're going to have automated hand sanitizer dispensers within each classroom, on the playground, at the lunch area, and in the MPR. If we're going to be having kids wash their hands more frequently, I think it's much more realistic to get a squirt from a no-touch hand sanitizer dispenser and walk away / wipe then having kids stand in line for 30 seconds each washing their hands at a sink.
- General bathroom monitoring: The main student bathrooms are monitored during recess. During class time, given the minimal evidence of student to student COVID transmission and the ionized hydrogen peroxide that will be flowing within the bathrooms, I'm not concerned if there's several kids within a bathroom for a short period of time.
- 'Sharing a single bathroom' – assume this relates to our K/1 classrooms...they would monitor their bathrooms in the same way they've done in the past...and if there's a

student you don't trust that they've washed their hands (for all grade levels), have them get a squirt of hand sanitizer as they're returning to work.

Q: If we are being encouraged to have class outdoors, what happens in hot weather (Rocklin in August/September and even October) or in storms/rain/cold later in the year?

- Teaching outdoors is one of the generic suggestions within the template I used for the initial plan. We already comfortably deploy outside of our classrooms for lesson areas, whether in the garden, picnic tables, blacktop, grass, etc.
- If it's hot/cold/rainy/etc. we teach within our classrooms.

Q: How are we supposed to teach PE?

- Relatively normally.
 - o There is minimal evidence of child to child transmission of COVID-19.
 - o There is minimal evidence of COVID-19 transmission outdoors during exercise
 - o In terms of equipment use, we are going to have UVC devices available to sanitize recess and PE equipment daily.
 - o Kids will be sanitizing their hands before and after the activity to minimize particulate transmission to the equipment.
 - o If the activity is occurring in the MPR, the aerosolized hydrogen peroxide will be dispersing and sanitizing equipment simultaneously as well.

Q: If a staff member or student comes down with a fever will they be required to get tested for COVID-19 and provide the school with documentation of the results so that contact tracing can be done?

- No. Per CDC guidelines, we can have students or staff stay home for at least 72 hours after the fever is broken as our plan specifies. Anyone on their own can go to their doctor, etc. for a COVID-19 test. All 'positive' tests are filtered through the County Health Doctor's Office. If someone within our school community tests positive for COVID-19, we're most likely going to find out via the County Health Office.

Q: If a student in our class tests positive, will we be told?

- Yes, via the County Health Doctor's office, through which all COVID-19 contact tracing is administered.

Q: What will happen with students who are sent to the office with fevers or other COVID-19 symptoms?

- Per our plan, if we suspect a student may have COVID-19 (e.g., they have multiple symptoms and a verified fever in excess of 100.4), we'll isolate the student in the Conference Room with a mask on and have them picked up from school.

Q: If a student pretends to cough or sneeze on another student or on a staff member, how should this be handled on a disciplinary level?

- I think this depends on context and age of student. I also think we start with gentle education, balancing the mental health needs of the student, as we explain on age appropriate levels why we are having to take all of these precautionary measures. If after education we still have a student make a dumb choice, we get into traditional disciplinary measures depending on age of student. (e.g., recess removal, silent lunch, student response form, parent phone call, etc.).

Q: How will temperature checks be managed on the way into classrooms?

- We've purchased digital no touch forehead thermometers for every classroom and Before/Aftercare that will take a temperature in a couple seconds. We should be able to get through everyone within a couple minutes. Honestly this is one I'm not sure about...we're in the process of purchasing a 2nd thermometer for each K-8 classroom to further speed this up. Additionally, as far as I know we're the only school district in the county doing temp checks before students enter a classroom...everyone else is asking their parents to temp check their kids before arriving at school (we're asking this too...I was just looking to be extra cautious).

Q: How will independent studies work for students? How many parents are allowed to request this at a time? How are teachers supposed to fill all independent studies and teach in the classroom?

- On a long-term basis, I don't believe teachers should be expected to teach their in-class students and manage long term distance learning. This is why we're bringing in Edgenuity for any families that choose long term independent study (aka 'distance learning, aka 'virtual academy learning'). Classroom teachers will not be responsible for any of the Edgenuity-based students (until they come back into the classroom and are part of the site-based program).
- On a short-term basis, the reopening plan gives the 'on the fence' parents an option of up to two 2-week Independent Study packets that would be managed by the teachers. Short term I.S. will be work only, no instruction (like normal I.S.). After this interim option, parents will have to choose between being site-based or Edgenuity.
 - o I am expecting about 5% of families to choose I.S. and about 10-15% of our families to choose the Edgenuity option.

Q: Will there still be push-in from specialists? Will they push into multiple classrooms, potentially spreading the virus across the school?

- Yes, there will still be push-in. Again, this is all about mitigating risks – we can't eliminate all of them. I will be interacting with all grade levels; our lunch staff is also going to interact with all grade levels; before/aftercare staff will interact with all grade levels, etc.

Q: Will the AC units be more regulated so that students and staff wearing masks can be in rooms at regulated and decent temperatures?

- With the new air purification and filtration systems installed for COVID-19 mitigation, we're going to have our HVAC Contractor put all of the HVAC units on a set operational schedule of 7a – 4p every day (6a-6p for B/Aftercare) within a designated temperature range (74 degrees +/- 4 degrees). He will also be programming them to continuously run even when they've reached temperature, mixing in the recommended percentage of outdoor air to recirculated air, and adjusting the pressurization settings for optimal COVID-19 mitigation.

Q: How will events like Back to School Night and parent-teacher conferences be handled?

- BSN: At this point, no idea. If I had to decide today, it would be staggered days and staggered start times using the MPR...something like:
 - o Friday before school starts: A Zoom-based meeting with me and the Edgenuity families
 - o Monday (day before school starts): K/1 class 6-7p, K/1 class 7-8p
 - Since K's will be where most of our 'new' kids are, it makes sense to talk to them before school starts...suspect I would personally do a limited 'Parent Info. Night' with each class as well)
 - o Tuesday: 2/3 classes (same times)
 - o Wednesday: 4/5 classes (same times)
 - o Thursday: 6/8 classes (same times)
- P-T Conferences:
 - o Pretty much as we had planned to do the Spring 2020 P-T conferences before the physical school shutdown...it's not hard to maintain 6' distancing between adults within a classroom.

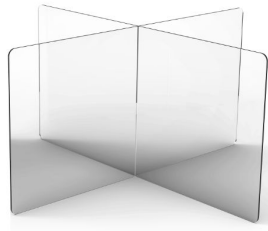
Q: Physical Distancing within the classrooms

- o There is minimal evidence of student to student or student to adult COVID-19 transmission; there is evidence of adult to adult and adult to child transmission. I believe our realistic focus should be on:
 - Maintaining distance between adults on campus; and
 - Maintaining distance between teachers and students
 - Keep student work areas at least 6' away from teachers

- Have teachers at least 6' away from students during large group lessons
- o The 6' spacing recommendation is based on sneeze radius – our new air purification systems reduce the sneeze radius to 3'
- o Regardless of our Air Purification system, a majority of countries world wide adopted a '1 meter' physical distancing protocol off of the W.H.O.'s original recommendation (France & Great Britain are two examples of '1 meter' countries). Likewise, in their guidelines American Academy of Pediatrics stated that within a school setting 3' distancing gets you the benefits of 6').
- o Thus, I'm looking for student work areas to be 3' where no physical barriers* are in use. This will not be hard in our 2nd-8th grade classrooms.
 - Context: Our student desks are about 22" wide; assume the student's nose is at the middle of the desk; 14" spacing between desks gets you 3' between students
- o 'physical barriers': we will also have several options available to deploy here if we want to get closer than 3' or be extra cautious, including:
 - Cardboard study carrels with an 'open window' front that we will either put clear laminate on (like Bowman), or most likely an 18" plexiglass sheet (picture of study carrel here). These will be available for our desks, rectangular tables, for kids working on the floor, etc., within all of our K-8 classrooms:



- Plexiglass crosses for our circle tables K-8 (something pretty close to this picture):



- Slotted plexiglass of various sizes that we can deploy in different locations (e.g. front office, library checkout, hot lunch serving, small versions for our kidney tables, etc.).



- Some of these ‘physical barriers’ will be purchased ‘as is’, some will be made. The school will be purchasing all of them.
- Transitioning to physical distancing: It’s going to take some time and I think we all need to be realistic on this. I think our upper elementary kids will have it +/- down within a few weeks; lower elementary kids I’ll be happy if they can have it figured out within a couple months; and I’m not expecting preschoolers to be responsible in any way for physical distancing measures.