SY 2021-22 LEA Health and Safety Plans

LEA Name: Creative Minds International PCS
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LEA Type: Pre-K; Elementary; Middle School
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Background and Purpose

OSSE’s Health and Safety Guidance for Schools is issued for LEAs and private, parochial and independent schools (schools). LEAs and schools must develop and submit to OSSE comprehensive health and safety plans. This plan is intended to provide the public with information on how the LEA will support the safe reopening and operation of school buildings, including guidelines on masking, social distancing, handwashing and respiratory etiquette, cleaning and maintaining healthy facilities, and appropriate response to a positive COVID-19 case.

OSSE reviewed each LEA's responses to the questions for clarity, completeness, and compliance with the DC Health and OSSE health and safety guidance for schools and provided feedback to the LEA. Before publication, LEA's were given the opportunity to revise their responses based on OSSE’s feedback. LEAs and schools are responsible for incorporating additional or updated public health guidance into their policies and procedures throughout the school year as such guidance is released.
Face Masks

1. Provide the LEA’s plan to comply with the requirements to:
   a. except for specific circumstances (e.g., while eating) articulated in OSSE’s guidance, all students, staff and visitors, including those who are fully vaccinated, must wear non-medical face coverings or face masks at all times while on school grounds, on school buses and while participating in any school-related activities, including physical education and sports; and
   b. masks must be worn correctly.

To ensure all students, staff, and visitors, including those who are fully vaccinated, wear a non-medical face covering or mask while on school grounds, buses, and at school-related activities, we have developed the following policies. To ensure easy compliance with this policy, any member of our community who arrives without a face covering, loses or damages their face covering while attending a school activity will be provided a new one. The school will keep a supply of PPE, including masks, until such time as face coverings are no longer required at schools. In addition, the school will place signage throughout the building about how to properly wear face coverings.

Policy regarding masks or non-medical (cloth) face-coverings

- All persons will adhere to the DC mask guidelines. If our current plan conflicts with current or future DC guidance, we will adopt DC Mayors or DC DOH mandates.
- All persons will wear cloth face coverings at all times when in the building and on campus. If a person has a medical condition that prevents them from wearing a face covering, they must have documentation on file from a medical provider that they are not able to do so. We will work with the person to ensure that accommodations are met.
- This policy applies to the following groups:
  - Staff
  - Students
  - Parents
  - Contractors
  - Visitors
- Face covering requirements:
  - Face covering must cover the nostrils, mouth, and chin
  - Face coverings must not possess a valve
  - A person (except those with an accommodation) may not enter the building without a face covering
  - A person may choose to provide his or her face covering and there is not a mandated style except that face coverings with a valve are prohibited.
Wearing a face shield alone is not an adequate face covering. However, a face shield may be worn in conjunction with a face covering.

- If a person does not have a face covering, CMI will provide one.

- Best practices when wearing a face covering:
  - Each day a new or clean face covering should be worn.
  - Face coverings should be worn while outside (e.g., recess, nature walk, fire drills, etc.).
  - Individuals providing specialized services (e.g., speech therapy) should use a face covering with a clear plastic area covering the mouth.
  - Do not constantly touch a face covering as you are also touching your face, which renders it ineffective and may be counterproductive in mitigating the spread.
  - Exercise caution when removing face coverings.
  - Face coverings should carefully be folded when not wearing (e.g., while eating).
  - Store face coverings away from other people. They can be stored on a clean surface next to the student (e.g., a desk or on a napkin). They may be stored in a plastic or paper bag.
  - If a face covering is stored on a permanent surface (e.g., desk), it should be disinfected afterward.
  - Individual face covering should be identifiable to avoid confusion or swapping (e.g., lavel with initials).

- Face coverings are mandatory for the following groups:
  - All persons in the building and outside unless one of the following exclusions is applicable.
  - Staff, essential contractors, and visitors; if a staff member, essential visitor, or visitor has a contradiction to wearing a face covering, they should not participate in in-person school activities.
  - Students must wear a face covering while on school premises, inside the building, on the bus, and while participating in school-related activities, except in the event of a medical or developmental contradiction.
  - There are no exceptions based on vaccination status.

- Face coverings should not be worn in the following situations:
  - While actively eating or drinking (as soon as done, the face covering should be worn) 
  - If under the age of 2
  - If unconscious or having difficulty breathing
  - If incapacitated or otherwise unable to remove it without assistance
  - If in an office space that no one else is permitted to enter
  - If unable to wear a face covering due to a medical condition or disability [doctor’s note must be on file with the school nurse (students) and HR (staff)]
  - If outdoors and actively engaged in vigorous physical activity and is maintaining social distancing of at least six feet from all other people
  - If speaking to a deaf or hard of hearing person who needs to read the speaker’s lips and a clear face covering is unavailable
  - If giving a speech for broadcast to an audience, provided that no one is within six feet of the speaker
  - If required to use equipment for a job that precludes the wearing of a face covering and the person is wearing or using that equipment
  - If engaged in activities where there is a risk of burn or injury from use of a face
covering (e.g., chemistry demonstration with an open flame)
- If lawfully asked to remove the face covering for facial recognition purposes
- If a student (preschool or prekindergarten) is napping

2. Provide the LEA's policies and procedures in the event that a student, staff member, or visitor is unable or unwilling to wear a face mask at all times.

An exception to face mask orders with regard to students with disabilities due to sensitivity to material or covering face. Some students with disabilities, such as those with autism, have sensitivities to stimuli, particularly touch. This sensitivity may make wearing masks difficult or even impossible. According to the Centers for Disease Control and Prevention, masks should not be placed on anyone who has trouble breathing or who is unable to remove the cloth face-covering without assistance. This may include students with disabilities. The following standard operating procedures will be implemented.

Accommodations for medical or developmental contradiction

- For adults (non-students)
  - If an adult has a contradiction to wearing a face covering, they should not participate in in-person school activities.
  - Accommodations for staff will be made in accordance with our HR Handbook.

- For students
  - Inability due to a medical or developmental contradiction will not prevent participation in educational activities.
  - If a student cannot safely wear a face covering (e.g., a student is unable to remove his or her face covering without assistance), he or she will not be required to wear one. A doctor’s note should be provided.
  - If a student cannot wear a face covering continuously throughout the day, he or she will be allowed to take a “mask break”. During a mask break, a student should be at least six feet away from others, and preferably outside.
  - For students who have issues wearing a face covering continuously, families and staff should work with the student to help extend the time between mask breaks.

Policy for those refusing to wear a face covering

- This guidance applies to all refusing to wear face coverings but does not have a documented medical or development contradiction on file.
- As countermeasures to mitigate such issues and encourage compliance with our COVID prevention measures, we will adopt the following:
  - All staff, families and essential contractors sign a Code of Conduct.
    - The Code of Conduct highlights expectations of the school as well as those for
individual community members.

- Proper use of face coverings is one of the items explicitly covered.

- Create a culture where masking is a norm and part of everyday activities.
- Encourage self-expression by choice of face coverings (e.g., a dinosaur or superhero face covering).
- Stock two sizes of masks (adult and child)
- Create an environment where staff serve as role models regarding proper masking.

- CMI believes that ensuring health and safety is the responsibility of every adult in the building. As such, all staff will enforce our masking policies
- Staff with masking issues
  - Improper masking
    - Will be asked to adjust or offer a new CMI provided face covering by any coworker
    - If do not comply, coworker may report to HR
    - HR will issue a warning for the first offense and provide a CDC handout on proper mask wearing.
    - For the second offense, staff will complete training about properly face covering wearing, which will include reading and signing a copy of DC’s guidelines for masking and watching the CDC’s video on proper mask wearing.
    - For chronic offenses, staff may be asked to not come to work until staff can properly wear face covering in accordance with our HR Handbook.
  - Refusing to wear a face covering
    - CMI will provide a face covering
    - If a staff member refuses to wear a face covering, then he or she will not be allowed to enter the building and actions will be taken in accordance with our HR Handbook.
- Parents with masking issues
  - Improper masking
    - Staff will ask the parent to adjust their face covering or offer a new one
    - If it appears to be a chronic issue, staff will share a CDC handout on proper mask wearing.
  - Refusing to wear a face covering
    - CMI will offer a face covering. If the parent wears it correctly, then the issue is considered resolved.
    - If a parent refuses, then will not be allowed to enter the building and have to be served outside or via phone
- Contractors/vendors with masking issues
  - Improper masking
    - CMI staff will ask the contractor to adjust their face covering or offer a new one.
    - If it appears to be a chronic issue, staff will share a CDC handout on proper mask wearing.
    - If it is a chronic issue, then the director of operations will speak to the individual as well as the contractor POC to devise a solution.
  - Refusing to wear a face covering
    - Staff will get the contractor’s name and the name of the vendor and contact the
director of operations or chief operating officer.

- Director of operations (or chief operating officer) will inform the individual that he or she is not authorized to enter the building without a face covering.
- Then the director of operations will follow up with the vendor POC to address the issue in accordance with the contract.

- All other visitors with masking issues
  - Improper masking
    - CMI staff will ask the visitor to adjust their face covering or offer a new one.
    - If a visitor does not adjust their face covering properly, they will be asked to leave.
  - Refusing to wear a face covering
    - A visitor refusing to wear a face covering will not be allowed to enter the building or asked to leave immediately.

- Students with masking issues
  - This policy is intended to ensure community safety while using opportunities of non-compliance as opportunities for student learning and growth.
  - Improper masking
    - General reminders
      - All staff will serve as role models and demonstrate proper masking for students.
      - Staff will remind the student to adjust correctly.
      - If the face covering is a poor fit, dirty or annoying the student, staff will offer a new clean face covering.
  - Escalated issues
    - If a student appears to be upset or having a non-compliant day, then the following actions will be taken
      - Staff will have an age-appropriate conversation with the student to identify the root cause and address the root cause.
      - If necessary, the student may be granted a 5-10 minute mask break. During a mask break, a student should be at least six feet away from others and preferably outside.
    - If the student is uncooperative, then the school director will get involved and work within our Conscious Discipline behavior framework to resolve the issue.
  - Refusing to wear a face covering
    - Staff will offer a new face covering and have an age-appropriate conversation about the need for masking.
    - If the above is ineffective, then the school director will meet with the student.
    - If the refusal is chronic, then a parent-administrator meeting will be held to work together to devise strategies (e.g., practice masking at both home and school) to address the issue.

3. Provide the LEA's policies and procedures to support physical distancing between individuals and within and across groups, including in classrooms, common spaces, during arrival and dismissal procedures, and during extracurricular activities.
CMI will embrace wearing face coverings, cohorting, adopting a robust asymptomatic testing protocol, and vaccination awareness program. In addition, each classroom will be organized to support students seated and standing at least 3 feet apart from one another (head to head). To the extent feasible, teachers shall stay at least 6 feet from students and each other. We are encouraging all staff and eligible students to get vaccinated, and will require masks. The school will not hold in-person assemblies until the guidance allows for this. During activities such as PE, recess, and during arrival and dismissal, the school will continue to have signage reminding students and staff to stand at the appropriate social distance for their age.

Below are specific policies in place to encourage social distancing:

- **Arrival**
  - The following doors will be used for arrival: Sherman North main door, Sherman North playground (back) door, and Sherman South annex door
  - The entry process consists of four steps:
    - Screening via Creative Minds pre-screen App or by staff member
    - Disinfect shoes
    - Disinfect hand at a hand sanitizing station
    - Proceed to assigned cohort
  - **Carpool arrival procedure**
    - Use the CMI pre-screening app. Prior to driving to school, complete the CMI app for the day.
    - Use the carpool lane during the designated drop-off window.
    - Wait in lot 5 if arrival prior to drop-off time.
    - Staff member greets the student and verifies that prescreening is complete or asks prescreening questions.
      - Students are cleared to enter if the app background is teal and today’s date is displayed.
      - Note, if the background is orange, the student is NOT allowed out of the car.
    - Prior to entering the building, the student disinfects shoes by walking on a shoe disinfectant mat, cleans hands with hand sanitizer. If necessary, a student puts on a mask.
    - Students are to practice social distancing and proceed directly to their assigned class.
    - Breakfast will be available in the classroom for those who want it.
  - **Arrival on foot, bike, or public transportation**
    - Students will enter via Sherman North playground door.
    - Staff member greets the student and verifies that prescreening is complete or asks prescreening questions.
    - Students are cleared to enter if the app background is teal and today’s date is displayed.
    - Note, if the background is orange, the student is NOT allowed out of the car.
    - Prior to entering the building, the student disinfects shoes by walking on a shoe
disinfectant mat, cleans hands with hand sanitizer. If necessary, a student puts on a mask.

- Students are to practice social distancing and proceed directly to their assigned class.
- Breakfast will be available in the classroom for those who want it.
  - Unsatisfactory prescreening
    - If an adult is present, the student leaves the campus with the adult. Students must follow illness guidelines before returning (e.g., fever-free for 24 hours, etc.).
    - If an adult is not present, parent or emergency contact will be called to pick up the student.
    - Weather permitting students with staff supervision will wait outside. Student will be required to wear a mask. (Alternate holding space is the isolation suite.)

- Dismissal
  - Dismissal times are staggered.
  - Teachers escort students to the grassy field.
  - Students wait for parents by cohort and maintain 3 feet of social distance.
  - Students participating in ECD will transit to the classroom, once the hallway is clear of students not participating in ECD.
  - In event of inclement weather, we will use our social distance inclement weather plan, which involves holding students in the classroom until a parent or guardian arrives.

- Classroom layout
  - Classes will be configured to support 3 feet social distancing.
  - To the extent feasible, the desks shall be arranged facing one direction.

- Lockers and cubbies
  - Students will use lockers or cubbies.
  - Staff will oversee locker use to ensure social distance is maintained.

- Hallways
  - The hallways are wide enough to accommodate socially distanced two-way traffic.
  - To ensure social distancing, the right-hand rule will be followed.
  - Students shall walk in single file hallways.
  - Cohorts will be supervised by a staff member when transitioning in hallways.
  - Hallways will be used for specific purpose and not for loitering.
  - Signage, including occupant traffic flow direction markings on the floor, will be used to indicate direction and social distance.
  - To the greatest extent feasible, cohorts will have staggered schedules to minimize cohort intermingling.

- Stairwells
  - Except during arrival, dismissal, or an emergency, stairwells are one direction (see the following table)

<table>
<thead>
<tr>
<th>Table: Stairwell Directionality by Time of Day or Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>Arrival</td>
</tr>
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• Elevator
  ◦ A maximum of two people will be allowed on the elevator at a time.
  ◦ Students must have an adult escort to use the elevator.

• ECD and after-school activities
  ◦ Students will be cohorted.
  ◦ The policies and procedures outlined in this document also apply to ECD and after-school activities.
  ◦ To the extent feasible, school-day cohorts shall be maintained. However, students in ECD may be in a different cohort from their school-day cohort.

• Meals
  ◦ Meals will be served in the classroom.
  ◦ Face coverings shall be worn when not actively eating or drinking.
  ◦ A minimum of 3 feet of social distancing will be maintained.
  ◦ To the extent feasible, a social distance greater than 3 feet shall be maintained.
  ◦ If 6 feet of social distancing cannot be maintained, students shall face the same direction when eating.

• Bathrooms
  ◦ A minimum of 3 feet social distance will be maintained.
  ◦ All persons will wear a face covering in the bathroom.
  ◦ To the extent feasible, one cohort will use the bathroom at a time.
  ◦ Bathrooms will be cleaned throughout the day, but not necessarily between each cohort.

• Recess
  ◦ A staggered recess schedule will be implemented.
  ◦ Each group will be assigned a specific area for their use.
  ◦ To the extent feasible, groups that naturally do not intermingle (e.g., Kindergarten and 4th grade) shall be assigned the same time.

• Naptime
  ◦ Cots will be arranged to maximize social distancing.
  ◦ A minimum of 3 feet social distancing will be maintained.
  ◦ To the extent feasible, 6 feet social distancing shall be implemented.
  ◦ Students will be arranged in a head-to-toe fashion.

4. Provide the LEA’s policies and procedures regarding the use of cohorts for students and/or staff, including steps to minimize interactions between cohorts, as applicable.

Creative Minds will build upon our successful experience of reopening to students beginning in March 2021. Key features will include cohorting, code of conduct around health and safety signed
by all members of the community (staff, families, vendors), daily health screenings for all, sentinel surveillance, robust cleaning, hand hygiene, logging all staff and visitors to support contact tracing as necessary. With regard to cohorts, we will adopt the following policy:

- A cohorting model will be adopted. Intermingling between cohorts shall be minimized.
- Cohort sizes will be established by considering health and safety, knowledge gained during in-person learning in SY20-21, and maximizing student learning and engagement.
- Each student will be assigned to one cohort. To the extent feasible, students shall remain with the cohort for both during school and before/after school activities (ECD).
- Teachers (lead, TAs, and DAs) shall remain within one cohort.
- Student wellness team (SWT), SEL team, and behavior team (e.g., counselors) and inclusion providers (e.g., OT, reading specialist),
  - May interact with multiple cohorts throughout the day.
  - Each small group shall be limited to one cohort at a time to the extent feasible. However, non-classroom teachers (e.g., counselors, reading specialists) may work with different small groups throughout the day.
  - Staff shall keep a log of daily interactions.
- Administration and operation team may interact with multiple cohorts throughout the day. Interactions shall be minimized to the extent feasible.
- Policies are designed to limit interactions with members outside of a cohort (e.g., cleaning policy).
- Cohorting will be maintained in hallways, stairwells, recess, lunch, and dismissal.
- We intend to adopt the following cohorts:
  - ECE
  - Kindergarten
  - 1st grade
  - 2nd grade
  - 3rd grade
  - 4th grade
  - 5th and 6th grade
  - 7th and 8th grade
- Each cohort will be assigned multiple classrooms and can intermingle in their assigned spaces (e.g., students and teachers in 4th grade can go between the fourth grade classrooms throughout the day).
- As the number of fully vaccinated individuals increases and guidelines and recommendations from OSSE and DC Health evolve, these policies may be updated.
- The following strategies will be used to minimize intermingling of cohorts:
  - Staggered scheduling
  - Outside schedules shall be staggered to the extent feasible. To avoid intermingling, populations that naturally do not interact (e.g., kindergarten and 4th grade) may be assigned the same time but different zones of the playground.
  - Assigned bathroom by cohorts; if a student needs to use an unassigned bathroom, Staff will confirm that bathroom is empty.
  - Follow right-hand rule in hallways and use hallways for a purpose (no loitering)
  - Each cohort will be assigned designated wings and floors (e.g., 5/6th grade cohort use 3rd floor Sherman Annex)
  - Meals will be served by cohort
Staggered dismissal times and assigned dismissal locations by cohort.

5. **Provide the LEA's policies and procedures to support handwashing and respiratory etiquette including frequent, proper handwashing strategies and encouraging covering coughs and sneezes.**

Our policy for Handwashing and Respiratory Etiquette is below. CMI will reinforce frequent, proper handwashing strategies by staff and students with soap for at least 20 seconds. We will also include hand sanitizer that contains at least 60 percent alcohol throughout the school and in the bathrooms (see next question). All students and staff will have the opportunity to wash hands, either with soap and water for at least 20 seconds or, if not readily available or would compromise cohort isolation practices, hand sanitizer with 60% alcohol at the following times:

- Before and after eating
- Before and after group activities or student centers
- After going to the bathroom
- After removing gloves
- After blowing noses, coughing, or sneezing
- After coming in from outdoors

**Hand Hygiene**

As hand hygiene is a common-sense measure for good health, all persons should adopt frequent and proper handwashing and hand sanitizing.

- Hands should be washed with soap and water for at least 20 seconds.
- If soap and water are not available and hands are not visibly dirty, use an alcohol-based hand sanitizer that contains at least 60 percent alcohol.
- Hand hygiene should be practiced, especially
  - Before eating
  - After using the toilet
  - Before and after putting on, touching, or removing cloth face coverings or touching your face
  - After blowing your nose, coughing or sneezing
  - After removing gloves
- Each space will have a supply of hand sanitizer.
- Portable hand sanitizing stations will be dispersed around the building.
- During arrival, portable hand sanitizing stations will be placed at the building entrances.
- Prior to entering the building (e.g., arrival, coming in after recess), all persons will sanitize hands (and shoes by walking along disinfecting shoe mats).
- Demonstration of proper handwashing. Staff will work with students to demonstrate proper handwashing.
- Signage about proper handwashing will be displayed in bathrooms.
Respiratory Etiquette

As respiratory etiquette such as covering a cover is a common-sense measure for good health, the following policy will be implemented.

- Face masks will serve a simple barrier to help prevent respiratory droplets from traveling into the air and onto other people when the person wearing the mask coughs, sneezes, talks, or raises their voice.
- CMI will encourage staff and students to cover coughs and sneezes with a tissue when not wearing a mask. Used tissues should be thrown in the trash and hands washed immediately with soap and water for at least 20 seconds, or if soap and water are unavailable, cleaned with hand sanitizer.

6. Provide the LEA's plan to make available adequate supplies (e.g., soap, paper towels, hand sanitizer, tissues) to support healthy hygiene practices including, as relevant, in classrooms, bathrooms, offices and common spaces.

To support healthy hygiene practices, we have implemented the following:

- Hand sanitizer in all classrooms, offices and dispersed in the common areas.
- Each space has a spray bottle of disinfectant and paper towels.
- Every classroom and office space has tissues
- Every bathroom and sink area has soap and paper towels
- These items are checked daily by our cleaning crew.
- Once a week, our night crew electrostatically sprays the building.
- Each classroom has a box of essential supplies, which includes gloves, extra masks and other supplies.
- Each floor has a PPE kit.

7. Provide the LEA's policies and procedures to acquire, distribute and support the appropriate use of PPE including gowns/coveralls, gloves, surgical masks, eye protection (face shield or goggles) and N95 masks, as relevant and necessary.

Our PPE Policy is detailed below.

Personal Protective Equipment (PPE)

CMI supplies PPE to the community to facilitate a safe and healthy environment. To determine items included in PPE, CMI references the latest guidance for DC Department Health and the CDC to determine the appropriate PPE to provide. Below is an overview of our current policy. If our
plan conflicts with current or future DC guidance, we will adopt DC Mayors or DC DOH mandates.

**Standard PPE**

- **Face coverings**
  - See Q1 in the Health and Safety Guidance for detailed policy.

- **Face shields**
  - Are not mandated in most situations.
  - A person may choose to wear one.
  - CMI will provide one to staff upon request by email to frontdesk@creativemindspcs.org.
  - Face shields must be worn with a mask as they are not a substitute for a face covering.

- **Goggles or a face shield must be worn in the following situations:**
  - Where exposure to secretions is likely
  - When taking a person’s temperature
  - If escorting a student who are known or suspected to have COVID-19 and the student is unable to wear a face covering
  - If supervising a student exhibiting COVID-like symptoms in the isolation suite

- **Gloves**
  - Gloves are not a replacement for proper handwashing or hand sanitizing.
  - Gloves are not recommended as part of PPE protocol to mitigate the spread of COVID.
  - Gloves must be worn during health screenings and taking temperatures.
  - Gloves should be used in normal situations (e.g., serving food, taking a temperature, assisting with toilet needs, etc.).

- **Gowns**
  - CMI provides gowns for specific scenarios as described below.

**Scenario-specific PPE requirements**

In certain scenarios, additional PPE is required to maximize safety. Below are some common scenarios and required PPE. It should be noted that this is not an exhaustive list.

- **If cleaning or disinfecting**
  - Gloves

- **If bodily fluids or secretions are anticipated**
  - Face covering
  - Gown/ long sleeve shirt
  - Gloves

- **If a student is known to have COVID-19 or is exhibiting symptoms of COVID-19**
  - Surgical mask
• Eye protection (face shield or goggles)

• Gown/coverall
  ○ Gloves

• If taking a temperature
  ○ Face mask
  ○ Face shield or goggles
  ○ Gloves

• If administering a COVID-19 Test
  ○ N95 mask (with access to Respirator Fit Testing program)
  ○ Eye protection (face shield or goggles)
  ○ Gown/coverall
  ○ Gloves

PPE supply locations

Supplies are coordinated by the director of operations. To request supplies, email frontdesk@cmipcs.org. To facilitate access to PPE, there are standard supply locations.

• Classroom essential supplies (one per classroom)
  ○ Gloves
  ○ Ice packs
  ○ Extra cups for water
  ○ Masks

• PPE floor kit (one per floor with school director or front desk)
  ○ Disposable gloves
  ○ Blue face masks
  ○ Orange sick masks
  ○ Face shields
  ○ Thermometer
  ○ Alcohol wipes

• PPE isolation room kit (in isolation suites)
  ○ Disposable gloves
  ○ Blue face masks
  ○ Orange sick masks
  ○ Face shields
  ○ Thermometer
  ○ Alcohol wipes
  ○ Disposable gowns
  ○ KN95 masks

Maintain Clean and Healthy Facilities

8. Provide the LEA's schedule for routine cleaning of rooms, surfaces and objects, including high touch
The school will regularly clean, disinfect, and sanitize surfaces, toys, and materials in a manner consistent with District guidance on cleaning and disinfecting. The school will adhere to the following:

- Robust cleaning standards: Standards are clearly articulated to our cleaning partner, and accountability metrics are established to verify that standards are consistently met;
- Routinely clean and disinfect surfaces and objects that are frequently touched;
- Upgraded all cleaners to cleaners and disinfectants;
- Supplies are readily available to staff but inaccessible to students, including the following:
  - Each space has a bottle of cleaner/disinfectant and a roll of paper towels (to be stored out of the reach of children
  - Disposable gloves
  - Broom and dustpan
  - Mop and bucket
- Train all cleaning personnel on how to mitigate to spread of communicable diseases and bloodborne pathogens;
- Train staff on how to disinfect surfaces (e.g., desks, pens and manipulatives)
- Doorknobs, light switches, classroom sink handles, and tabletops will be cleaned and disinfected daily;
- Cleaning crew, including day porters, will regularly clean and disinfect water fountains;
- Staff have clear expectations and training on their role to maintain a clean environment. Staff are expected to:
  - Maintain a clean and sanitary workspace during working hours, including when outside
  - Cleaning crew does not typically service classrooms or offices when occupied to maintain cohorting integrity
  - Clean and disinfect all desks before and after eating
  - Clean pens and other high-touch moveable items
  - Place rubbish and recycling in appropriate bins
  - Clean up spills in own space during working hours
  - On Friday, ensure all horizontal surfaces are clear before leaving
- Thoroughly clean and disinfect thermometers before and after each use per manufacturer’s instructions;
- For all cleaning, sanitizing, and disinfecting products, follow the manufacturer’s instructions for concentration, application method, contact time, and drying time before use by a child.
- Manipulatives will be cleaned during the day as necessary by staff.
- Toys that have been in children’s mouths or soiled by bodily secretions must be immediately set aside. These toys will be cleaned and sanitized by a staff member wearing gloves before being used by another child.
- Mats/cots will be:
  - One specific cot will be assigned to each child
  - Cot bedding will be washable and laundered at least weekly or before use by another child.
  - May be stacked between uses
  - Will be disinfected at least once a week
- Cleaning of playground high-touch surfaces will be cleaned periodically.
• Shared bathrooms will be assigned to specific groups of students and staff. Each group of students will have a specific time during the daily schedule to use their assigned bathroom. Bathrooms will be cleaned and disinfected multiple times per day but necessarily between each cohort.
• The school will implement safe and correct storage for cleaning and disinfection products.
• All cleaning products are EPA approved and meet the green seal standards. Products used during normal hours do not release volatile organic compounds (VOCs).
• After hours, if using cleaning products with VOCs, adequate ventilation is required to prevent inhalation of toxic fumes.
• Staff and students (when age-appropriate) should wipe down their personal space (desk, back of chair) each day, especially before and after eating. Note this is an extra line of defense that is in addition to our cleaning protocols and NOT a replacement for building-wide cleaning protocols.
• **Electronics (e.g., tablets, touch screens, keyboards, copy machines remote controls):**
  o When feasible, wipeable covers for electronics, to make cleaning and disinfecting easier.
  o To the extent feasible, students will be assigned the same device to use.
  o Follow manufacturer’s instructions and recommendations for cleaning the electronic device.
  o For electronic surfaces that need to be disinfected, a product on EPA List N that meets the manufacturer’s recommendations will be used. Many disinfection products for electronics contain alcohol because it dries quickly.
• Details about different scenarios of positive cases in the building are discussed in Q9.

9. **Provide the LEA’s cleaning and disinfecting protocols in the event that (1) a student, staff member, or visitor develops symptoms of possible COVID-19 while in the school; or (2) if the school is notified that a student, staff member or visitor who tested positive has been in the school.**

Procedures after Suspected or Confirmed Cases of COVID-19

In the event of a confirmed COVID-19 case in a student, staff member, or essential visitor, the school should follow DC Health’s Guidance on Cleaning and Disinfection for Community Facilities with Suspected or Confirmed COVID-19 as well as the cleaning and disinfection guidance from the CDC.

• Scenario 1:COVID-19 positive individual in the school building within the past 24 hours
  o Close, deep clean and disinfect all areas where the sick individual has been.
  o If a COVID-19 case is confirmed during the day AND the COVID-19 positive individual is in the building, the cohort should be dismissed and the room vacated as soon as possible.
  o If the COVID-19 positive individual is not in the building that day, then it is acceptable
to remain in the room until the end of the day.

- Staff supporting, accompanying, or cleaning up after a sick child should adhere to PPE best practices.
- Once the room is vacated, wait as long as possible before entering the room to clean and disinfect (at least several hours).
- Deep clean and disinfect the full classroom and any other spaces or equipment in which the ill individual was in contact, including the isolation room.
- Electrostatically spray after deep cleaning should be considered.
- Staff must wear a face mask and gloves for all steps of the cleaning and disinfection process. Staff should also follow additional PPE best practices as articulated in Q8.

- Scenario 2: COVID-positive individual was last in the building between 24-72 hours
  - Deep clean areas where the individual has been. Disinfection is not necessary.
- Scenario 3: COVID-positive individual has not been in the building for more than three days
  - Special cleaning and disinfection procedures are not necessary.
  - Normal cleaning and disinfection procedures will be followed.
- Scenario 4: Individual exhibiting COVID-like symptoms in the building but COVID status is unknown
  - Deep clean and disinfect all areas where the sick individual has been.

10. Provide the LEA's plan to make available sufficient and appropriate cleaning and disinfection supplies.

As per our janitorial contract, our vendor, Bradcorp, is responsible to ensure that there are appropriate disinfection supplies in the building. The cleaning standards as well as ensuring health safety of all persons in the building are clearly defined in our contract. The cleaning crew uses the appropriate PPE, including gloves. Specifically, the contract states:

Vendor [Bradcorp] will provide its employees with all training necessary for the successful performance of the requested services. Training will include safety procedures; the proper use of all equipment and materials; and the proper procedures for the sorting and disposal of recyclable materials, compostable materials, and waste materials. Training will include safe handling of blood-borne pathogens/vomit as well as training on best practices to mitigate the spread of communicable disease such as the flu, COVID and other diseases. Vendor will describe its training procedures to the Client at the Client’s request.

Vendor [Bradcorp] will ensure that contracted staff receive all local, state, and federally mandated training, especially related to Occupational Safety and Health Administration (OSHE) requirements. Additionally, Vendor will adhere to and comply with all school-required health and safety requirements, which would cover use of masks, handwashing, keeping social distance, etc.

11. Provide the LEA's plan to perform necessary maintenance to ventilation and water systems and features
Ventilation

- We engaged with a HVAC expert and completed an assessment of the unique situation in our building.
- We have implemented a phased approach to fortify HVAC in our building
- Phase I (implemented in the fall 2020)
  - In Sherman South as part of the renovations, install fan coil units that meet MERV13 standards and contain UV-C filters inside the unit
  - On the first floor, replace filters in the DOAS unit.
  - In all classroom, office, and bathroom spaces (except the 1st floor), install a portable UV-C/HEPA filter unit. The units are roughly sized that when operating at highest speed, the all air in the room passes through the filter (to sanitize or capture airborne particulate) and UV-C (to kill any air-borne pathogens) every 10-12 minutes.
  - On the first floor, install portable HVAC units as specified by the AFRH to cool and circulate air.
- Phase II
  - Initiate a feasibility study about installing DOAS units using existing ducting in the attic spaces for Sherman North and Sherman Annex
  - If feasible, install a DOAS system to increase the amount of fresh air inside the building using the existing ducting in the attic.
- Phase III
  - If feasible, replace the window AC units with a central HVAC system by either tying into the AFRH campus-wide 4-pipe system or installing VRF in each space.

Water System

- Prior to reopening after any prolonged shutdown, the school will flush all water systems to clear out stagnant water and replace it with fresh water. This process will remove any metals (e.g., lead) that may have leached into the water and minimize risk of Legionnaires’ disease and other diseases associated with water following CDC guidance and as described below:
  - Flush hot and cold water through all points of use such as sinks, drinking fountains, toilets, and urinals.
  - Water heater will be set to 140 degrees Fahrenheit and hot water will be flushed at each fixture using hot water until its maximum temperature is reached.
  - Additional water using devices, such as drinking water dispensers, will be flushed in accordance with manufacturers’ instructions.

Response to a Confirmed or Suspected COVID-19 Case

12. Describe the LEA's policies and procedures to:
We adhere to OSSE’s exclusion and return to school criteria.

Exclusion criteria include:

- A student, staff member, or essential visitor **must stay home, or not be admitted**, and must follow the applicable DC Health guidance for isolation or quarantine, if they:
  - Have had a temperature of 100.4 degrees Fahrenheit or higher or any of the symptoms listed above in the “Daily Health Screening” section of this guidance in the last 24 hours.
  - Are confirmed to have COVID-19.
  - Have been in close contact in the last 10 days with an individual confirmed to have COVID-19.
  - Are awaiting COVID-19 test results or have a household member who is awaiting COVID-19 test results.
  - Consistent with the DC Mayor’s travel guidance, have traveled domestically in the last 10 days to any place considered high risk other than Maryland or Virginia, unless they did not attend school until tested for COVID-19 three to five days after returning to DC and received a negative COVID-19 viral test.
  - Have traveled internationally in the last 10 days, unless they did not attend school for seven days, got tested for COVID-19 three to five days after returning to DC, and received a negative COVID-19 viral test.
  - Students or staff with pre-existing health conditions that present with specific COVID-19-like symptoms must not be excluded from entering the school building on the basis of those specific symptoms if a healthcare provider has provided written or verbal documentation that those specific symptoms are determined to not be due to COVID-19.
  - Provided that they do not currently have any symptoms consistent with COVID-19, an individual who has **tested positive for COVID-19 within the last 90 days or is fully vaccinated** may be admitted while awaiting COVID-19 test results, after close contact with someone with confirmed COVID-19, when a household contact is awaiting COVID-19 test results, or after travel. Any individual with symptoms consistent with COVID-19 must follow the exclusion criteria outlined above.
  - Provided that they do not currently have any symptoms consistent with COVID-19, an individual who **has tested positive for COVID-19 in the last 90 days or is fully vaccinated** against COVID-19 may be admitted immediately after domestic or international travel. They should get a COVID-19 test three to five days after international travel. Any individual with symptoms consistent with COVID-19 must follow the exclusion criteria outlined above.
- If excluded, students (or their parents/guardians), staff, and essential visitors should call their healthcare provider for further directions.
- DC Health recommends that students and staff should get tested for COVID-19 if anyone in their household has symptoms of COVID-19, even if the student or staff member themselves do not have symptoms. All members of the household should be tested at the same time.
Individuals who are fully vaccinated against COVID-19 should only get tested in this instance if they develop symptoms.

Dismissal criteria include:

- If a student, staff member, or essential visitor develops a fever or other signs of illness, the school must follow the above exclusion criteria regarding the exclusion and dismissal of students, staff, and essential visitors.
- For students, the school should:
  - Immediately isolate the student from other students.
  - The student should immediately put on an orange face mask or surgical mask.
  - Identify a staff member to accompany the isolated student to the isolation area and supervise the student while awaiting pickup from the parent/guardian.
  - The staff members briefly responding to the sick student in the classroom, accompanying the student to the isolation area, and supervising the student in the isolation area should comply with PPE best practices.
  - Notify the student’s parent/guardian of the symptoms and that the student should be picked up as soon as possible and instruct them to seek healthcare provider guidance.
  - Immediately follow all cleaning and disinfection protocols for any area and materials with which the student was in contact.
- For staff and essential visitors, the school should:
  - Send the staff member or essential visitor home immediately or instruct them to isolate until it is safe to go home;
  - Instruct the staff member or essential visitor to seek healthcare provider guidance; and
  - Follow cleaning and disinfecting procedures for any area, materials, and equipment with which the staff member was in contact.

13. Provide the LEA's plan to comply with the requirements to:

- a. Identify a staff member as the COVID-19 point of contact (POC) to whom families, staff, contractors and vendors should report a positive case of COVID-19 and who is responsible for reporting positive cases of COVID-19 to DC Health;
- b. Report any applicable positive COVID-19 case in a student, staff member or essential visitor to DC Health on the same day the school is notified;
- c. Not exclude students or staff with pre-existing health conditions that present with specific COVID-19-like symptoms on the basis of those specific symptoms, if a healthcare provider has provided written or verbal documentation that those specific symptoms are not due to COVID-19.

Our COVID-19 point of contact (POC) is the director of operations and compliance. Our COVID POC will be in regular contact with families, staff, contractors, and vendors and report positive cases of COVID-19 to DC Health and is responsible to answer all individual questions regarding COVID.

Our reporting plan of applicable positive COVID-19 cases in a student, staff member, or essential
A visitor to DC Health will include both how staff, families, and vendors know to contact us when a member of our community has a positive test result. (see Q15 for details.) The COVID-19 POC will be able to receive calls throughout the day and into the evening hours. The COVID-19 POC may also proactively reach out to families of students, staff, and visitors who had symptoms or have been absent to inquire. All confirmed reports will be shared with DC Health in a means that is requested by them.

Ensuring that all staff and students learn as often on-site as possible, excluding students and staff with similar symptoms but no underlying case must be avoided. To this end, our COVID-19 POC may review all of our daily screening questions to ensure that students or staff with preexisting symptoms have not been exposed. In some cases, the COVID-19 POC may seek the counsel of a healthcare provider and will follow OSSE’s exclusion and return to school criteria.

14. **Provide the LEA's procedures to support DC Health with contract tracing in the event of a positive case of COVID-19.**

**Daily health screening**

- Each person is required to complete a daily health screening prior to entering the building.
  - **Staff**
    - Daily health screening is part of the daily sign-in via the employee portal
  - **Students**
    - Download our app ([iPhone](#) | [Android](#)) or answer these screening questions.
  - **Contractors, deliveries and visitors**
    - The sign in process includes health screening questions

**Daily tracking of those in the building**

- Records of those in the building shall be accessible for at least 30 days.
  - **Staff**
    - Daily sign in via employee portal will be used as the official log.
  - **Students**
    - Official attendance records from our SIS
  - **Contractors, deliveries and visitors**
    - Report of daily sign-ins by contractors, deliveries and visitors

**To facilitate tracing of close contacts**

The following documents will be used in the event of a positive case to facilitate accurate and timely contract tracing of close contacts.

- Class rosters
- Staff room assignments
- Assigned seating charts
- Interaction logs of staff who see students across multiple cohorts. Log information includes student name, date, time, and location of interactions
- When providing contact tracing information, a list of those who have voluntarily disclosed vaccination status and are fully vaccinated.

**Contacting DC Health of a confirmed positive case**

- The director of operations is the COVID POC.
- Our COVID-19 POC will report all positive cases and contact with positive cases to DC Health, as described in [Updated Final DC Health Guidance](#).
- The COVID POC will contact DC Health if a staff member, essential visitor, or student notifies the school that they (or their student) tested positive for COVID-19 if the individual was on school grounds or participated in school activities during their infectious period.
- Immediately upon learning of the positive case, the COVID-19 POS will notify DC Health by submitting an online form on the DC Health COVID-19 Reporting Requirements website using the [Non-Healthcare Facility COVID-19 Consult Form](#).
- The COVID POC will gather the necessary information to share with DC Health contact tracer to facilitate an accurate and timely process.
- If a person tests positive during our sentinel surveillance program, Elaine Ellis will notify DC Health directly.

15. Describe how the LEA will notify the school community, as appropriate, of the positive case and corresponding actions taken by the LEA.

**Overview of our communication with stakeholders protocol**

- Primary COVID point of contact (director of operations and compliance) answers all COVID questions for stakeholders.
- COVID POC and communications coordinator have worked together to draft templates for different potential scenarios. These templates will be used to convey critical information while protecting the privacy of the COVID-affected individual.
- In coordination with DC DOH and the school nurse, notify those directly affected and required to self-quarantine - Similar to any other contagious illness (e.g., strep, pink eye, influenza), school nurse provides a fact sheet and instructions to the cohort. Additionally, inform those who have had close contact with a person diagnosed with COVID-19 to follow most-recent guidance regarding self-isolation and return-to-school criteria that includes vaccination status as a factor.
- Letter distributed to the entire community from ED via communications team in English and Spanish, and other languages as identified on the Home Language Survey. Letter will be distributed by email distribution list
- in accordance with state and local laws and regulations, school administrators should notify
local health officials, staff, and families immediately of any case of COVID-19 while maintaining confidentiality in accordance with the Americans with Disabilities Act (ADA).

POC notifies external stakeholders:

- Notify DC Health - Email coronavirus@dc.gov and submitting an online case report at [https://redcap.doh.dc.gov/surveys/index.php/surveys/?s=DHNA4X8LJIC](https://redcap.doh.dc.gov/surveys/index.php/surveys/?s=DHNA4X8LJIC).
- Notify PCSB- Email Audrey Williams@dcpcsb.org) of illness
- Notify AFRH - Email Patrick Cavanagh, Justin Seffins, and Patrick Benjamin.
- If school is closing early or will be closed on a day originally scheduled for school, contact PCSB use inclement weather policy
- Notify and coordinate with cleaning partner on cleaning impact
- Notify food service vendor of impact on schedule

CMI will comply with all OSSE related guidance in planning for responding to confirmed or suspected COVID-19 cases. We will comply with the requirement to not admit or to dismiss any student, staff member or visitor who is COVID-19 positive or otherwise meets criteria for exclusion. We have adopted a conservative interpretation of OSSE’s exclusion criteria to ensure the general health and safety of our community. Those failing the daily screening or exhibiting COVID-19-like symptoms without an alternate non-COVID diagnosis or doctor’s note on file for a chronic condition are excluded until they meet the return to school criteria.

Our LEA also commits to dismiss any individual or cohort that is potentially exposed to COVID-19 within the school setting using the communication with stakeholders protocol above.

To meet the needs of our diverse community, details on these topics will be available in all languages that our community requires as indicated on the Family Home Language Surveys. We will communicate with families using multiple platforms, which may include:

- Newsletters
- Email bulletins
- Parent Square
- Social media
- Town halls
- Language Line
- Point-to-point

**COVID-19 Testing and Vaccines**

16. If applicable, describe the LEA’s current or planned COVID-19 testing protocol for symptomatic and/or asymptomatic students and/or staff, including steps the LEA will take to encourage participation in the testing program. Please include the LEA’s plan to ensure that results of such testing programs are reported to DC Health per DC Health’s COVID-19 reporting requirements: [dchealth.dc.gov/page/covid-19-reporting-requirements](http://dchealth.dc.gov/page/covid-19-reporting-requirements).
CMI employs a three-prong strategy to mitigate the impact. Strategy 1 focuses on prevention. Every community member is asked to sign a code of conduct, which clearly defines standards and expectations of Creative Minds and each member of our community. Strategy 2 is to promote vaccinations of all eligible individuals. Strategy 3 is to establish a robust sentinel surveillance program to monitor the health of our community in real-time. Below Strategy 3 is described in detail.

COVID testing

CMI-Elaine Ellis sentinel surveillance

- **Intent**
  - A well-designed sentinel surveillance program is one component to help keep the Creative Minds community safe. A high participation rate will help identify trends and possibly prevent community spread of COVID.

- **Logistics**
  - CMI partnered with Elaine Ellis in December 2020 to establish a robust sentinel surveillance program.
  - Currently, we conduct biweekly PCR testing at the school and is free of charge.
  - Results are returned to the individual within 36 hours.
  - Our program is scheduled to continue until June 30, 2022, but the frequency biweekly vs. weekly has yet to be finalized for the 2021-22 school year.
  - The program is open to staff, students, and all members of their households.
  - Testing and notification of positive cases are in accordance with DC Health’s policy. Our program received a self-isolation waiver while waiting test results on Jan. 11. Details of the program can be found here.
  - All information is confidential. Only the COVID Point of Contact has access to information at CMI.

- **Participation**
  - All participants must sign consent forms, the first time.
  - Staff must participate.
  - Students with consent forms on file will be randomly tested.
  - Family members are invited to sign up.
  - Testing frequency will vary according to vaccination status. Those who are fully vaccinated will be tested less frequently than those with unvaccinated or unknown vaccination status.

Student testing

- **Symptomatic testing**
  - Assuming that in-school symptomatic testing will be available for SY21-22, CMI will sign up to participate.

- **Asymptomatic testing**
  - In the advent that CMI determines to test students not in partnership with Elaine Ellis, we will follow the OSSE’S safety guidance and will follow DC Health reporting.
requirements.

17. Provide the LEA’s plans to support COVID-19 vaccination of staff and students, as eligible, including efforts to encourage participation in public and community-based vaccination opportunities.

Our LEA is supporting eligible students and staff to get vaccinated. We have one strategy for childhood vaccinations as mandated by DC laws and a different strategy to encourage everyone eligible to get the COVID vaccination.

Preventing a Vaccine-avoidable Outbreak

Preventing the spread of COVID-19 is top of mind and has led to a decrease in vaccinations of students across the country, according to the CDC and DC Health officials. CMI adheres to “OSSE’s No Shot-No School” guidance.

- Students must be immunization compliant or have a waiver on file in order to participate in in-person learning options.
- As a part of the student enrollment process, CMI collects vaccination information.
- Every student must have a Universal Health Certificate on file by the first day of school; all expired forms must be updated by the 20th school day of each calendar year.
- Exceptions for special populations are consistent with OSSE’s immunization policy for SY21-22.
- The school will work with the school nurse and DC DOH to verify that all vaccinations are up to date prior to in-person attendance
- For tracking purposes, the SIS contains a custom page regarding immunization compliance that the school nurse and enrollment team have access to
- Director of operations and school nurse review immunization compliance on a monthly basis
- Students out of compliance are notified using DC Health for letters.
- Resources about local clinics and vaccination sites are provided to families via point-to-point emails.
- If it is determined that a student has been unable to get vaccines, the enrollment team will coordinate with the student support team and school nurse to support the student in getting an up-to-date screening. Resources about local clinics and vaccination sites are provided to families via point-to-point emails, texts, or phone calls.
- A student who is immunization non-compliant, must meet one of the following criteria to return to the building:
  - Become immunization compliant
  - Submit (or have on file) a waiver from DC DOH with the school nurse
Strategies to encourage COVID vaccinations throughout our community

Currently, there is no COVID vaccination with full FDA authorization and no emergency authorization approval for a COVID vaccination for children under the age of 12. As this status changes, CMI will encourage and recommend the vaccine for everyone eligible to receive it. Specifically, we plan to implement the following initiatives:

- Community-wide social media campaign
  - Disseminate facts about vaccine safety and efficacy
  - Highlight benefits of vaccination, including personal (e.g., no need for those fully vaccinated to quarantine if a close contact of someone testing positive for COVID) and community (e.g., reduced risk of community spread)
  - Establish “Why I chose to get the vaccine” campaign where people can voluntarily share the reason (and a photo) of why they chose to get vaccinated

- Signed up to host a COVID and flu vaccination clinic at the school in partnership with the Vaccine Exchange on October 29. We have requested to host both routine immunizations and COVID vaccinations once FDA approves a vaccine for children as young as two.

- CMI has implemented a routine asymptomatic testing program in partnership with Elaine Ellis. We plan to incentivize vaccination by testing fully vaccinated people on a less frequent basis.

Students with Disabilities

18. Provide the LEA’s plans to provide appropriate accommodations to students with disabilities with respect to its health and safety policies and procedures.

CMI will ensure that appropriate accommodations are offered to SWDs with respect to its health and safety policies and procedures by taking the following steps:

- Students with disabilities choosing in-person learning options
  - Policies for students with disabilities who choose in-person learning are detailed in this document.

- Students with disabilities requesting accommodations for remote learning
  - Due to the critical benefits of in-person learning and the robust health and safety protocols in place in our schools to support the wellbeing of students, staff and families, distance learning in the 2021-22 school year will only be available to students with a documented physical or mental health condition that requires distance learning due to COVID-19.
  - Students with a health condition that requires distance learning must submit a COVID-19 Medical Consent and Certification for Distance Learning, completed by the parent/guardian and licensed physician or nurse practitioner.
  - We will communicate this policy, OSSE’s FAQs on this topic, and how to request a waiver via newsletter, social media, and point-to-point interactions.
We will defer to the students’ primary care physician. If a medical professional certifies that a waiver is necessary, then the request will be granted.

Our director of inclusion will determine students who need special accommodations regardless if the request is initiated by the parent or the school.

Training, Technical Assistance, and Monitoring

19. Please provide the LEA’s plan to provide training and technical assistance on its policies and procedures to safely reopen schools in accordance with the DC Health Guidance for Schools and the OSSE Health and Safety Guidance for Schools, including:

   • a. who will receive training and technical assistance; while on school grounds, on school buses and while participating in any school-related activities, including physical education and sports; and
   • b. the topics that the training and technical assistance will address; and
   • c. how and by whom the training and technical assistance will be delivered.

The table below outlines the training for health and safety policies by topic and stakeholder group.

<table>
<thead>
<tr>
<th>Audience (e.g. teachers, staff, front office staff, administration, COVID-19 POC)</th>
<th>Topic</th>
<th>Trainer/ TA provider</th>
<th>Date Range (if available) (e.g. summer, August 8-15)</th>
</tr>
</thead>
<tbody>
<tr>
<td>All Staff</td>
<td>Health and safety procedures/ cleaning standards</td>
<td>In house</td>
<td>August PD</td>
</tr>
<tr>
<td>Staff</td>
<td>Updates to health and safety procedures</td>
<td>In house</td>
<td>Monthly</td>
</tr>
<tr>
<td>Leadership</td>
<td>Training for safety procedures</td>
<td>In house</td>
<td>As needed</td>
</tr>
<tr>
<td>Families</td>
<td>Healthy and safety procedures &amp; updates</td>
<td>In house</td>
<td>As needed Town halls</td>
</tr>
</tbody>
</table>

20. Provide the LEA’s plan to monitor the implementation of the health and safety plans at each campus,
CMI only has one campus. The effective implementation of our plan will be monitored by
the director of operations. Updates to policy or concerns regarding implementation will be
shared with the leadership team. This team will work together to devise revised strategies to
efficiently and effectively execute our health and safety plans.

- The following platforms are available to share updates, changes, and corrective actions will be
  shared with staff:
  - Professional development
  - Email
  - Point-to-point
  - Self-paced trainings
- In addition, the following platforms are available to share information regarding the
  implementation of our health and safety plans with our community-at-large, including staff,
  students, and their families:
  - Code of conduct, which all families are asked to sign
  - Signage in the building
  - Website
  - Social media (e.g., Facebook, Twitter, Parent Square)
  - Student handbook
  - Back-to-school and similar events
  - School newsletters
  - Point-to-point, if warranted
- CMI will proactively enact measures to reduce communication barriers, as detailed below in
  the next question regarding effective communication.

21. Describe the LEA's plans to communicate key health and safety policies and procedures to students,
families, staff and visitors.

CMI plans to communicate key health and safety policies and procedures with students families and
staff using the following means:

- Code of conduct, which all families are asked to sign
- Signage in the building
- Website
- Social media (e.g., Facebook, Twitter, Parent Square)
- Student handbook
- Back-to-school and similar events
- School newsletters
- Point-to-point, if warranted

To meet the needs of our diverse community and reduce barriers to communication, CMI plans to
communicate the details on these topics using the following strategies:
• Provide information in languages that our community requires.
• Use the preferred platforms of our families (e.g., phone, What’s App) to go between languages.
• In SY2021-22, we are rolling out a new platform called Parent Square. This platform will enhance our ability to communicate with families in their preferred language as well as centralize information for families.
• Utilize Language Line support or similar service, as needed, for point-to-point communication.