

1 XAVIER BECERRA
 Attorney General of California
 2 JENNIFER G. PERKELL
 Supervising Deputy Attorney General
 3 DARIN L. WESSEL, State Bar No. 176220
 JENNIFER A. BUNSHOFT, State Bar No. 197306
 4 Deputy Attorneys General
 600 West Broadway, Suite 1800
 5 San Diego, CA 92101
 P.O. Box 85266
 6 San Diego, CA 92186-5266
 Telephone: (619) 738-9125
 7 Fax: (619) 645-2012
 E-mail: Darin.Wessel@doj.ca.gov
 8 *Attorneys for Defendants*
 Gavin Newsom, in his official capacity as the
 9 Governor of California, Xavier Becerra in his
 official capacity as the Attorney General of
 10 California, Sonia Y. Angell, M.D., in her official
 capacity as the State Public Health Officer and
 11 Director of the Department of Public Health and
 Tony Thurmond, in his official capacity as State
 12 Superintendent of Public Instruction and Director
 of Education

13 IN THE UNITED STATES DISTRICT COURT
 14 FOR THE CENTRAL DISTRICT OF CALIFORNIA
 15 WESTERN DIVISION – FIRST STREET COURTHOUSE
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 18 **MATTHEW BRACH, et al.,**
 Plaintiffs,
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 20 v.
 21 **GAVIN NEWSOM, et al.,**
 Defendants.
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Case No. 2:20-cv-06472 SVW (AFMx)

**REQUEST FOR JUDICIAL
 NOTICE IN OPPOSITION TO
 APPLICATION FOR TEMORARY
 RESTRAINING ORDER (Dkt. 28);
 EXHIBITS**

Date: August 17, 2020
 Time: 1:30 p.m.
 Courtroom: 10A - Telephonic
 Judge: The Honorable Stephen
 V. Wilson
 Trial Date: Not set
 Action Filed: 7/21/2020

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1 **TO ALL PARTIES AND TO THEIR COUNSEL OF RECORD:**

2 **PLEASE TAKE NOTICE THAT** defendants Gavin Newsom, in his official
3 capacity as the Governor of California, Xavier Becerra, in his official capacity as
4 the Attorney General of California, Sonia Y. Angell, M.D., in her official capacity
5 as the State Public Health Officer and Director of the Department of Public Health,
6 and Tony Thurmond, in his official capacity as State Superintendent of Public
7 Instruction and Director of Education, hereby request this Court take judicial notice
8 under Federal Rules of Evidence 201, and consistent with California Evidence
9 Code sections 451, subdivisions (b) and (f), 452, subdivisions (c) and (h), and
10 section 453, of the following facts and matter in support of their opposition to the
11 application for a temporary restraining order:

- 12 1. Governor Newsom's Coronavirus State of Emergency Proclamation,
13 dated March 4, 2020, attached hereto as Exhibit A.
- 14 2. Executive Order N-25-20, attached hereto as Exhibit B;
- 15 3. Official Statement regarding Executive Order N-33-20 and Essential
16 Workers, attached hereto as Exhibit C.
- 17 4. California's Resilience Roadmap, attached hereto as Exhibit D.
- 18 5. Executive Order N-60-20, attached hereto as Exhibit E.
- 19 6. Order of the State Public Health Officer, dated May 7, 2020, attached
20 hereto as Exhibit F.
- 21 7. Order of the State Public Health Officer, dated March 19, 2020 (the Stay
22 at Home order), attached hereto as Exhibit G.
- 23 8. Order of the State Public Health Officer, dated July 13, 2020, attached
24 hereto as Exhibit H.
- 25 9. California Department of Public Health, Guidance on Closure of Sectors
26 in Response to COVID-19, dated July 13, 2020, attached hereto as Exhibit I.

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1 10. California Department of Public Health, COVID-19 and Reopening In-
2 Person Learning Framework for K-12 Schools in California, 2020-2021 School
3 Year, dated July 17, 2020, attached hereto as Exhibit J.

4 11. California Department of Public Health, COVID-19 Industry Guidance:
5 Schools and School-Based Programs, updated August 3, 2020, attached hereto as
6 Exhibit K.

7 12. California Department of Public Health, Schools Guidance FAQs, dated
8 August 3, 2020, attached hereto as Exhibit L.

9 13. California Department of Public Health, COVID-19 and Reopening of
10 In-Person Learning for Elementary Education Waiver Notice to the California
11 Department of Public Health, dated August 3, 2020, attached hereto as Exhibit M.

12 14. California Department of Public Health, COVID-19 and Reopening In-
13 Person Learning Elementary Education Waiver Process, dated August 3, 2020,
14 attached hereto as Exhibit N.

15 15. California Department of Public Health, Waiver-Letter Template, issued
16 August 3, 2020, attached hereto as Exhibit O.

17 16. California Department of Public Health, Waiver Letter Template Cover
18 Form, issued August 3, 2020, attached hereto as Exhibit P.

19 17. California Department of Public Health, COVID-19 County Monitoring
20 Overview (accessed Aug. 7, 2020), attached hereto as Exhibit Q.

21 18. California Department of Public Health, COVID-19 County Data
22 Monitoring (accessed Aug. 7, 2020), attached hereto as Exhibit R.

23 19. California Department of Public Health, COVID-19 County Data
24 Monitoring, Step 1: Active Data Monitoring (accessed Aug. 8, 2020), attached
25 hereto as Exhibit S.

26 20. California Department of Public Health, COVID-19 County Monitoring
27 Step 2: Targeted Engagement with CDPH (accessed Aug. 8, 2020), attached hereto
28 as Exhibit T.

1 21. California Department of Public Health, COVID-19 County Monitoring
2 Step 3: Reinstitute Community Measures (accessed Aug. 8, 2020), attached hereto
3 as Exhibit U.

4 22. State Officials Announce Latest COVID-19 Facts, July 31, 2020, State
5 confirms first death of a young person related to COVID-19
6 (<https://www.cdph.ca.gov/Programs/OPA/Pages/NR20-179.aspx>, accessed Aug. 8,
7 2020), attached hereto as Exhibit V.

8 23. Christine M. Szablewski, et al., SARS-CoV-2 Transmission and Infection
9 Among Attendees of an Overnight Camp — Georgia, June 2020, 69(31) Centers for
10 Disease Control Morbidity and Mortality Weekly Report, pp. 1023-1025 (Aug. 7,
11 2020) (<https://www.cdc.gov/mmwr/volumes/69/wr/mm6931e1.htm>, accessed Aug.
12 8, 2020), attached hereto as Exhibit W.

13 24. The Centers for Disease Control study of COVID-19 transmission and
14 infection among attendees of an overnight camp in Georgia reported the following
15 facts and transmission rates: “A total of 597 Georgia residents attended camp A.
16 Median camper age was 12 years (range = 6–19 years), and 53% (182 of 346) were
17 female. The median age of staff members and trainees was 17 years (range = 14–59
18 years), and 59% (148 of 251) were female. Test results were available for 344
19 (58%) attendees; among these, 260 (76%) were positive. The overall attack rate was
20 44% (260 of 597), 51% among those aged 6–10 years, 44% among those aged 11–
21 17 years, and 33% among those aged 18–21 years (Table). Attack rates increased
22 with increasing length of time spent at the camp, with staff members having the
23 highest attack rate (56%). During June 21–27, occupancy of the 31 cabins averaged
24 15 persons per cabin (range = 1–26); median cabin attack rate was 50% (range =
25 22%–70%) among 28 cabins that had one or more cases. Among 136 cases with
26 available symptom data, 36 (26%) patients reported no symptoms; among 100
27 (74%) who reported symptoms, those most commonly reported were subjective or
28 documented fever (65%), headache (61%), and sore throat (46%). [¶] The findings

1 in this report are subject to at least three limitations. First, attack rates presented are
2 likely an underestimate because cases might have been missed among persons not
3 tested or whose test results were not reported. Second, given the increasing
4 incidence of COVID-19 in Georgia in June and July, some cases might have
5 resulted from transmission occurring before or after camp attendance.†† Finally, it
6 was not possible to assess individual adherence to COVID-19 prevention measures
7 at camp A, including physical distancing between, and within, cabin cohorts and
8 use of cloth masks, which were not required for campers.”

9 25. The list of reported school outbreaks of COVID-19 in the United States,
10 compiled in Santora, *All These Schools Reopened and Then Had COVID-19*
11 *Outbreaks*, Fatherly, August 7, 2020, accessed via MSN on August 8, 2020,
12 attached hereto as Exhibit X.

13 26. After reopening schools, Israel ordered schools shut down after
14 COVID-19 outbreaks. See National Public Radio, *After Reopening Schools, Israel*
15 *Orders Them to Shut Down After COVID-19 Cases Are Discovered*, June 3, 2020,
16 attached hereto as Exhibit Y; and see Isabel Kershner, et al., *When Covid Subsided,*
17 *Israel Reopened Its Schools. It Didn't Go Well*, The New York Times, Aug. 4,
18 2020, attached hereto as Exhibit Z.

19 27. The recent COVID-19 outbreak at North Paulding High School in
20 Georgia. See Derek Hawkins, *Nine people test positive for the coronavirus at*
21 *Georgia school where photos of packed hallways went viral*, The Washington Post,
22 Aug. 9, 2020, attached hereto as Exhibit AA.

23 28. The COVID-19 woutbreak at Greenfield Central Junior High School in
24 Indiana. See Eliza Shapiro, et al., *A School Reopens, and the Coronavirus Creeps*
25 *In*, The New York Times, Aug. 1, 2020, attached hereto as Exhibit BB.

26 29. The study, observations and conclusions reached in Young Joon Park, et
27 al., *Contract Tracing during Coronavirus Disease Outbreak, South Korea, 2020*,

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1 Centers for Disease Control Dispatch, vol. 26, no. 10 (early release), attached
2 hereto as Exhibit CC.

3 30. Preparing K-12 School Administrators for a Safe Return to School in Fall
4 2020, Centers for Disease Control and Prevention, updated Aug. 1, 2020, attached
5 hereto as Exhibit DD.

6 31. Stronger Together: A Guidebook for the Safe Reopening of California's
7 Public Schools, California Department of Education, June 2020, attached hereto as
8 Exhibit EE.

9 32. Distance Learning Frequently Asked Questions, California Department
10 of Education, accessed Aug. 9, 2020, attached hereto as Exhibit FF.

11 33. Learning Continuity and Attendance Plan Instructions (2020-21),
12 California Department of Education, Aug. 2020, attached hereto as Exhibit GG.

13 34. Learning Continuity and Attendance Plan Template (2020-21), California
14 Department of Education, Jul. 2020, attached hereto as Exhibit HH.

15 35. California Department of Education Official Letter, 2020 Budget Act and
16 Special Education, July 15, 2020, attached hereto as Exhibit II.

17 36. California State Budget Summary – 2020-2021, K-12 Education, pages
18 31-41, attached hereto as Exhibit JJ.

19 37. California Department of Education, Release #20-63, State
20 Superintendent Tony Thurmond Outlines Ongoing Supports to Strengthen Distance
21 Learning and Announces Timeline for Ethnic Studies Model Curriculum during
22 Virtual Media Check-in, dated July 29, 2020, attached hereto as Exhibit KK.

23 38. California Department of Education, Release #20-65, State
24 Superintendent Tony Thurmond Announces Major Collaboration with Apple and
25 T-Mobile to Connect Students in Need, dated August 5, 2020, attached hereto as
26 Exhibit LL.

27 39. California Department of Education, Release #20-66, State
28 Superintendent Tony Thurmond and Digital Divide Task Force Connect School

1 Leaders to Available Devices as Learning Resumes, dated August 5, 2020, attached
2 hereto as Exhibit MM.

3 40. Excerpts of California Senate Bill No. 98, attached hereto as Exhibit NN.

4 41. Transcript of Governor Newsom’s July 17, 2020, Press Conference,
5 attached hereto as Exhibit OO.

6 **AUTHORITY IN SUPPORT**
7 **OF REQUEST FOR JUDICIAL NOTICE**

8 Under Fed. R. Evid. 201, a court may take judicial notice of “matters of public
9 record.” (*Lee v. City of Los Angeles*, 250 F.3d 668, 689 (9th Cir. Cal. 2001)
10 [citation omitted].) This includes the actions of state agencies. “We take judicial
11 notice of the PUC's order because its existence is ‘capable of accurate and ready
12 determination by resort to sources whose accuracy cannot reasonably be
13 questioned.’” *W. Radio Services Co. v. Qwest Corp.*, 530 F.3d 1186, 1192 (9th Cir.
14 2008), citing to Fed.R.Evid. 201(b); *Nugget Hydroelectric, L.P. v. Pac. Gas & Elec.*
15 *Co.*, 981 F.2d 429, 435 (9th Cir.1992) (taking judicial notice of the existence of
16 decisions of the California Public Utility Commission on *force majeure* claims).
17 Information and documents on government websites are also subject to judicial
18 notice. See, *Daniels-Hall v. Nat’l Educ. Ass’n*, 629 F.3d 992, 998-99 (9th Cir.
19 2010).

20 Request for Judicial Notice Nos. 1 through 41 and the attached Exhibits A
21 through OO, are also properly subject to judicial notice under Fed. R. Evid.
22 201(b)(2) because each “can be accurately and readily determined from sources
23 whose accuracy cannot reasonably be questioned.”

24 Judicial notice of above referenced matter is also consistent with California
25 law. Request for Judicial Notice Nos. 1 through 22 and 31-38 are properly subject
26 to judicial notice under California Evidence Code sections 451, subdivision (b), and
27 452, subdivisions (c) [official acts of executive departments]. Request for Judicial
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1 Notice Nos. 1 through 41 are properly subject to judicial notice under California
2 Evidence Code section 452, subdivision (h) [facts and propositions not reasonably
3 subject to dispute and capable of immediate and accurate determination by resort to
4 sources of reasonably indisputable accuracy].

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Dated: August 9, 2020

Respectfully submitted,
XAVIER BECERRA
Attorney General of California
JENNIFER G. PERKELL
Supervising Deputy Attorney General

/s Darin L. Wessel
DARIN L. WESSEL
JENNIFER A. BUNSHOFT
Deputy Attorneys General
Attorneys for Defendants

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EXHIBIT A

EXECUTIVE DEPARTMENT
STATE OF CALIFORNIA

PROCLAMATION OF A STATE OF EMERGENCY

WHEREAS in December 2019, an outbreak of respiratory illness due to a novel coronavirus (a disease now known as COVID-19), was first identified in Wuhan City, Hubei Province, China, and has spread outside of China, impacting more than 75 countries, including the United States; and

WHEREAS the State of California has been working in close collaboration with the national Centers for Disease Control and Prevention (CDC), with the United States Health and Human Services Agency, and with local health departments since December 2019 to monitor and plan for the potential spread of COVID-19 to the United States; and

WHEREAS on January 23, 2020, the CDC activated its Emergency Response System to provide ongoing support for the response to COVID-19 across the country; and

WHEREAS on January 24, 2020, the California Department of Public Health activated its Medical and Health Coordination Center and on March 2, 2020, the Office of Emergency Services activated the State Operations Center to support and guide state and local actions to preserve public health; and

WHEREAS the California Department of Public Health has been in regular communication with hospitals, clinics and other health providers and has provided guidance to health facilities and providers regarding COVID-19; and

WHEREAS as of March 4, 2020, across the globe, there are more than 94,000 confirmed cases of COVID-19, tragically resulting in more than 3,000 deaths worldwide; and

WHEREAS as of March 4, 2020, there are 129 confirmed cases of COVID-19 in the United States, including 53 in California, and more than 9,400 Californians across 49 counties are in home monitoring based on possible travel-based exposure to the virus, and officials expect the number of cases in California, the United States, and worldwide to increase; and

WHEREAS for more than a decade California has had a robust pandemic influenza plan, supported local governments in the development of local plans, and required that state and local plans be regularly updated and exercised; and

WHEREAS California has a strong federal, state and local public health and health care delivery system that has effectively responded to prior events including the H1N1 influenza virus in 2009, and most recently Ebola; and



WHEREAS experts anticipate that while a high percentage of individuals affected by COVID-19 will experience mild flu-like symptoms, some will have more serious symptoms and require hospitalization, particularly individuals who are elderly or already have underlying chronic health conditions; and

WHEREAS it is imperative to prepare for and respond to suspected or confirmed COVID-19 cases in California, to implement measures to mitigate the spread of COVID-19, and to prepare to respond to an increasing number of individuals requiring medical care and hospitalization; and

WHEREAS if COVID-19 spreads in California at a rate comparable to the rate of spread in other countries, the number of persons requiring medical care may exceed locally available resources, and controlling outbreaks minimizes the risk to the public, maintains the health and safety of the people of California, and limits the spread of infection in our communities and within the healthcare delivery system; and

WHEREAS personal protective equipment (PPE) is not necessary for use by the general population but appropriate PPE is one of the most effective ways to preserve and protect California's healthcare workforce at this critical time and to prevent the spread of COVID-19 broadly; and

WHEREAS state and local health departments must use all available preventative measures to combat the spread of COVID-19, which will require access to services, personnel, equipment, facilities, and other resources, potentially including resources beyond those currently available, to prepare for and respond to any potential cases and the spread of the virus; and

WHEREAS I find that conditions of Government Code section 8558(b), relating to the declaration of a State of Emergency, have been met; and

WHEREAS I find that the conditions caused by COVID-19 are likely to require the combined forces of a mutual aid region or regions to appropriately respond; and

WHEREAS under the provisions of Government Code section 8625(c), I find that local authority is inadequate to cope with the threat posed by COVID-19; and

WHEREAS under the provisions of Government Code section 8571, I find that strict compliance with various statutes and regulations specified in this order would prevent, hinder, or delay appropriate actions to prevent and mitigate the effects of the COVID-19.

NOW, THEREFORE, I, GAVIN NEWSOM, Governor of the State of California, in accordance with the authority vested in me by the State Constitution and statutes, including the California Emergency Services Act, and in particular, Government Code section 8625, **HEREBY PROCLAIM A STATE OF EMERGENCY** to exist in California.

IT IS HEREBY ORDERED THAT:

1. In preparing for and responding to COVID-19, all agencies of the state government use and employ state personnel, equipment, and facilities or perform any and all activities consistent with the direction of the Office of Emergency Services and the State Emergency Plan, as well as the California Department of Public Health and the Emergency Medical Services Authority. Also, all residents are to heed the advice of emergency officials with regard to this emergency in order to protect their safety.
2. As necessary to assist local governments and for the protection of public health, state agencies shall enter into contracts to arrange for the procurement of materials, goods, and services needed to assist in preparing for, containing, responding to, mitigating the effects of, and recovering from the spread of COVID-19. Applicable provisions of the Government Code and the Public Contract Code, including but not limited to travel, advertising, and competitive bidding requirements, are suspended to the extent necessary to address the effects of COVID-19.
3. Any out-of-state personnel, including, but not limited to, medical personnel, entering California to assist in preparing for, responding to, mitigating the effects of, and recovering from COVID-19 shall be permitted to provide services in the same manner as prescribed in Government Code section 179.5, with respect to licensing and certification. Permission for any such individual rendering service is subject to the approval of the Director of the Emergency Medical Services Authority for medical personnel and the Director of the Office of Emergency Services for non-medical personnel and shall be in effect for a period of time not to exceed the duration of this emergency.
4. The time limitation set forth in Penal Code section 396, subdivision (b), prohibiting price gouging in time of emergency is hereby waived as it relates to emergency supplies and medical supplies. These price gouging protections shall be in effect through September 4, 2020.
5. Any state-owned properties that the Office of Emergency Services determines are suitable for use to assist in preparing for, responding to, mitigating the effects of, or recovering from COVID-19 shall be made available to the Office of Emergency Services for this purpose, notwithstanding any state or local law that would restrict, delay, or otherwise inhibit such use.
6. Any fairgrounds that the Office of Emergency Services determines are suitable to assist in preparing for, responding to, mitigating the effects of, or recovering from COVID-19 shall be made available to the Office of Emergency Services pursuant to the Emergency Services Act, Government Code section 8589. The Office of Emergency Services shall notify the fairgrounds of the intended use and can immediately use the fairgrounds without the fairground board of directors' approval, and

notwithstanding any state or local law that would restrict, delay, or otherwise inhibit such use.

7. The 30-day time period in Health and Safety Code section 101080, within which a local governing authority must renew a local health emergency, is hereby waived for the duration of this statewide emergency. Any such local health emergency will remain in effect until each local governing authority terminates its respective local health emergency.
8. The 60-day time period in Government Code section 8630, within which local government authorities must renew a local emergency, is hereby waived for the duration of this statewide emergency. Any local emergency proclaimed will remain in effect until each local governing authority terminates its respective local emergency.
9. The Office of Emergency Services shall provide assistance to local governments that have demonstrated extraordinary or disproportionate impacts from COVID-19, if appropriate and necessary, under the authority of the California Disaster Assistance Act, Government Code section 8680 et seq., and California Code of Regulations, Title 19, section 2900 et seq.
10. To ensure hospitals and other health facilities are able to adequately treat patients legally isolated as a result of COVID-19, the Director of the California Department of Public Health may waive any of the licensing requirements of Chapter 2 of Division 2 of the Health and Safety Code and accompanying regulations with respect to any hospital or health facility identified in Health and Safety Code section 1250. Any waiver shall include alternative measures that, under the circumstances, will allow the facilities to treat legally isolated patients while protecting public health and safety. Any facilities being granted a waiver shall be established and operated in accordance with the facility's required disaster and mass casualty plan. Any waivers granted pursuant to this paragraph shall be posted on the Department's website.
11. To support consistent practices across California, state departments, in coordination with the Office of Emergency Services, shall provide updated and specific guidance relating to preventing and mitigating COVID-19 to schools, employers, employees, first responders and community care facilities by no later than March 10, 2020.
12. To promptly respond for the protection of public health, state entities are, notwithstanding any other state or local law, authorized to share relevant medical information, limited to the patient's underlying health conditions, age, current condition, date of exposure, and possible contact tracing, as necessary to address the effect of the COVID-19 outbreak with state, local, federal, and nongovernmental partners, with such information to be used for the limited purposes of monitoring, investigation and control, and treatment and coordination of care. The

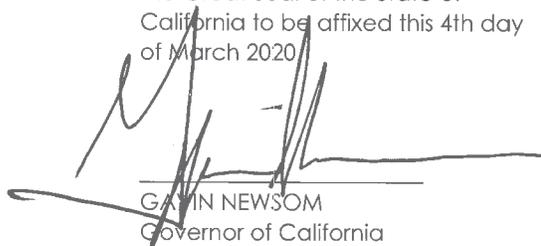


notification requirement of Civil Code section 1798.24, subdivision (i), is suspended.

13. Notwithstanding Health and Safety Code sections 1797.52 and 1797.218, during the course of this emergency, any EMT-P licensees shall have the authority to transport patients to medical facilities other than acute care hospitals when approved by the California EMS Authority. In order to carry out this order, to the extent that the provisions of Health and Safety Code sections 1797.52 and 1797.218 may prohibit EMT-P licensees from transporting patients to facilities other than acute care hospitals, those statutes are hereby suspended until the termination of this State of Emergency.
14. The Department of Social Services may, to the extent the Department deems necessary to respond to the threat of COVID-19, waive any provisions of the Health and Safety Code or Welfare and Institutions Code, and accompanying regulations, interim licensing standards, or other written policies or procedures with respect to the use, licensing, or approval of facilities or homes within the Department's jurisdiction set forth in the California Community Care Facilities Act (Health and Safety Code section 1500 et seq.), the California Child Day Care Facilities Act (Health and Safety Code section 1596.70 et seq.), and the California Residential Care Facilities for the Elderly Act (Health and Safety Code section 1569 et seq.). Any waivers granted pursuant to this paragraph shall be posted on the Department's website.

I FURTHER DIRECT that as soon as hereafter possible, this proclamation be filed in the Office of the Secretary of State and that widespread publicity and notice be given of this proclamation.

IN WITNESS WHEREOF I have hereunto set my hand and caused the Great Seal of the State of California to be affixed this 4th day of March 2020.



GAVIN NEWSOM
Governor of California

ATTEST:

ALEX PADILLA
Secretary of State



EXHIBIT B

EXECUTIVE DEPARTMENT
STATE OF CALIFORNIA

EXECUTIVE ORDER N-25-20

WHEREAS on March 4, 2020, I proclaimed a State of Emergency to exist in California as a result of the threat of COVID-19; and

WHEREAS despite sustained efforts, the virus remains a threat, and further efforts to control the spread of the virus to reduce and minimize the risk of infection are needed; and

WHEREAS state and local public health officials may, as they deem necessary in the interest of public health, issue guidance limiting or recommending limitations upon attendance at public assemblies, conferences, or other mass events, which could cause the cancellation of such gatherings through no fault or responsibility of the parties involved, thereby constituting a force majeure; and

WHEREAS the Department of Public Health is maintaining up-to-date guidance relating to COVID-19, available to the public at <http://cdph.ca.gov/covid19>; and

WHEREAS the State of California and local governments, in collaboration with the Federal government, continue sustained efforts to minimize the spread and mitigate the effects of COVID-19; and

WHEREAS there is a need to secure numerous facilities to accommodate quarantine, isolation, or medical treatment of individuals testing positive for or exposed to COVID-19; and

WHEREAS, many individuals who have developmental disabilities and receive services through regional centers funded by the Department of Developmental Services also have chronic medical conditions that make them more susceptible to serious symptoms of COVID-19, and it is critical that they continue to receive their services while also protecting their own health and the general public health; and

WHEREAS individuals exposed to COVID-19 may be temporarily unable to report to work due to illness caused by COVID-19 or quarantines related to COVID-19 and individuals directly affected by COVID-19 may experience potential loss of income, health care and medical coverage, and ability to pay for housing and basic needs, thereby placing increased demands on already strained regional and local health and safety resources such as shelters and food banks; and

WHEREAS in the interest of public health and safety, it is necessary to exercise my authority under the Emergency Services Act, specifically Government Code section 8572, to ensure adequate facilities exist to address the impacts of COVID-19; and



WHEREAS under the provisions of Government Code section 8571, I find that strict compliance with various statutes and regulations specified in this order would prevent, hinder, or delay appropriate actions to prevent and mitigate the effects of the COVID-19 pandemic.

NOW, THEREFORE, I, GAVIN NEWSOM, Governor of the State of California, in accordance with the authority vested in me by the State Constitution and statutes of the State of California, and in particular, Government Code sections 8567, 8571 and 8572, do hereby issue the following order to become effective immediately:

IT IS HEREBY ORDERED THAT:

1. All residents are to heed any orders and guidance of state and local public health officials, including but not limited to the imposition of social distancing measures, to control the spread of COVID-19.
2. For the period that began January 24, 2020 through the duration of this emergency, the Employment Development Department shall have the discretion to waive the one-week waiting period in Unemployment Insurance Code section 2627(b)(1) for disability insurance applicants who are unemployed and disabled as a result of the COVID-19, and who are otherwise eligible for disability insurance benefits.
3. For the period that began January 24, 2020 through the duration of this emergency, the Employment Development Department shall have the discretion to waive the one-week waiting period in Unemployment Insurance Code section 1253(d) for unemployment insurance applicants who are unemployed as a result of the COVID-19, and who are otherwise eligible for unemployment insurance benefits.
4. Notwithstanding Health and Safety Code section 1797.172(b), during the course of this emergency, the Director of the Emergency Medical Services Authority shall have the authority to implement additions to local optional scopes of practice without first consulting with a committee of local EMS medical directors named by the EMS Medical Directors Association of California.
5. In order to quickly provide relief from interest and penalties, the provisions of the Revenue and Taxation Code that apply to the taxes and fees administered by the Department of Tax and Fee Administration, requiring the filing of a statement under penalty of perjury setting forth the facts for a claim for relief, are suspended for a period of 60 days after the date of this Order for any individuals or businesses who are unable to file a timely tax return or make a timely payment as a result of complying with a state or local public health official's imposition or recommendation of social distancing measures related to COVID-19.
6. The Franchise Tax Board, the Board of Equalization, the Department of Tax and Fee Administration, and the Office of Tax Appeals shall use their administrative powers where appropriate to provide those individuals and businesses impacted by complying with a state or local public health official's imposition or recommendation of social



distancing measures related to COVID-19 with the extensions for filing, payment, audits, billing, notices, assessments, claims for refund, and relief from subsequent penalties and interest.

7. The Governor's Office of Emergency Services shall ensure adequate state staffing during this emergency. Consistent with applicable federal law, work hour limitations for retired annuitants, permanent and intermittent personnel, and state management and senior supervisors, are suspended. Furthermore, reinstatement and work hour limitations in Government Code sections 21220, 21224(a), and 7522.56(b), (d), (f), and (g), and the time limitations in Government Code section 19888.1 and California Code of Regulations, title 2, sections 300-303 are suspended. The Director of the California Department of Human Resources must be notified of any individual employed pursuant to these waivers.
8. The California Health and Human Services Agency and the Office of Emergency Services shall identify, and shall otherwise be prepared to make available—including through the execution of any necessary contracts or other agreements and, if necessary, through the exercise of the State's power to commandeer property – hotels and other places of temporary residence, medical facilities, and other facilities that are suitable for use as places of temporary residence or medical facilities as necessary for quarantining, isolating, or treating individuals who test positive for COVID-19 or who have had a high-risk exposure and are thought to be in the incubation period.
9. The certification and licensure requirements of California Code of Regulations, Title 17, section 1079 and Business and Professions Code section 1206.5 are suspended as to all persons who meet the requirements under the Clinical Laboratory Improvement Amendments of section 353 of the Public Health Service Act for high complexity testing and who are performing analysis of samples to test for SARS-CoV-2, the virus that causes COVID-19, in any certified public health laboratory or licensed clinical laboratory.
10. To ensure that individuals with developmental disabilities continue to receive the services and supports mandated by their individual program plans threatened by disruptions caused by COVID-19, the Director of the Department of Developmental Services may issue directives waiving any provision or requirement of the Lanterman Developmental Disabilities Services Act, the California Early Intervention Services Act, and the accompanying regulations of Title 17, Division 2 of the California Code of Regulations. A directive may delegate to the regional centers any authority granted to the Department by law where the Director believes such delegation is necessary to ensure services to individuals with developmental disabilities. The Director shall describe the need justifying the waiver granted in each directive and articulate how the waiver is necessary to protect the public health or safety from the threat of COVID-19 or necessary to ensure that services to individuals with developmental disabilities are not disrupted. Any waiver granted by a directive shall expire 30 days from the date of its issuance. The Director may grant one or more 30-day extensions if the waiver continues to be necessary

to protect health or safety or to ensure delivery of services. The Director shall rescind a waiver once it is no longer necessary to protect public health or safety or ensure delivery of services. Any waivers and extensions granted pursuant to this paragraph shall be posted on the Department's website.

11. Notwithstanding any other provision of state or local law, including the Bagley-Keene Act or the Brown Act, a local legislative body or state body is authorized to hold public meetings via teleconferencing and to make public meetings accessible telephonically or otherwise electronically to all members of the public seeking to attend and to address the local legislative body or state body, during the period in which state or local public officials impose or recommend measures to promote social distancing, including but not limited to limitations on public events. All requirements in both the Bagley-Keene Act and the Brown Act expressly or impliedly requiring the physical presence of members, the clerk or other personnel of the body, or of the public as a condition of participation in or quorum for a public meeting are hereby waived.

In particular, any otherwise-applicable requirements that

- (i) state and local bodies notice each teleconference location from which a member will be participating in a public meeting;
- (ii) each teleconference location be accessible to the public;
- (iii) members of the public may address the body at each teleconference conference location;
- (iv) state and local bodies post agendas at all teleconference locations;
- (v) at least one member of the state body be physically present at the location specified in the notice of the meeting; and
- (vi) during teleconference meetings, a least a quorum of the members of the local body participate from locations within the boundaries of the territory over which the local body exercises jurisdiction

are hereby suspended, on the conditions that:

- (i) each state or local body must give advance notice of each public meeting, according to the timeframe otherwise prescribed by the Bagley-Keene Act or the Brown Act, and using the means otherwise prescribed by the Bagley-Keene Act or the Brown Act, as applicable; and
- (ii) consistent with the notice requirement in paragraph (i), each state or local body must notice at least one publicly accessible location from which members of the public shall have the right to observe and offer public comment at the public meeting, consistent with the public's rights of access and public comment otherwise provided for by the Bagley-Keene Act and the Brown Act, as applicable (including, but not limited to, the requirement that such rights of access and public comment be made available in a manner consistent with the Americans with Disabilities Act).

In addition to the mandatory conditions set forth above, all state and local bodies are urged to use sound discretion and to make reasonable efforts to adhere as closely as reasonably possible to the provisions of the Bagley-Keene Act and the Brown Act, and other applicable local laws regulating the conduct of public meetings, in order to maximize transparency and provide the public access to their meetings.

IT IS FURTHER ORDERED that as soon as hereafter possible, this Order be filed in the Office of the Secretary of State and that widespread publicity and notice be given of this Order.

This Order is not intended to, and does not, create any rights or benefits, substantive or procedural, enforceable at law or in equity, against the State of California, its agencies, departments, entities, officers, employees, or any other person.

IN WITNESS WHEREOF I have hereunto set my hand and caused the Great Seal of the State of California to be affixed this 12th day of March 2020.



GAVIN NEWSOM
Governor of California

ATTEST:

ALEX PADILLA
Secretary of State

EXHIBIT C

March 22, 2020

On March 19, 2020, Governor Newsom issued Executive Order N-33-20 directing all residents immediately to heed current State public health directives to stay home, except as needed to maintain continuity of operations of essential critical infrastructure sectors and additional sectors as the State Public Health Officer may designate as critical to protect health and well-being of all Californians.

In accordance with this order, the State Public Health Officer has designated the following list of “Essential Critical Infrastructure Workers” to help state, local, tribal, and industry partners as they work to protect communities, while ensuring continuity of functions critical to public health and safety, as well as economic and national security.

HEALTHCARE / PUBLIC HEALTH

Sector Profile

The Healthcare and Public Health (HPH) Sector is large, diverse, and open, spanning both the public and private sectors. It includes publicly accessible healthcare facilities, research centers, suppliers, manufacturers, and other physical assets and vast, complex public-private information technology systems required for care delivery and to support the rapid, secure transmission and storage of large amounts of HPH data.

Essential Workforce

- Workers providing COVID-19 testing; Workers that perform critical clinical research needed for COVID-19 response.
- Health care providers and caregivers (e.g., physicians, dentists, psychologists, mid-level practitioners, nurses and assistants, infection control and quality assurance personnel, pharmacists, physical and occupational therapists and assistants, social workers, speech pathologists and diagnostic and therapeutic technicians and technologists).
- Hospital and laboratory personnel (including accounting, administrative, admitting and discharge, engineering, epidemiological, source plasma and blood donation, food service, housekeeping, medical records, information technology and operational technology, nutritionists, sanitarians, respiratory therapists, etc.).
- Workers in other medical facilities (including Ambulatory Health and Surgical, Blood Banks, Clinics, Community Mental Health, Comprehensive Outpatient rehabilitation, End Stage Renal Disease, Health Departments, Home Health care, Hospices, Hospitals, Long Term Care, Organ Pharmacies, Procurement Organizations, Psychiatric, Residential, Rural Health Clinics and Federally Qualified Health Centers, cannabis retailers).
- Manufacturers, technicians, logistics and warehouse operators, and distributors of medical equipment, personal protective equipment (PPE), medical gases, pharmaceuticals, blood and blood products, vaccines, testing materials, laboratory supplies, cleaning, sanitizing, disinfecting or sterilization supplies, [personal care/hygiene products](#), and tissue and paper towel products.

- Public health / community health workers, including those who compile, model, analyze and communicate public health information.
- Behavioral health workers (including mental and substance use disorder) responsible for coordination, outreach, engagement, and treatment to individuals in need of mental health and/or substance use disorder services.
- Blood and plasma donors and the employees of the organizations that operate and manage related activities.
- Workers that manage health plans, billing, and health information, who cannot practically work remotely.
- Workers who conduct community-based public health functions, conducting epidemiologic surveillance, compiling, analyzing and communicating public health information, who cannot practically work remotely.
- Workers who provide support to vulnerable populations to ensure their health and well-being including family care providers
- Workers performing cybersecurity functions at healthcare and public health facilities, who cannot practically work remotely.
- Workers conducting research critical to COVID-19 response.
- Workers performing security, incident management, and emergency operations functions at or on behalf of healthcare entities including healthcare coalitions, who cannot practically work remotely.
- Workers who support food, shelter, and social services, and other necessities of life for economically disadvantaged or otherwise needy individuals, such as those residing in shelters.
- Pharmacy employees necessary for filling prescriptions.
- Workers performing mortuary services, including funeral homes, crematoriums, and cemetery workers.
- Workers who coordinate with other organizations to ensure the proper recovery, handling, identification, transportation, tracking, storage, and disposal of human remains and personal effects; certify cause of death; and facilitate access to behavioral health services to the family members, responders, and survivors of an incident.
- Workers supporting veterinary hospitals and clinics

EMERGENCY SERVICES SECTOR

Sector Profile

The Emergency Services Sector (ESS) is a community of highly-skilled, trained personnel, along with the physical and cyber resources, that provide a wide range of prevention, preparedness, response, and recovery services during both day-to-day operations and incident response. The ESS includes geographically distributed facilities and equipment in both paid and volunteer capacities organized primarily at the federal, state, local, tribal, and territorial levels of government, such as city police departments and fire stations, county sheriff's offices, Department of Defense police and fire departments, and town public works departments. The ESS also includes private sector resources, such

as industrial fire departments, private security organizations, and private emergency medical services providers.

Essential Workforce - Law Enforcement, Public Safety and First Responders

- Including front line and management, personnel include emergency management, law enforcement, Emergency Management Systems, fire, and corrections, search and rescue, tactical teams including maritime, aviation, and canine units.
- Emergency Medical Technicians
- Public Safety Answering Points and 911 call center employees
- Fusion Center employees
- Fire Mitigation Activities
- Hazardous material responders and hazardous devices teams, from government and the private sector.
- Workers – including contracted vendors -- who maintain digital systems infrastructure supporting law enforcement and emergency service operations.
- Private security, private fire departments, and private emergency medical services personnel.
- County workers responding to abuse and neglect of children, elders and dependent adults.
- [Animal control officers and humane officers](#)

Essential Workforce - Public Works

- Workers who support the operation, inspection, and maintenance of essential dams, locks and levees
- Workers who support the operation, inspection, and maintenance of essential public works facilities and operations, including bridges, water and sewer main breaks, fleet maintenance personnel, construction of critical or strategic infrastructure, [construction material suppliers](#), traffic signal maintenance, emergency location services for buried utilities, maintenance of digital systems infrastructure supporting public works operations, and other emergent issues
- Workers such as plumbers, electricians, exterminators, and other service providers who provide services that are necessary to maintaining the safety, sanitation, and essential operation of residences.
- Support, such as road and line clearing, to ensure the availability of needed facilities, transportation, energy and communications Support to ensure the effective removal, storage, and disposal of residential and commercial solid waste and hazardous waste.

FOOD AND AGRICULTURE

Sector Profile

The Food and Agricultural (FA) Sector is composed of complex production, processing, and delivery systems and has the capacity to feed people and animals both within and beyond the boundaries of the United States. Beyond domestic food production, the FA Sector also imports many ingredients and finished products, leading to a complex web of growers, processors, suppliers, transporters, distributors, and consumers. This sectors is critical to maintaining and securing our food supply.

Essential Workforce

- Workers supporting groceries, pharmacies, and other retail that sells food and beverage products, including but not limited to Grocery stores, Corner stores and convenience stores, including liquor stores that sell food, Farmers' markets, Food banks, Farm and produce stands, Supermarkets, Similar food retail establishments, Big box stores that sell groceries and essentials
- Restaurant carry-out and quick serve food operations – including food preparation, carry-out and delivery food employees
- Food manufacturer employees and their supplier employees—to include those employed in food processing (packers, meat processing, cheese plants, milk plants, produce, etc.) facilities; livestock, poultry, seafood slaughter facilities; pet and animal feed processing facilities; human food facilities producing by-products for animal food; beverage production facilities; and the production of food packaging
- Farm workers to include those employed in animal food, feed, and ingredient production, packaging, and distribution; manufacturing, packaging, and distribution of veterinary drugs; truck delivery and transport; farm and fishery labor needed to produce our food supply domestically
- Farm workers and support service workers to include those who field crops; commodity inspection; fuel ethanol facilities; storage facilities; and other agricultural inputs
- Employees and firms supporting food, feed, and beverage distribution (including curbside distribution and deliveries), including warehouse workers, vendor-managed inventory controllers, blockchain managers, distribution
- Workers supporting the sanitation of all food manufacturing processes and operations from wholesale to retail
- Company cafeterias - in-plant cafeterias used to feed employees
- Workers in food testing labs in private industries and in institutions of higher education
- Workers essential for assistance programs and government payments
- Workers supporting cannabis retail and dietary supplement retail
- Employees of companies engaged in the production of chemicals, medicines, vaccines, and other substances used by the food and agriculture industry, including pesticides, herbicides, fertilizers, minerals, enrichments, and other agricultural production aids
- Animal agriculture workers to include those employed in veterinary health; manufacturing and distribution of animal medical materials, animal vaccines, animal drugs, feed ingredients, feed, and bedding, etc.; transportation of live animals, animal medical materials; transportation of deceased animals for disposal; raising of animals for food; animal production operations; slaughter and packing plants and associated regulatory and government workforce
- Workers who support the manufacture and distribution of forest products, including, but not limited to timber, paper, and other wood products

- Employees engaged in the manufacture and maintenance of equipment and other infrastructure necessary to agricultural production and distribution

ENERGY

Sector Profile

The Energy Sector consists of widely-diverse and geographically-dispersed critical assets and systems that are often interdependent of one another. This critical infrastructure is divided into three interrelated segments or subsectors—electricity, oil, and natural gas—to include the production, refining, storage, and distribution of oil, gas, and electric power, except for hydroelectric and commercial nuclear power facilities and pipelines. The Energy Sector supplies fuels to the transportation industry, electricity to households and businesses, and other sources of energy that are integral to growth and production across the Nation. In turn, it depends on the Nation’s transportation, information technology, communications, finance, water, and government infrastructures.

Essential Workforce - Electricity industry:

- Workers who maintain, ensure, or restore the generation, transmission, and distribution of electric power, including call centers, utility workers, reliability engineers and fleet maintenance technicians
- Workers needed for safe and secure operations at nuclear generation
- Workers at generation, transmission, and electric blackstart facilities
- Workers at Reliability Coordinator (RC), Balancing Authorities (BA), and primary and backup Control Centers (CC), including but not limited to independent system operators, regional transmission organizations, and balancing authorities
- Mutual assistance personnel
- IT and OT technology staff – for EMS (Energy Management Systems) and Supervisory Control and Data
- Acquisition (SCADA) systems, and utility data centers; Cybersecurity engineers; cybersecurity risk management
- Vegetation management crews and traffic workers who support
- Environmental remediation/monitoring technicians
- Instrumentation, protection, and control technicians

Essential Workforce - Petroleum workers:

- Petroleum product storage, pipeline, marine transport, terminals, rail transport, road transport
- Crude oil storage facilities, pipeline, and marine transport
- Petroleum refinery facilities
- Petroleum security operations center employees and workers who support emergency response services

- Petroleum operations control rooms/centers
- Petroleum drilling, extraction, production, processing, refining, terminal operations, transporting, and retail for use as end-use fuels or feedstocks for chemical manufacturing
- Onshore and offshore operations for maintenance and emergency response
- Retail fuel centers such as gas stations and truck stops, and the distribution systems that support them.

Essential Workforce - Natural and propane gas workers:

- Natural gas transmission and distribution pipelines, including compressor stations
- Underground storage of natural gas
- Natural gas processing plants, and those that deal with natural gas liquids
- Liquefied Natural Gas (LNG) facilities
- Natural gas security operations center, natural gas operations dispatch and control rooms/centers natural gas emergency response and customer emergencies, including natural gas leak calls
- Drilling, production, processing, refining, and transporting natural gas for use as end-use fuels, feedstocks for chemical manufacturing, or use in electricity generation
- Propane gas dispatch and control rooms and emergency response and customer emergencies, including propane leak calls
- Propane gas service maintenance and restoration, including call centers
- Processing, refining, and transporting natural liquids, including propane gas, for use as end-use fuels or feedstocks for chemical manufacturing
- Propane gas storage, transmission, and distribution centers

WATER AND WASTEWATER

Sector Profile

The Water and Wastewater Sector is a complex sector composed of drinking water and wastewater infrastructure of varying sizes and ownership types. Multiple governing authorities pertaining to the Water and Wastewater Sector provide for public health, environmental protection, and security measures, among others.

Essential Workforce

Employees needed to operate and maintain drinking water and wastewater/drainage infrastructure, including:

- Operational staff at water authorities
- Operational staff at community water systems
- Operational staff at wastewater treatment facilities
- Workers repairing water and wastewater conveyances and performing required sampling or monitoring

- Operational staff for water distribution and testing
- Operational staff at wastewater collection facilities
- Operational staff and technical support for SCADA Control systems
- Chemical disinfectant suppliers for wastewater and personnel protection
- Workers that maintain digital systems infrastructure supporting water and wastewater operations

TRANSPORTATION AND LOGISTICS

Sector Profile

The Transportation Systems Sector consists of seven key subsectors, or modes:

- Aviation includes aircraft, air traffic control systems, and airports, heliports, and landing strips. Commercial aviation services at civil and joint-use military airports, heliports, and sea plane bases. In addition, the aviation mode includes commercial and recreational aircraft (manned and unmanned) and a wide-variety of support services, such as aircraft repair stations, fueling facilities, navigation aids, and flight schools.
- Highway and Motor Carrier encompasses roadway, bridges, and tunnels. Vehicles include trucks, including those carrying hazardous materials; other commercial vehicles, including commercial motorcoaches and school buses; vehicle and driver licensing systems; taxis, transportation services including Transportation Network Companies, and delivery services including Delivery Network Companies; traffic management systems; AND cyber systems used for operational management.
- Maritime Transportation System consists of coastline, ports, waterways, and intermodal landside connections that allow the various modes of transportation to move people and goods to, from, and on the water.
- Mass Transit and Passenger Rail includes terminals, operational systems, and supporting infrastructure for passenger services by transit buses, trolleybuses, monorail, heavy rail—also known as subways or metros—light rail, passenger rail, and vanpool/rideshare.
- Pipeline Systems consist of pipelines carrying natural gas hazardous liquids, as well as various chemicals. Above-ground assets, such as compressor stations and pumping stations, are also included.
- Freight Rail consists of major carriers, smaller railroads, active railroad, freight cars, and locomotives.
- Postal and Shipping includes large integrated carriers, regional and local courier services, mail services, mail management firms, and chartered and delivery services.

Essential Workforce

- Employees supporting or enabling transportation functions, including dispatchers, maintenance and repair technicians, warehouse workers, truck stop and rest area workers, and workers that maintain and inspect infrastructure (including those that require cross-border travel)
- Employees of firms providing services that enable logistics operations, including cooling, storing, packaging, and distributing products for wholesale or retail sale or use.
- Mass transit workers
- Taxis, transportation services including Transportation Network Companies, and delivery services including Delivery Network Companies
- Workers responsible for operating dispatching passenger, commuter and freight trains and maintaining rail infrastructure and equipment
- Maritime transportation workers - port workers, mariners, equipment operators
- Truck drivers who haul hazardous and waste materials to support critical infrastructure, capabilities, functions, and services
- Automotive repair and maintenance facilities
- Manufacturers and distributors (to include service centers and related operations) of packaging materials, pallets, crates, containers, and other supplies needed to support manufacturing, packaging staging and distribution operations
- Postal and shipping workers, to include private companies
- Employees who repair and maintain vehicles, aircraft, rail equipment, marine vessels, and the equipment and infrastructure that enables operations that encompass movement of cargo and passengers
- Air transportation employees, including air traffic controllers, ramp personnel, aviation security, and aviation management
- Workers who support the maintenance and operation of cargo by air transportation, including flight crews, maintenance, airport operations, and other on- and off- airport facilities workers

COMMUNICATIONS AND INFORMATION TECHNOLOGY

Sector Profile

The Communications Sector provides products and services that support the efficient operation of today's global information-based society. Communication networks enable people around the world to contact one another, access information instantly, and communicate from remote areas. This involves creating a link between a sender (including voice signals) and one or more recipients using technology (e.g., a telephone system or the Internet) to transmit information from one location to another. Technologies are changing at a rapid pace, increasing the number of products, services, service providers, and communication options. The national communications architecture is a complex collection of networks that are owned and operated by individual service providers. Many of this sector's products and services are foundational or necessary for the operations and services provided by other critical infrastructure sectors. The nature of communication networks involve both physical infrastructure (buildings, switches, towers, antennas, etc.) and cyber infrastructure (routing and

switching software, operational support systems, user applications, etc.), representing a holistic challenge to address the entire physical-cyber infrastructure.

The IT Sector provides products and services that support the efficient operation of today's global information-based society and are integral to the operations and services provided by other critical infrastructure Sectors. The IT Sector is comprised of small and medium businesses, as well as large multinational companies. Unlike many critical infrastructure Sectors composed of finite and easily identifiable physical assets, the IT Sector is a functions-based Sector that comprises not only physical assets but also virtual systems and networks that enable key capabilities and services in both the public and private sectors.

Essential Workforce - Communications:

- Maintenance of communications infrastructure- including privately owned and maintained communication systems- supported by technicians, operators, call-centers, wireline and wireless providers, cable service providers, satellite operations, undersea cable landing stations, Internet Exchange Points, and manufacturers and distributors of communications equipment
- Workers who support radio, television, and media service, including, but not limited to front line news reporters, studio, and technicians for newsgathering and reporting
- Workers at Independent System Operators and Regional Transmission Organizations, and Network Operations staff, engineers and/or technicians to manage the network or operate facilities
- Engineers, technicians and associated personnel responsible for infrastructure construction and restoration, including contractors for construction and engineering of fiber optic cables
- Installation, maintenance and repair technicians that establish, support or repair service as needed
- Central office personnel to maintain and operate central office, data centers, and other network office facilities
- Customer service and support staff, including managed and professional services as well as remote providers of support to transitioning employees to set up and maintain home offices, who interface with customers to manage or support service environments and security issues, including payroll, billing, fraud, and troubleshooting
- Dispatchers involved with service repair and restoration

Essential Workforce - Information Technology:

- Workers who support command centers, including, but not limited to Network Operations Command Center, Broadcast Operations Control Center and Security Operations Command Center
- Data center operators, including system administrators, HVAC & electrical engineers, security personnel, IT managers, data transfer solutions engineers, software and hardware engineers, and database administrators
- Client service centers, field engineers, and other technicians supporting critical infrastructure, as well as manufacturers and supply chain vendors that provide hardware and software, and

information technology equipment (to include microelectronics and semiconductors) for critical infrastructure

- Workers responding to cyber incidents involving critical infrastructure, including medical facilities, SLTT governments and federal facilities, energy and utilities, and banks and financial institutions, and other critical infrastructure categories and personnel
- Workers supporting the provision of essential global, national and local infrastructure for computing services (incl. cloud computing services), business infrastructure, web-based services, and critical manufacturing
- Workers supporting communications systems and information technology used by law enforcement, public safety, medical, energy and other critical industries
- Support required for continuity of services, including janitorial/cleaning personnel

OTHER COMMUNITY-BASED GOVERNMENT OPERATIONS AND ESSENTIAL FUNCTIONS

Essential Workforce

- Critical government workers, as defined by the employer and consistent with Continuity of Operations Plans and Continuity of Government plans.
- County workers responsible for determining eligibility for safety net benefits
- The Courts, consistent with [guidance](#) released by the California Chief Justice
- Workers to ensure continuity of building functions
- Security staff to maintain building access control and physical security measures
- Elections personnel
- Federal, State, and Local, Tribal, and Territorial employees who support Mission Essential Functions and communications networks
- Trade Officials (FTA negotiators; international data flow administrators)
- Weather forecasters
- Workers that maintain digital systems infrastructure supporting other critical government operations
- Workers at operations centers necessary to maintain other essential functions
- Workers who support necessary credentialing, vetting and licensing operations for transportation workers
- Workers who are critical to facilitating trade in support of the national, state, and local emergency response supply chain
- Workers supporting public and private childcare establishments, pre-K establishments, K-12 schools, colleges, and universities for purposes of distance learning, provision of school meals, or care and supervision of minors to support essential workforce across all sectors

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- Workers and instructors supporting academies and training facilities and courses for the purpose of graduating students and cadets that comprise the essential workforce for all identified critical sectors
- Hotel Workers where hotels are used for COVID-19 mitigation and containment measures, including measures to protect homeless populations.
- Construction Workers who support the construction, operation, inspection, and maintenance of construction sites and construction projects (including housing construction)
- Workers such as plumbers, electricians, exterminators, and other service providers who provide services that are necessary to maintaining the safety, sanitation, [construction material sources](#), and essential operation of construction sites and construction projects (including those that support such projects to ensure the availability of needed facilities, transportation, energy and communications; and support to ensure the effective removal, storage, and disposal of solid waste and hazardous waste)
- Commercial Retail Stores, that supply essential sectors, including convenience stores, pet supply stores, auto supplies and repair, hardware and home improvement, and home appliance retailers
- Workers supporting the entertainment industries, studios, and other related establishments, provided they follow covid-19 public health guidance around social distancing.
- Workers critical to operating Rental Car companies that facilitate continuity of operations for essential workforces, and other essential travel
- Workers that provide or determine eligibility for food, shelter, in-home supportive services, child welfare, adult protective services and social services, and other necessities of life for economically disadvantaged or otherwise needy individuals (including family members)
- Professional services, such as legal or accounting services, when necessary to assist in compliance with legally mandated activities and critical sector services
- Faith based services that are provided through streaming or other technology
- Laundromats and laundry services
- [Workers at animal care facilities that provide food, shelter, veterinary and/or routine care and other necessities of life for animals.](#)

CRITICAL MANUFACTURING

Sector Profile

The Critical Manufacturing Sector identifies several industries to serve as the core of the sector: Primary Metals Manufacturing, Machinery Manufacturing, Electrical Equipment, Appliance, and Component Manufacturing, Transportation Equipment Manufacturing Products made by these manufacturing industries are essential to many other critical infrastructure sectors.

Essential Workforce

- Workers necessary for the manufacturing of materials and products needed for medical supply chains, transportation, energy, communications, food and agriculture, chemical manufacturing, nuclear facilities, the operation of dams, water and wastewater treatment, emergency services, and the defense industrial base.

HAZARDOUS MATERIALS

Essential Workforce

- Workers at nuclear facilities, workers managing medical waste, workers managing waste from pharmaceuticals and medical material production, and workers at laboratories processing test kits
- Workers who support hazardous materials response and cleanup
- Workers who maintain digital systems infrastructure supporting hazardous materials management operations

FINANCIAL SERVICES

Sector Profile

The Financial Services Sector includes thousands of depository institutions, providers of investment products, insurance companies, other credit and financing organizations, and the providers of the critical financial utilities and services that support these functions. Financial institutions vary widely in size and presence, ranging from some of the world's largest global companies with thousands of employees and many billions of dollars in assets, to community banks and credit unions with a small number of employees serving individual communities. Whether an individual savings account, financial derivatives, credit extended to a large organization, or investments made to a foreign country, these products allow customers to: Deposit funds and make payments to other parties; Provide credit and liquidity to customers; Invest funds for both long and short periods; Transfer financial risks between customers.

Essential Workforce

- Workers who are needed to process and maintain systems for processing financial transactions and services (e.g., payment, clearing, and settlement; wholesale funding; insurance services; and capital markets activities)
- Workers who are needed to provide consumer access to banking and lending services, including ATMs, and to move currency and payments (e.g., armored cash carriers)
- Workers who support financial operations, such as those staffing data and security operations centers

CHEMICAL

Sector Profile

The Chemical Sector—composed of a complex, global supply chain—converts various raw materials into diverse products that are essential to modern life. Based on the end product produced, the sector can be divided into five main segments, each of which has distinct characteristics, growth dynamics, markets, new developments, and issues: Basic chemicals; Specialty chemicals; Agricultural chemicals; Pharmaceuticals; Consumer products

Essential Workforce

- Workers supporting the chemical and industrial gas supply chains, including workers at chemical manufacturing plants, workers in laboratories, workers at distribution facilities, workers who transport basic raw chemical materials to the producers of industrial and consumer goods, including hand sanitizers, food and food additives, pharmaceuticals, textiles, and paper products.
- Workers supporting the safe transportation of chemicals, including those supporting tank truck cleaning facilities and workers who manufacture packaging items
- Workers supporting the production of protective cleaning and medical solutions, personal protective equipment, and packaging that prevents the contamination of food, water, medicine, among others essential products
- Workers supporting the operation and maintenance of facilities (particularly those with high risk chemicals and/ or sites that cannot be shut down) whose work cannot be done remotely and requires the presence of highly trained personnel to ensure safe operations, including plant contract workers who provide inspections
- Workers who support the production and transportation of chlorine and alkali manufacturing, single-use plastics, and packaging that prevents the contamination or supports the continued manufacture of food, water, medicine, and other essential products, including glass container manufacturing

DEFENSE INDUSTRIAL BASE

Sector Profile

The Defense Industrial Base Sector is the worldwide industrial complex that enables research and development, as well as design, production, delivery, and maintenance of military weapons systems, subsystems, and components or parts, to meet U.S. military requirements. The Defense Industrial Base partnership consists of Department of Defense components, Defense Industrial Base companies and their subcontractors who perform under contract to the Department of Defense, companies providing

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incidental materials and services to the Department of Defense, and government-owned/contractor-operated and government-owned/government-operated facilities. Defense Industrial Base companies include domestic and foreign entities, with production assets located in many countries. The sector provides products and services that are essential to mobilize, deploy, and sustain military operations.

Essential Workforce

- Workers who support the essential services required to meet national security commitments to the federal government and U.S. Military. These individuals, include but are not limited to, aerospace; mechanical and software engineers, manufacturing/production workers; IT support; security staff; security personnel; intelligence support, aircraft and weapon system mechanics and maintainers
- Personnel working for companies, and their subcontractors, who perform under contract to the Department of Defense providing materials and services to the Department of Defense, and government-owned/contractor-operated and government-owned/government-operated facilities

EXHIBIT D

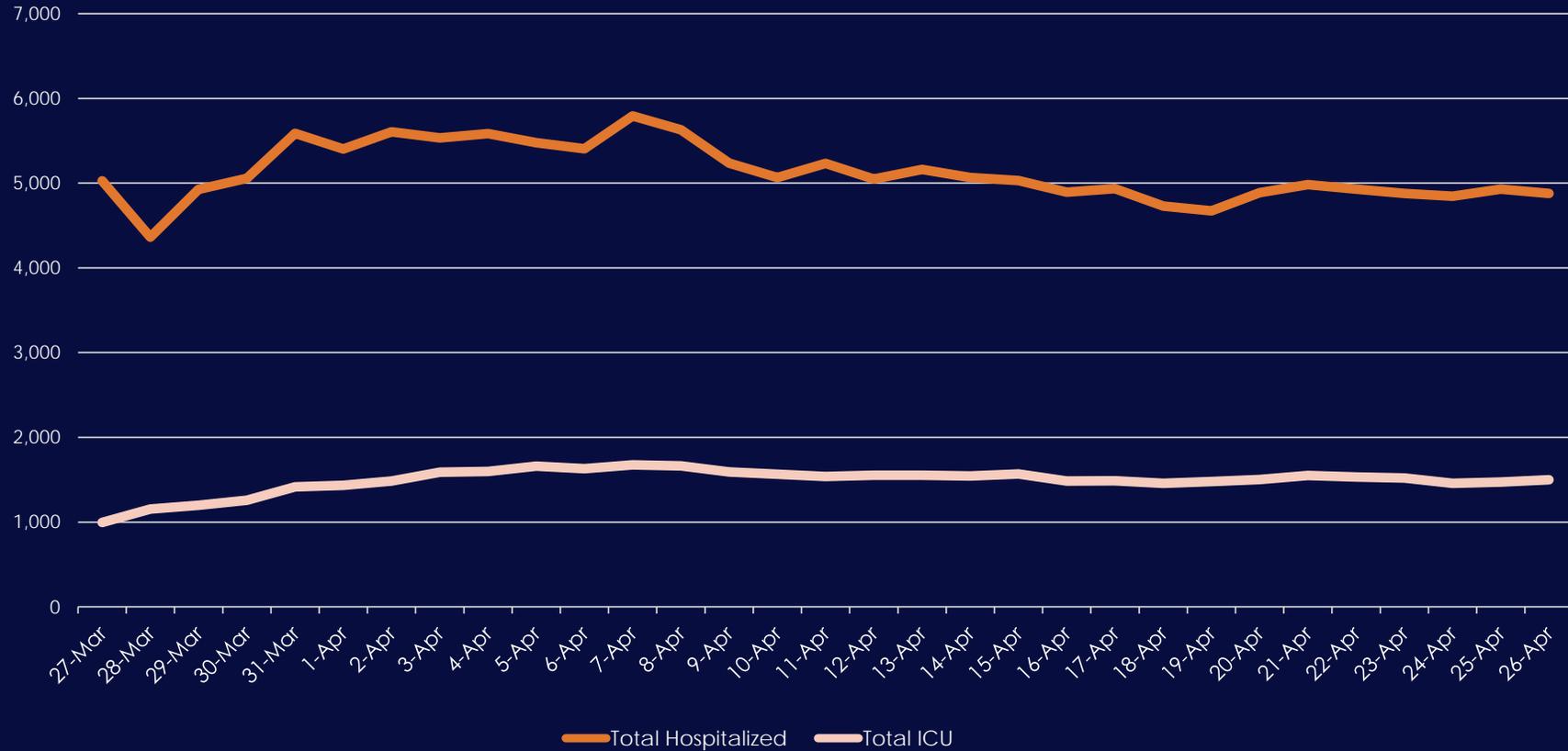


Update on California's Pandemic Roadmap

6 Indicators for Modifying Stay-at-Home Order

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

California Hospitalization Trend Lines



Total includes both COVID-19 confirmed positive hospitalizations as well as COVID-19 suspect hospitalizations.

The Basics



COVID-19 is not going away soon.



Modifications to Stay-At-Home Order must be guided by health risk and a commitment to equity.



Taking responsibility is key at all levels – individual, business, and government.

Resilience Roadmap Stages

STAGE 1: Safety and Preparedness

Making essential workforce environment as safe as possible.

STAGE 2: Lower Risk Workplaces

Creating opportunities for lower risk sectors to adapt and re-open.

Modified school programs and childcare re-open.

STAGE 3: Higher Risk Workplaces

Creating opportunities for higher risk sectors to adapt and re-open.

STAGE 4: End of Stay-At-Home Order

Return to expanded workforce in highest risk workplaces.

Requires
Therapeutics.

Stage 1: Safety and Preparedness

This is where we are now.

- Continue to build out testing, contact tracing, PPE, and hospital surge capacity.
- Continue to make essential workplaces as safe as possible.
 - Physical and work flow adaption
 - Essential workforce safety net
 - Make PPE more widely available
 - Individual behavior changes
- Prepare sector-by-sector safety guidelines for expanded workforce.

Stage 2: Lower Risk Workplaces

Gradually opening some lower risk workplaces with ADAPTATIONS:

- Retail (e.g. curbside pickup)
- Manufacturing
- Offices (when telework not possible)
- Opening more public spaces

Expanded Workforce Safety Net:

- Wage replacement so workers can stay home when sick

Stage 2: Lower Risk Workplaces

Schools and Childcare Facilities with Adaptations:

- Summer programs and next school year potentially starting sooner (July/August)
- Childcare facilities to provide more care
- Address learning gaps
- Ensure students and staff are protected
- Allow broader workforce to return to work

Actions needed to get from Stage 1 to Stage 2



Government Actions

- Policies that allow people to stay home when they're sick
- Guidance provided on how to reduce risk



Business Actions

- Wage replacement so workers can stay home when sick
- Implement adaptations to lower-risk workplaces NOW
- Employees continue to work from home when possible



Individual Actions

- Safety precautions – physical distancing, face coverings, etc.
- Avoid all non-essential travel
- Support and care for people who are at high risk

When are we ready for Stage 2?

Key indicator considerations to move to Stage 2:

- Hospitalization and ICU trends stable.
- Hospital surge capacity to meet demand.
- Sufficient PPE supply to meet demand.
- Sufficient testing capacity to meet demand.
- Contact tracing capacity statewide.

Transition to Stage 2 will occur through a statewide modification to the Stay-At-Home Order.

Opportunity for Regional Variations

During Stage 2, counties may choose to relax stricter local orders at their own pace.

Following Stage 2, once a statewide COVID-19 surveillance system is made possible through testing, further regional variations could be supported.

State will consult and collaborate closely with local governments.

Stage 3: Higher Risk Workplaces

Open higher risk environments with adaptations and limits on size of gatherings:

- Personal care (hair and nail salons, gyms)
- Entertainment venues (movie theaters, sports without live audiences)
- In-person religious services (churches, weddings)

Stage 4: End of Stay-At-Home Order

Re-open highest risk workplaces with all indicators satisfied once therapeutics have been developed:

- Concerts
- Convention Centers
- Live audience sports

Be Part of the Solution

Stay Home. Practice Physical Distancing.

We are enlisting all Californians to help inform the development of guidance for sectors across our economy.

This guidance will provide a framework for how to safely re-open.

CALIFORNIA

ALL

**Your Actions
Save Lives**

covid19.ca.gov

EXHIBIT E

EXECUTIVE ORDER N-60-20

WHEREAS on March 4, 2020, I proclaimed a State of Emergency to exist in California as a result of the threat of COVID-19; and

WHEREAS on March 19, 2020, I issued Executive Order N-33-20, which directed all California residents to immediately heed current State public health directives; and

WHEREAS State public health directives, available at <https://covid19.ca.gov/stay-home-except-for-essential-needs/>, have ordered all California residents stay home except for essential needs, as defined in State public health directives; and

WHEREAS COVID-19 continues to menace public health throughout California; and

WHEREAS the extent to which COVID-19 menaces public health throughout California is expected to continue to evolve, and may vary from place to place within the State; and

WHEREAS California law promotes the preservation of public health by providing for local health officers—appointed by county boards of supervisors and other local authorities—in addition to providing for statewide authority by a State Public Health Officer; and

WHEREAS these local health officers, working in consultation with county boards of supervisors and other local authorities, are well positioned to understand the local needs of their communities; and

WHEREAS local governments are encouraged to coordinate with federally recognized California tribes located within or immediately adjacent to the external geographical boundaries of such local government jurisdiction; and

WHEREAS the global COVID-19 pandemic threatens the entire State, and coordination between state and local public health officials is therefore, and will continue to be, necessary to curb the spread of COVID-19 throughout the State; and

WHEREAS State public health officials have worked, and will continue to work, in consultation with their federal, state, and tribal government partners; and

WHEREAS the State Public Health Officer has articulated a four-stage framework—which includes provisions for the reopening of lower-risk businesses and spaces (“Stage Two”), to be followed by the reopening of higher-risk businesses and spaces (“Stage Three”)—to allow Californians to gradually resume various activities while continuing to preserve public health in the face of COVID-19; and

WHEREAS the threat posed by COVID-19 is dynamic and ever-changing, and the State's response to COVID-19 (including implementation of the four-stage framework) should likewise retain the ability to be dynamic and flexible; and

WHEREAS to preserve this flexibility, and under the provisions of Government Code section 8571, I find that strict compliance with the Administrative Procedure Act, Government Code section 11340 et seq., would prevent, hinder, or delay appropriate actions to prevent and mitigate the effects of the COVID-19 pandemic.

NOW, THEREFORE, I, GAVIN NEWSOM, Governor of the State of California, in accordance with the authority vested in me by the State Constitution and statutes of the State of California, and in particular, Government Code sections 8567, 8571, 8627, and 8665; and also in accordance with the authority vested in the State Public Health Officer by the laws of the State of California, including but not limited to Health and Safety Code sections 120125, 120130, 120135, 120140, 120145, 120150, 120175, and 131080; do hereby issue the following Order to become effective immediately:

IT IS HEREBY ORDERED THAT:

- 1) All residents are directed to continue to obey State public health directives, as made available at <https://covid19.ca.gov/stay-home-except-for-essential-needs/> and elsewhere as the State Public Health Officer may provide.
- 2) As the State moves to allow reopening of lower-risk businesses and spaces ("Stage Two"), and then to allow reopening of higher-risk businesses and spaces ("Stage Three"), the State Public Health Officer is directed to establish criteria and procedures—as set forth in this Paragraph 2—to determine whether and how particular local jurisdictions may implement public health measures that depart from the statewide directives of the State Public Health Officer.

In particular, the State Public Health Officer is directed to establish criteria to determine whether and how, in light of the extent to which the public health is menaced by COVID-19 from place to place within the State, local health officers may (during the relevant stages of reopening) issue directives to establish and implement public health measures less restrictive than any public health measures implemented on a statewide basis pursuant to the statewide directives of the State Public Health Officer.

The State Public Health Officer is further directed to establish procedures through which local health officers may (during the relevant stages of reopening) certify that, if their respective jurisdictions are subject to proposed public health measures (which they shall specify to the extent such specification may be required by the State Public Health Officer) that are less restrictive than public health measures implemented on a statewide basis pursuant to the statewide directives of the State Public Health Officer, the public health will not be menaced. The State Public Health Officer shall additionally establish procedures to permit, in a manner consistent with public health and

safety, local health officers who submit such certifications to establish and implement such less restrictive public health measures within their respective jurisdictions.

The State Public Health Officer may, from time to time and as she deems necessary to respond to the dynamic threat posed by COVID-19, revise the criteria and procedures set forth in this Paragraph 2. Nothing related to the establishment or implementation of such criteria or procedures, or any other aspect of this Order, shall be subject to the Administrative Procedure Act, Government Code section 11340 et seq. Nothing in this Paragraph 2 shall limit the authority of the State Public Health Officer to take any action she deems necessary to protect public health in the face of the threat posed by COVID-19, including (but not limited to) any necessary revision to the four-stage framework previously articulated by the State Public Health Officer.

- 3) Nothing in this Order shall be construed to limit the existing authority of local health officers to establish and implement public health measures within their respective jurisdictions that are more restrictive than, or that otherwise exist in addition to, the public health measures imposed on a statewide basis pursuant to the statewide directives of the State Public Health Officer.

IT IS FURTHER ORDERED that as soon as hereafter possible, this Order be filed in the Office of the Secretary of State and that widespread publicity and notice be given of this Order.

This Order is not intended to, and does not, create any rights or benefits, substantive or procedural, enforceable at law or in equity, against the State of California, its agencies, departments, entities, officers, employees, or any other person.

IN WITNESS WHEREOF I have hereunto set my hand and caused the Great Seal of the State of California to be affixed this 4th day of May 2020.

GAVIN NEWSOM
Governor of California

ATTEST:

ALEX PADILLA
Secretary of State

EXHIBIT F



ORDER OF THE STATE PUBLIC HEALTH
OFFICER
May 7, 2020

On March 19, 2020, I issued an order directing all individuals living in the State of California to stay at home except as needed to facilitate authorized, necessary activities or to maintain the continuity of operations of critical infrastructure sectors. (See <https://covid19.ca.gov/stay-home-except-for-essential-needs/>.) I then set out California's path forward from this "Stay-at-Home" Order in California's Pandemic Roadmap <https://www.gov.ca.gov/wp-content/uploads/2020/05/5.4.20-Update-on-Californias-Pandemic-Roadmap.pdf>. That Roadmap identifies four stages of the pandemic: safety and preparation (Stage 1), reopening of lower-risk workplaces and other spaces (Stage 2), reopening of higher-risk workplaces and other spaces (Stage 3), and finally an easing of final restrictions leading to the end of the stay at home order (Stage 4).

Today, COVID-19 continues to present a significant risk to the health of individuals throughout California. There are confirmed cases of the virus in 54 of the 58 counties across the State, and each day over the past two weeks over one thousand new cases have been confirmed in California and dozens of people have lost their lives due to the virus. However, owing to Californians' mitigation efforts, statewide data currently demonstrates stable rates of new infections and hospitalizations, the maintenance of surge capacity, and an improved ability to test, contact trace, isolate, and provide support to individuals exposed to COVID-19. As State Public Health Officer, I have determined that the statewide data now supports the gradual movement of the entire state from Stage 1 to Stage 2 of California's Pandemic Resilience Roadmap.

Gradual movement into Stage 2 is intended to reintroduce activities and sectors in a phased manner and with necessary modifications, in order to protect public health and result in a lower risk for COVID-19 transmission and outbreak in a community. Such deliberate phasing is critical to allowing the State to protect the public, and to mitigate and manage the impact of the re-openings, such that our health care delivery system has the capacity to respond to potential increased demands. Differences across the state in the prevalence of COVID-19, as well as testing rates, containment capability, and hospital capacity, have resulted in differences among local health jurisdictions' ability to safely progress through the various stages. The low and stable data reported by some local health officers in their local health jurisdictions, combined with sufficient COVID-19 preparedness, justifies allowance for some variation in the speed with which some local health jurisdictions will be able to move through the phases of Stage 2.

NOW, THEREFORE, I as State Public Health Officer and Director of the California Department of Public Health, order:

1. All local health jurisdictions in the state may begin gradual movement into Stage 2, as set forth in this Order, effective on May 8, 2020; however, a local health jurisdiction may implement or continue more restrictive public health measures if the jurisdiction's Local Health Officer believes conditions in that jurisdiction warrant it.
2. I will progressively designate sectors, businesses, establishments, or activities that may reopen with certain modifications, based on public health and safety needs, and I will add additional sectors, businesses, establishments, or activities at a pace designed to protect public health and safety. Those sectors, businesses, establishments, or activities that are permitted to open will be designated, along with necessary modifications, at <https://covid19.ca.gov/roadmap/>, as I announce them.
3. To the extent that such sectors are re-opened, Californians may leave their homes to work at, patronize, or otherwise engage with those businesses, establishments, or activities and must, when they do so, continue at all times to practice physical distancing, minimize their time outside of the home, and wash their hands frequently. To prevent further spread of COVID-19 to and within other jurisdictions within the State, Californians should not travel significant distances and should stay close to home. My March 19, 2020, Order otherwise remains in full effect.

4. The California Department of Public Health has set forth criteria to help local health officers assess the capacity of their local health jurisdictions to move through Stage 2. Local health jurisdictions that meet the criteria and follow the process set forth <https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/COVID-19-County-Variance-Attestation-Memo.aspx> will be permitted to move through Stage 2 more quickly than the State as a whole and reopen additional low-risk businesses before the rest of the state, if they choose to do so. A list of the sectors, businesses, establishments, or activities, and any necessary modifications, that such a qualifying jurisdiction may choose to reopen will be available at <https://covid19.ca.gov/roadmap-counties/>, and may be expanded if I deem it to be in the interest of public health and safety.

Pursuant to the authority under EO N-60-20, and Health and Safety Code sections 120125, 120140, 131080, 120130(c), 120135, 120145, 120175 and 120150, this Order is to go into effect immediately and shall stay in effect until further notice.

This Order is being issued to protect the public health of Californians as we move as expeditiously to minimize risk to the extent possible throughout the Stages of the Pandemic Resilience Roadmap.



Sonia Y Angell, MD, MPH
State Public Health Officer & Director
California Department of Public Health

EXHIBIT G



ORDER OF THE STATE PUBLIC HEALTH OFFICER
March 19, 2020

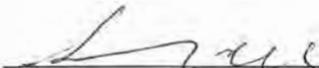
To protect public health, I as State Public Health Officer and Director of the California Department of Public Health order all individuals living in the State of California to stay home or at their place of residence except as needed to maintain continuity of operations of the federal critical infrastructure sectors, as outlined at <https://www.cisa.gov/identifying-critical-infrastructure-during-covid-19>. In addition, and in consultation with the Director of the Governor's Office of Emergency Services, I may designate additional sectors as critical in order to protect the health and well-being of all Californians.

Pursuant to the authority under the Health and Safety Code 120125, 120140, 131080, 120130(c), 120135, 120145, 120175 and 120150, this order is to go into effect immediately and shall stay in effect until further notice.

The federal government has identified 16 critical infrastructure sectors whose assets, systems, and networks, whether physical or virtual, are considered so vital to the United States that their incapacitation or destruction would have a debilitating effect on security, economic security, public health or safety, or any combination thereof. I order that Californians working in these 16 critical infrastructure sectors may continue their work because of the importance of these sectors to Californians' health and well-being.

This Order is being issued to protect the public health of Californians. The California Department of Public Health looks to establish consistency across the state in order to ensure that we mitigate the impact of COVID-19. Our goal is simple, we want to bend the curve, and disrupt the spread of the virus.

The supply chain must continue, and Californians must have access to such necessities as food, prescriptions, and health care. When people need to leave their homes or places of residence, whether to obtain or perform the functions above, or to otherwise facilitate authorized necessary activities, they should at all times practice social distancing.


SONIA Y. ANGELL, MD, MPH

3/19/2020
DATE

EXHIBIT H



SONIA Y. ANGELL, MD, MPH
State Public Health Officer & Director

State of California—Health and Human Services Agency
California Department of Public Health



GAVIN NEWSOM
Governor

**Statewide Public Health Officer Order,
July 13, 2020**

On March 19, 2020, I issued an [order](#) directing all individuals living in the State of California to stay at home except as needed to facilitate authorized, necessary activities or to maintain the continuity of operations of critical infrastructure sectors. I then set out California's path forward from this "Stay-at-Home" Order in California's [Pandemic Resilience Roadmap](#). On May 7th, I [announced](#) that statewide data supported the gradual movement of the entire state into Stage 2 of the Pandemic Resilience Roadmap. On May 8th, the Governor outlined a process where counties that met specific criteria could move more quickly than other parts of the state through Stage 2 of modifying the Stay-at-Home order, including certain businesses deemed higher risk.

The statewide data has since demonstrated a significant increase in the spread of COVID-19, resulting in public health conditions that demand measures responsive to those conditions be put into place with haste. On June 28, 2020, the California Department of Public Health (CDPH) issued [guidance](#) setting forth the need to close bars and similar establishments in counties that – due to concerning levels of disease transmission, hospitalizations, or insufficient testing – had been on the County Monitoring List, which includes counties that show concerning levels of disease transmission, hospitalizations, insufficient testing, or other critical epidemiological markers, for 14 days. On July 1, 2020, CDPH issued [guidance](#) specific to counties on the County Monitoring List for three consecutive days, requiring closure of the indoor operations of various sectors, including restaurants, wineries, and certain entertainment venues, as well as all bars indoor and outdoor. Based on my judgment as the State Public Health Officer, it is now necessary to take these steps statewide, to take additional steps for counties on the County Monitoring List, and to continue to monitor and modify the process of reopening.

The current data reflect that community spread of infection is of increasing concern across the state. On July 1, 2020, there were 19 counties on the County Monitoring List. As of July 13, 2020, there are 32 counties on the list, and additional counties may soon be added as data warrants. In addition to the impact on the general population, community spread increases the likelihood of expanded transmission of COVID-19 in congregate settings such as nursing homes, homeless shelters, jails and prisons. Infection of these vulnerable populations in these settings can be catastrophic. Higher



levels of community spread also increase the likelihood of infection among individuals at high risk of serious outcomes from COVID-19, including the elderly and those with underlying health conditions who might live or otherwise interact with an infected individual.

The Pandemic Resilience Roadmap classifies bars, pubs, breweries, brewpubs, dine-in restaurants, wineries and tasting rooms, family entertainment centers, zoos, museums, and cardrooms as Stage 2 or Stage 3 sectors with high risk of transmission due to a number of features of the businesses and the behaviors that occur within them. Public health studies have shown that the risk of transmission is exacerbated in indoor spaces, particularly when lacking appropriate ventilation. These sectors are settings where groups convene and may mix with others for a prolonged period of time, increasing the risk of escalating the transmission rate of COVID-19. While physical distancing is critical to mitigating exposure, it is more effective at protecting an individual with brief exposures or outdoor exposures. In contrast to indoor spaces, wind and the viral dilution in outdoor spaces can help reduce viral load.

Bars, both indoor and outdoor, have additional risk factors. A bar, foundationally, is a social setting where typically not only small groups convene, but also where groups mix with other groups. Bars also have an added risk imposed by the consumption of alcohol as a primary activity offered in such venues. Alcohol consumption slows brain activity, reduces inhibition, and impairs judgment, factors which contribute to reduced compliance with recommended core personal protective measures, such as the mandatory use of face coverings and maintaining six feet of distance from people in different households, both indoors and outdoors. Louder environments and the cacophony of conversation that are typical in bar settings also require raised voices and greater projection of orally emitted viral droplets.

For counties on the County Monitoring List, the risks and impacts of disease transmission are even greater. The science suggests that for indoor operations the odds of an infected person transmitting the virus are dramatically higher compared to an open-air environment. Thus, for those counties on the list, it is necessary to close indoor operations for additional sectors which promote the closed-space mixing of populations beyond households and/or make adherence to physical distancing with face coverings difficult, including: gyms and fitness centers, places of worship, protests, offices for non-Critical Infrastructure sectors as designated on [covid19.ca.gov](https://www.covid19.ca.gov), personal care services (including nail salons, massage parlors, and tattoo parlors), hair salons and barbershops, and malls.

NOW, THEREFORE, I, as State Public Health Officer and Director of the California Department of Public Health, order all of the following:

Statewide Order Relative to Bars, Pubs, Brewpubs, and Breweries

1. Bars, pubs, brewpubs, and breweries, whether operating indoors or outdoors, shall be closed across the state, unless an exception below applies.
 - a. Bars, pubs, brewpubs, and breweries, may operate outdoors if they are offering sit-down, outdoor, dine-in meals. Alcohol can be sold only in the same transaction as a meal. When operating outdoors, they must follow the [dine-in restaurant guidance](#) and should continue to encourage takeout and delivery service whenever possible.
 - b. Bars, pubs, brewpubs, and breweries that do not provide sit-down meals themselves, but can contract with another vendor to do so, can serve dine-in meals when operating outdoors provided both businesses follow the [dine-in restaurant guidance](#) and alcohol is sold only in the same transaction as a meal.
 - c. Venues that are currently authorized to provide off sale beer, wine, and spirits to be consumed off premises and do not offer sit-down, dine-in meals must follow the [guidance for retail operations](#) and offer curbside sales only.
 - d. Concert, performance, or entertainment venues must remain closed until they are allowed to resume modified or full operation through a specific reopening order or guidance. Establishments that serve full meals must discontinue this type of entertainment until these types of activities are allowed to resume modified or full operation.

2. Indoor operations shall be restricted across the state as specified below:
 - a. Dine-in restaurants must close indoor seating to customers. During this closure all dine-in restaurants may continue to utilize outdoor seating and must comply with the [guidance for outdoor dining](#). Restaurants should continue to encourage takeout and delivery service whenever possible.
 - b. Wineries and tasting rooms must close indoor services to customers. During this closure all wineries and tasting rooms operating outdoors must comply with the [guidance for restaurants, wineries, and bars](#).
 - c. Family entertainment centers and movie theaters must close indoor services and attractions to customers.
 1. Family entertainment centers may continue to provide outdoor services and attractions to customers, and must comply with the guidance for [movie theaters and family entertainment centers](#).

2. Drive-in movie theaters may continue to operate and should follow additional applicable guidance for [drive-in movie theaters](#).
- d. Indoor attractions at zoos and museums must close to visitors.
 1. Zoos and museums may continue to operate outdoor attractions and must follow the [guidance for zoos and museums](#).
- e. Cardrooms must close indoor services to customers and must follow the [guidance for cardrooms](#).

Order for Closure of Additional Indoor Sectors for Counties on Monitoring List

3. Counties that currently appear on CDPH's County Monitoring List and have been on the list for three consecutive days, and counties that subsequently appear for three consecutive days or more while this order remains effective, must close all indoor operations of the following types of businesses/events/activities:

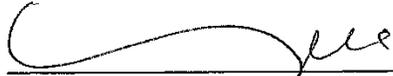
- a. Gyms and Fitness Centers
- b. Places of Worship
- c. Protests
- d. Offices for [Non-Critical Infrastructure Sectors](#)
- e. Personal Care Services (including nail salons, massage parlors, and tattoo parlors)
- f. Hair salons and barbershops
- g. Malls

Terms of Orders

4. This order shall go into effect immediately.
5. These closures shall remain in effect until I determine it is appropriate to modify the order based on public health conditions.
6. Outdoor operations may be conducted under a tent, canopy, or other sun shelter but only as long as no more than one side is closed, allowing sufficient outdoor air movement.
7. I will continue to monitor the epidemiological data and will modify the sectors that may be open both statewide and in counties on the Monitoring List as required by the evolving public health conditions. If I determine that it is appropriate to reopen, close, or modify the operations of any additional sectors, those sectors will be posted at: <https://covid19.ca.gov/roadmap-counties/>.
8. My [guidance](#) mandating the wearing of face coverings and my [guidance](#) prohibiting gatherings continue to apply statewide, except as specifically permitted in other orders or guidance documents. To prevent further spread of COVID-19 to and within other

jurisdictions within the State, Californians should not travel significant distances and should stay close to home.

9. This order is issued pursuant to the authority under EO N-60-20, and Health and Safety Code sections 120125, 120130(c), 120135, 120140, 120145, 120150, 120175, 120195 and 131080.



Sonia Y Angell, MD, MPH
State Public Health Officer & Director
California Department of Public Health

EXHIBIT I

8/5/2020

Guidance of Closure of Sectors in Response to COVID-19



State of California—Health and Human
 Services Agency
**California Department of Public
 Health**



July 13, 2020

AFL 17-__

TO: All Californians

SUBJECT: Guidance on Closure of Sectors in Response to COVID-19

Guidance on Closure of Sectors in Response to COVID-19

July 13, 2020

Summary

COVID-19 transmission rates continue to rise across the state, including increasing numbers of cases in rural counties that had not previously experienced significant infection rates. Despite the closure of certain indoor sectors in counties on the County Monitoring list, those counties continue to demonstrate concerning levels of disease transmission that impact not only the general population but vulnerable populations in the community.

This guidance and the Statewide Public Health Officer Order, dated July 13, 2020:

- Closes, on a statewide basis, indoor operations for certain sectors, and both indoor and outdoor operations for bars and similar establishments, consistent with the June 28 and July 1 restrictions on counties on the County Monitoring List.
- Closes, for counties on the County Monitoring List for three or more consecutive days, indoor operations for additional sectors which promote the mixing of populations beyond households and make adherence to physical distancing with face coverings difficult. Within these sectors, and in the affected counties, those specified businesses that are not able to continue their business through outdoor operations must close that portion of their business effective immediately in order to further mitigate the spread of the virus.

Background

As part of the State's efforts to address COVID-19, the State monitors county specific data to determine whether and how to modify the pace of reopening. Additionally, the State provides technical assistance, support and interventions to counties that have concerning levels of disease transmission, hospitalizations, or insufficient testing. Counties on the County Monitoring List are under active monitoring by the State, and may receive targeted engagement and technical support from CDPH and other agencies and departments including the Business, Consumer Services and Housing Agency, the Department of Industrial Relations and the California Department of Food and Agriculture.

As of July 13, there are 29 counties that have been on the County Monitoring List for three consecutive days:

- Colusa
- Contra Costa
- Fresno
- Glenn
- Imperial
- Kings

8/5/2020

Guidance of Closure of Sectors in Response to COVID-19

- Los Angeles
- Madera
- Marin
- Merced
- Monterey
- Napa
- Orange
- Placer
- Riverside
- Sacramento
- San Benito
- San Bernardino
- San Diego
- San Joaquin
- Santa Barbara
- Solano
- Sonoma
- Stanislaus
- Sutter
- Tulare
- Ventura
- Yolo
- Yuba

Actions Taking Effect Immediately

Given current rates of disease transmission and the increase in hospitalization and ICU utilization, CDPH is:

- Closing, on a statewide basis, consistent with the June 28 and July 1 restrictions on counties on the County Monitoring List, the following sectors:
 - Dine-in Restaurants (indoor)
 - Wineries and Tasting Rooms (indoor)
 - Movie Theater (indoor)
 - Family Entertainment Centers (indoor)
 - Zoos and Museums (indoor)
 - Cardrooms (indoor)
 - Brewpubs, breweries, bars, and pubs (indoor and outdoor), unless an exception below applies:
 1. Bars, pubs, brewpubs, and breweries, may operate outdoors if they are offering sit-down, outdoor, dine-in meals. Alcohol can be sold only in the same transaction as a meal. When operating outdoors, they must follow the dine-in restaurant guidance and should continue to encourage takeout and delivery service whenever possible.
 2. Bars, pubs, brewpubs, and breweries that do not provide sit-down meals themselves, but can contract with another vendor to do so, can serve dine-in meals when operating outdoors provided both businesses follow the dine-in restaurant guidance and alcohol is sold only in the same transaction as a meal.
 3. Venues that are currently authorized to provide off sale beer, wine, and spirits to be consumed off premises and do not offer sit-down, dine-in meals must follow the guidance for retail operations and offer curbside sales only.
 4. Concert, performance, or entertainment venues must remain closed until they are allowed to resume modified or full operation through a specific reopening order or guidance. Establishments that serve full meals must discontinue this type of entertainment until these types of activities are allowed to resume modified or full operation.
- Closing, for counties on the Monitoring List for three or more consecutive days, additional **indoor** operations for certain sectors which promote the mixing of populations beyond households and make adherence to physical distancing with face coverings difficult. Within those sectors, those that are not able to continue their business through outdoor operations must close that portion of their business effective immediately in order to further mitigate the spread of the virus. This applies to the following sectors/events:
 - Gyms and Fitness Centers
 - Places of Worship

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Guidance of Closure of Sectors in Response to COVID-19

- Indoor Protests
- Offices for Non-Critical Infrastructure Sectors
- Personal Care Services (including nail salons, massage parlors, and tattoo parlors)
- Hair Salons and Barbershops
- Malls

These actions remain in effect until further notice.

All industry or sector guidance documents that have been issued to date, including all infectious control measures outlined in those guidance documents, including the use of face coverings, which is mandated statewide apply in outdoor settings, and thus must be adhered to. Outdoor operations may be conducted under a tent, canopy, or other sun shelter, but only as long as no more than one side is closed, allowing sufficient outdoor air movement.

Justification

The data is clear that community spread of infection is of increasing concern across the state, and continues to grow in those counties on the County Monitoring List. The number of hospitalized patients with COVID has increased between 50-100% in all regions in California, with a state average increase of 77% since June 12. In that same time, the number of counties with case rates over 100 per 100,000 residents has gone from 3 counties to 31 counties, confirming state-wide increased transmission of COVID. While these counties are primarily located in the south and central valley, there are now counties on the monitoring list from all regions of California. Beyond the impact on the general population, community spread increases the likelihood of expanded transmission of COVID-19 in congregate settings such as nursing homes, homeless shelters, jails and prisons. Infection of vulnerable populations in these settings can be catastrophic, both in terms of high rates of morbidity and mortality of individual residents, as well as through the high demand such infections would place on the hospital delivery system. We are seeing these increases already in many of the counties. Higher levels of community spread also increase the likelihood of infection among individuals at high risk of serious outcomes from COVID-19, including the elderly and those with underlying health conditions who might live or otherwise interact with an infected individual.

California's Pandemic Resiliency Roadmap for reopening is a risk-based framework that guides state and local governments on a path to re-opening activities and industries under strict workplace modifications. The above outlined sectors operating indoors create an environment that increases levels of community mixing of individuals outside of one's own household, increasing the risk of escalating the R-effective, or effective transmission rate, of COVID-19.

As described in the June 28 guidance and July 1 guidance, the sectors required to modify operations statewide under this guidance are sectors where there is increased risk of transmission due to a number of features of the business and the behaviors that occur within them. Because of noted trends in community spread statewide, well beyond those on the monitoring list, it is necessary to expand changes made to sectors in our order of June 28 and July 1 statewide.

Additionally, given the increased level of community transmission, this guidance requires additional sectors to close indoor operations in counties on the County Monitoring List for three or more consecutive days. Counties continue to be added to the county monitoring list and evidence of community transmission persists in these jurisdictions, requiring enhanced intervention through the additional sectors modifications.

The rationale for moving activities outdoors to reduce risk is anchored in the science of disease transmission and recent studies show that transmission is greater in indoor settings due to the release of infectious particles into the air when someone speaks, coughs, sneezes, or sings, which is exacerbated in indoor spaces particularly when lacking appropriate ventilation.

8/5/2020

Guidance of Closure of Sectors in Response to COVID-19

Physical distancing also protects an individual with brief exposures or outdoor exposures. When distanced, there is not enough time to achieve the infectious viral load when standing six (6) feet apart or where wind and the infinite outdoor space for viral dilution reduces viral load. A study, which still needs to be peer-reviewed, suggests that the odds an infected person transmitting the virus in a closed environment was 18.7 times greater compared to an open-air environment. (1)

In the setting of an increasing body of evidence demonstrating that transmission is decreased when activities are conducted outside, and risk for exposure is increased when mixing beyond those with whom one lives, in an effort to mitigate to potential spread of COVID 19, the state is requiring that additional settings where patrons gather to be served or participate in the businesses' primary activity be moved outdoors.

(1) Nishiura et al. (2020)

Closed environments facilitate secondary transmission of coronavirus disease 2019 (COVID-19)

<https://www.medrxiv.org/content/10.1101/2020.02.28.20029272v2>

California Department of Public Health
PO Box, 997377, MS 0500, Sacramento, CA 95899-7377
Department Website (cdph.ca.gov)



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EXHIBIT J



SONIA Y. ANGELL, MD, MPH
State Public Health Officer & Director

State of California—Health and Human Services Agency
California Department of Public Health



GAVIN NEWSOM
Governor

**COVID-19 and Reopening In-Person Learning
Framework for K-12 Schools in California, 2020-2021 School Year**

July 17, 2020

Overview

California schools have been closed for in-person instruction since mid-March 2020 due to the COVID-19 pandemic. School closures to in-person instruction were part of a broader set of recommendations intended to reduce transmission of SARS-CoV-2, the virus that causes COVID-19. CDPH developed the following framework to support school communities as they decide when and how to implement in-person instruction for the 2020-2021 school year. New evidence and data about COVID-19 transmission, including variations by age, and the effectiveness of disease control and mitigation strategies continues to emerge regularly. Recommendations regarding in-person school reopening and closure should be based on the available evidence as well state and local disease trends.

The CA [School Sector Specific Guidelines](#), and the Centers for Disease Control and Prevention [CDC](#) have published additional guidance on school re-entry.

In-Person Re-Opening Criteria

Schools and school districts may reopen for in-person instruction at any time if they are located in a local health jurisdiction (LHJ) that has not been on the county¹ monitoring list within the prior 14 days.

If the LHJ has been on the monitoring list within the last 14 days, the school must conduct distance learning only, until their LHJ has been off the monitoring list for at least 14 days.²

¹ School districts in LHJs that are cities are considered to be included as part of the county if the county is on the monitoring list.

² A waiver of this criteria may be granted by the local health officer for elementary schools to open for in-person instruction. A waiver may only be granted if one is requested by the superintendent (or equivalent for charter or private schools), in consultation with labor, parent and community organizations. Local health officers must review local community epidemiological data, consider other public health interventions, and consult with CDPH when considering a waiver request.





SONIA Y. ANGELL, MD, MPH
State Public Health Officer & Director

State of California—Health and Human Services Agency
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Governor

Guidance Once Re-Opened to In-Person Instruction

How should schools think about testing?

Once schools are re-opened to at least some in-person instruction, it is recommended that surveillance testing be implemented based on the local disease trends. If epidemiological data indicates concern for increasing community transmission, schools should increase testing of staff to detect potential cases as lab testing capacity allows.

Who should be tested and how often?

School staff are essential workers, and staff includes teachers, para-professionals, cafeteria workers, janitors, bus drivers, or any other school employee that may have contact with students or other staff. School districts and schools shall test staff periodically, as testing capacity permits and as practicable. Examples of recommended frequency include testing all staff over 2 months, where 25% of staff are tested every 2 weeks, or 50% every month to rotate testing of all staff over time.

What if a school or school district reopens to in-person instruction, but the county is later placed on the county monitoring list?

Schools should begin testing staff, or increase frequency of staff testing but are not required to close.





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What measures should be taken when a student, teacher or staff member has symptoms, is a contact of someone infected, or is diagnosed with COVID-19?

	Student or Staff with:	Action	Communication
1.	COVID-19 Symptoms (e.g., fever, cough, loss of taste or smell, difficulty breathing) Symptom Screening: Per CA School Sector Specific Guidelines	<ul style="list-style-type: none"> • Send home • Recommend testing (If positive, see #3, if negative, see #4) • School/classroom remain open 	<ul style="list-style-type: none"> • No Action needed
2.	Close contact (†) with a confirmed COVID-19 case	<ul style="list-style-type: none"> • Send home • Quarantine for 14 days from last exposure • Recommend testing (but will not shorten 14-day quarantine) • School/classroom remain open 	<ul style="list-style-type: none"> • Consider school community notification of a known contact
3.	Confirmed COVID-19 case infection	<ul style="list-style-type: none"> • Notify the local public health department • Isolate case and exclude from school for 10 days from symptom onset or test date • Identify contacts (†), quarantine & exclude exposed contacts (likely entire cohort (††)) for 14 days after the last date the case was present at school while infectious • Recommend testing of contacts, prioritize symptomatic contacts (but will not shorten 14-day quarantine) • Disinfection and cleaning of classroom and primary spaces where case spent significant time • School remains open 	<ul style="list-style-type: none"> • School community notification of a known case
4.	Tests negative after symptoms	<ul style="list-style-type: none"> • May return to school 3 days after symptoms resolve • School/classroom remain open 	<ul style="list-style-type: none"> • Consider school community notification if prior awareness of testing





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State Public Health Officer & Director

State of California—Health and Human Services Agency
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(†) A contact is defined as a person who is <6 feet from a case for >15 minutes. In some school situations, it may be difficult to determine whether individuals have met this criterion and an entire cohort, classroom, or other group may need to be considered exposed, particularly if people have spent time together indoors.

(††) A cohort is a stable group with fixed membership that stays together for all courses and activities (e.g., lunch, recess, etc.) and avoids contact with other persons or cohorts.

Guidance on School Closure

What are the criteria for closing a school?

Individual school closure is recommended based on the number of cases, the percentage of the teacher/students/staff that are positive for COVID-19, and following consultation with the Local Health Officer. Individual school closure may be appropriate when there are multiple cases in multiple cohorts at a school or when at least 5 percent of the total number of teachers/student/staff are cases within a 14-day period, depending on the size and physical layout of the school.

The Local Health Officer may also determine school closure is warranted for other reasons, including results from public health investigation or other local epidemiological data.

If a school is closed for in-person learning, when may it reopen?

Schools may typically reopen after 14 days and the following have occurred:

- Cleaning and disinfection
- Public health investigation
- Consultation with the local public health department

What are the criteria for closing a school district?





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A superintendent should close a school district if 25% or more of schools in a district have closed due to COVID-19 within 14 days, and in consultation with the local public health department.

If a school district is closed, when may it reopen?

Districts may typically reopen after 14 days, in consultation with the local public health department.

State Resources for Case, Contact & Outbreak Investigations

California is committed to supporting local health departments with resources and other technical assistance regarding school case, contact, and outbreak investigations.



EXHIBIT K



COVID-19 INDUSTRY GUIDANCE: Schools and School- Based Programs

Updated: **August 3, 2020**

All guidance should be implemented only with local health officer approval following their review of local epidemiological data including cases per 100,000 population, rate of test positivity, and local preparedness to support a health care surge, vulnerable populations, contact tracing, and testing.



OVERVIEW

Communities across the state are preparing for the forthcoming school year. To assist with that planning process, the following guidelines and considerations are intended to help school and community leaders plan and prepare to resume in-person instruction.

This guidance is interim and subject to updates. These guidelines and considerations are based on the best available public health data at this time, international best practices currently employed, and the practical realities of managing school operations; as new data and practices emerge. Additionally, the guidelines and considerations do not reflect the full scope of issues that school communities will need to address, which range from day-to-day site-based logistics to the social and emotional well-being of students and staff.

California public schools (traditional and charter), private schools (including nonpublic nonsectarian schools), school districts, and county offices of education, herein referred to as schools, will determine the most appropriate instructional model, taking into account the needs of their students and staff, and their available infrastructure. This guidance is not intended to prevent a school from adopting a distance learning, hybrid, or mixed-delivery instructional model to ensure safety. Schools are not required to seek out or receive approval from a state or local public health officer prior to adopting a distance-learning model.

Implementation of this guidance will depend on local public health conditions, including those listed [here](#). Communities meeting those criteria, such as lower incidence of COVID-19 and adequate preparedness, may implement the guidance described below as part of a phased reopening. All decisions about following this guidance should be made in collaboration with local health officials and other authorities.

Implementation of this guidance should be tailored for each setting, including adequate consideration of instructional programs operating at each school site and the needs of students and families. School leaders should engage relevant stakeholders—including families, staff and labor partners in the school community—to formulate and implement plans that consider the following:

- **Student, Family and Staff Population:** Who are the student, family and staff populations who will be impacted by or can serve as partners in implementing any of the following measures?
- **Ability to Implement or Adhere to Measures:** Do staff, students and families have the tools, information, resources and ability to successfully adhere to or implement the new measures?
- **Negative or Unintended Consequences:** Are there any negative or unintended consequences to staff, students or families of implementing the measures and how can those consequences be mitigated?

This guidance is not intended to revoke or repeal any worker rights, either statutory, regulatory or collectively bargained, and is not exhaustive, as it does not include county health orders, nor is it a substitute for any existing safety and health-related regulatory requirements such as those of Cal/OSHA. Stay current on changes to public health guidance and state/local orders, as the COVID-19 situation continues.



1. General Measures

- Establish and continue communication with local and State authorities to determine current disease levels and control measures in your community. For example:
 - Review and refer to, if applicable, the relevant county variance documentation. Documentation can be found [here](#).
 - Consult with your county health officer, or designated staff, who are best positioned to monitor and provide advice on local conditions. A directory can be found [here](#).
 - Collaborate with other schools and school partners in your region, including the county office of education.
 - Regularly review updated guidance from state agencies, including the [California Department of Public Health](#) and [California Department of Education](#).
- Establish a written, worksite-specific COVID-19 prevention plan at every facility, perform a comprehensive risk assessment of all work areas and work tasks, and designate a person at each school to implement the plan.
 - Identify contact information for the local health department where the school is located for communicating information about COVID-19 outbreaks among students or staff.
 - Incorporate the [CDPH Guidance](#) for the Use of Face Coverings, into the School Site Specific Plan that includes a policy for handling exemptions.
 - Train and communicate with workers and worker representatives on the plan. Make the written plan available and accessible to workers and worker representatives.
 - Regularly evaluate the workplace for compliance with the plan and document and correct deficiencies identified.
 - Investigate any COVID-19 illness and determine if any work-related factors could have contributed to risk of infection. Update the plan as needed to prevent further cases.
 - Implement the necessary processes and protocols when a workplace has an outbreak, in accordance with [CDPH guidelines](#).
 - Identify individuals who have been in close contact (within six feet for 15 minutes or more) of an infected person and take steps to isolate

COVID-19 positive person(s) and close contacts. See Section 10 for more detail.

- Adhere to these guidelines. Failure to do so could result in workplace illnesses that may cause classrooms or the entire school to be temporarily closed or limited.
- Evaluate whether and to what extent external community organizations can safely utilize the site and campus resources. Ensure external community organizations that use the facilities also follow this guidance.
- Develop a plan for the possibility of repeated closures of classes, groups or entire facilities when persons associated with the facility or in the community become ill with COVID-19. See Section 10 below.
- Develop a plan to further support students with access and functional needs who may be at increased risk of becoming infected or having unrecognized illness due to COVID-19. For example, review existing student health plans to identify students who may need additional accommodations, develop a process for engaging families for potentially unknown concerns that may need to be accommodated or identify additional preparations for classroom and non-classroom environments as needed. Groups who might be at increased risk of becoming infected or having unrecognized illness include the following:
 - Individuals who have limited mobility or require prolonged and close contact with others, such as direct support providers and family members;
 - Individuals who have trouble understanding information or practicing preventive measures, such as hand washing and physical distancing; and
 - Individuals who may not be able to communicate symptoms of illness.
- Schools should review the [CDPH Guidance for the Use of Face Coverings](#) and any applicable local health department guidance and incorporate face-covering use for students and workers into their COVID-19 prevention plan. Some flexibility may be needed for younger children consistent with child development recommendations. See Section 3 for more information.



2. Promote Healthy Hygiene Practices

- Teach and reinforce [washing hands](#), avoiding [contact with one's eyes, nose, and mouth](#), and [covering coughs and sneezes](#) among students and staff.
 - Teach students and remind staff to use tissue to wipe their nose and to cough/sneeze inside a tissue or their elbow.
 - Students and staff should wash their hands frequently throughout the day, including before and after eating; after coughing or sneezing; after classes where they handle shared items, such as outside recreation, art, or shop; and before and after using the restroom.
 - Students and staff should wash their hands for 20 seconds with soap, rubbing thoroughly after application. Soap products marketed as “antimicrobial” are not necessary or recommended.
 - Staff should model and practice handwashing. For example, for lower grade levels, use bathroom time as an opportunity to reinforce healthy habits and monitor proper handwashing.
 - Students and staff should use fragrance-free hand sanitizer when handwashing is not practicable. Sanitizer must be rubbed into hands until completely dry. Note: frequent handwashing is more effective than the use of hand sanitizers.
 - Ethyl alcohol-based hand sanitizers are preferred and should be used when there is the potential of unsupervised use by children.
 - Isopropyl hand sanitizers are more toxic when ingested or absorbed in skin.
 - Do not use hand sanitizers that may [contain methanol](#) which can be hazardous when ingested or absorbed.
 - Children under age 9 should only use hand sanitizer under adult supervision. Call Poison Control if consumed: 1-800-222-1222.
- Consider portable handwashing stations throughout a site and near classrooms to minimize movement and congregations in bathrooms to the extent practicable.
- Develop routines enabling students and staff to regularly wash their hands at staggered intervals.
- Ensure adequate supplies to support healthy hygiene behaviors, including soap, tissues, no-touch trashcans, face coverings, and hand sanitizers with at least 60 percent ethyl alcohol for staff and children who can safely use hand sanitizer.

- Information contained in the [CDPH Guidance](#) for the Use of Face Coverings should be provided to staff and families, which discusses the circumstances in which face coverings must be worn and the exemptions, as well as any policies, work rules, and practices the employer has adopted to ensure the use of face coverings.
- Employers must provide and ensure staff use face coverings in accordance with CDPH guidelines and all required protective equipment.
- The California Governor's Office of Emergency Services (CalOES) and the Department of Public Health (CDPH) are and will be working to support procurement and distribution of face coverings and personal protective equipment. Additional information can be found [here](#).
- Strongly recommend that all students and staff be immunized each autumn against influenza unless contraindicated by personal medical conditions, to help:
 - Protect the school community
 - Reduce demands on health care facilities
 - Decrease illnesses that cannot be readily distinguished from COVID-19 and would therefore trigger extensive measures from the school and public health authorities.
- Nothing in this guidance should be interpreted as restricting access to appropriate educational services.



3. Face Coverings

Face coverings must be used in accordance with [CDPH guidelines](#) unless a person is exempt as explained in the guidelines, particularly in indoor environments, on school buses, and areas where physical distancing alone is not sufficient to prevent disease transmission.

- Teach and reinforce use of [face coverings](#), or in limited instances, face shields.
- Students and staff should be frequently reminded not to touch the face covering and to [wash their hands](#) frequently.
- Information should be provided to all staff and families in the school community on [proper use, removal, and washing of cloth face coverings](#).
- Training should also include policies on how people who are exempted from wearing a face covering will be addressed.

STUDENTS

Age	Face Covering Requirement
Under 2 years old	No
2 years old – 2 nd grade	Strongly encouraged**
3 rd grade – High School	Yes, unless exempt

**Face coverings are strongly encouraged for young children between two years old and second grade, if they can be worn properly. A face shield is an acceptable alternative for children in this cohort who cannot wear them properly.

- Persons younger than two years old, anyone who has trouble breathing, anyone who is unconscious or incapacitated, and anyone who is otherwise unable to remove the face covering without assistance are exempt from wearing a face covering.
- A cloth face covering or face shield should be removed for meals, snacks, naptime, or outdoor recreation, or when it needs to be replaced. When a cloth face covering is temporarily removed, it should be placed in a clean paper bag (marked with the student's name and date) until it needs to be put on again.
- In order to comply with this guidance, schools must exclude students from campus if they are not exempt from wearing a face covering under CDPH guidelines and refuse to wear one provided by the school. Schools should develop protocols to provide a face covering to students who inadvertently fail to bring a face covering to school to prevent unnecessary exclusions. Schools should offer alternative educational opportunities for students who are excluded from campus.

STAFF

- All staff must use face coverings in accordance with [CDPH guidelines](#) unless Cal/OSHA standards require respiratory protection.
- In limited situations where a face coverings cannot be used for pedagogical or developmental reasons, (i.e. communicating or assisting young children or those with special needs) a face shield can be used instead of a cloth face covering while in the classroom as long as the wearer maintains physical distance from others, to the extent practicable. Staff must return to wearing a face covering outside of the classroom.

- Workers or other persons handling or serving food must use gloves in addition to face coverings. Employers should consider where disposable glove use may be helpful to supplement frequent handwashing or use of hand sanitizer; examples are for workers who are screening others for symptoms or handling commonly touched items.



4. Ensure Teacher and Staff Safety

- Ensuring staff maintain physical distancing from each other is critical to reducing transmission between adults.
- Ensure that all staff use face coverings in accordance with CDPH guidelines and Cal/OSHA standards.
- Support staff who are at higher risk for severe illness or who cannot safely distance from household contacts at higher risk, by providing options such as telework, where appropriate, or teaching in a virtual learning or independent study context.
- Conduct all staff meetings, professional development training and education, and other activities involving staff with physical distancing measures in place, or virtually, where physical distancing is a challenge.
- Minimize the use of and congregation of adults in staff rooms, break rooms, and other settings.
- Implement procedures for daily symptom monitoring for staff.



5. Intensify Cleaning, Disinfection, and Ventilation

- Consider suspending or modifying use of site resources that necessitate sharing or touching items. For example, consider suspending use of drinking fountains and instead encourage the use of reusable water bottles.
- Staff should [clean and disinfect](#) frequently-touched surfaces at school and on school buses at least daily and, as practicable, these surfaces should be cleaned and disinfected frequently throughout the day by trained custodial staff.
- Buses should be thoroughly cleaned and disinfected daily and after transporting any individual who is exhibiting symptoms of COVID-19. Drivers should be provided disinfectant wipes and disposable gloves to support disinfection of frequently touched surfaces during the day.

- Frequently touched surfaces in the school include, but are not limited to:
 - Door handles
 - Light switches
 - Sink handles
 - Bathroom surfaces
 - Tables
 - Student Desks
 - Chairs
- Limit use and sharing of objects and equipment, such as toys, games, art supplies and playground equipment to the extent practicable. When shared use is allowed, clean and disinfect between uses.
- When choosing disinfecting products, use those approved for use against COVID-19 on the [Environmental Protection Agency \(EPA\)-approved list "N"](#) and follow product instructions.
 - To [reduce the risk of asthma](#) and other health effects related to disinfecting, programs should select disinfectant products on list N with asthma-safer ingredients (hydrogen peroxide, citric acid or lactic acid) as recommended by the US EPA Design for Environment program.
 - Avoid products that contain peroxyacetic (peracetic) acid, sodium hypochlorite (bleach) or quaternary ammonium compounds, which can cause asthma.
 - Follow label directions for appropriate dilution rates and contact times. Provide workers training on the chemical hazards, manufacturer's directions, Cal/OSHA requirements for safe use, and as applicable and as required by the Healthy Schools Act.
 - Custodial staff and any other workers who clean and disinfect the school site must be equipped with proper protective equipment, including gloves, eye protection, respiratory protection, and other appropriate protective equipment as required by the product instructions. All products must be kept out of children's reach and stored in a space with restricted access.
 - Establish a cleaning and disinfecting schedule in order to avoid both under- and over-use of cleaning products.
- Ensure safe and correct application of disinfectant and keep products away from students.

- Ensure proper ventilation during cleaning and disinfecting. Introduce fresh outdoor air as much as possible, for example, by opening windows where practicable. When cleaning, air out the space before children arrive; plan to do thorough cleaning when children are not present. If using air conditioning, use the setting that brings in outside air. Replace and check air filters and filtration systems to ensure optimal air quality.
 - If opening windows poses a safety or health risk (e.g., by allowing pollen in or exacerbating asthma symptoms) to persons using the facility, consider alternatives. For example, maximize central air filtration for HVAC systems (targeted filter rating of at least MERV 13).
- Consider installing portable high-efficiency air cleaners, upgrading the building's air filters to the highest efficiency possible, and making other modifications to increase the quantity of outside air and ventilation in classrooms, offices and other spaces.
- [Take steps](#) to ensure that all water systems and features (for example, drinking fountains and decorative fountains) are safe to use after a prolonged facility shutdown to minimize the risk of [Legionnaires' disease](#) and other diseases associated with water.



6. Implementing Distancing Inside and Outside the Classroom

Arrival and Departure

- Maximize space between students and between students and the driver on school buses and open windows to the greatest extent practicable.
- Minimize contact at school between students, staff, families and the community at the beginning and end of the school day. Prioritize minimizing contact between adults at all times.
- Stagger arrival and drop off-times and locations as consistently as practicable as to minimize scheduling challenges for families.
- Designate routes for entry and exit, using as many entrances as feasible. Put in place other protocols to limit direct contact with others as much as practicable.
- Implement health screenings of students and staff upon arrival at school (see Section 9).
- Ensure each bus is equipped with extra unused face coverings on school buses for students who may have inadvertently failed to bring one.

Classroom Space

- To reduce possibilities for infection, students must remain in the same space and in cohorts as small and consistent as practicable, including for recess and lunch. Keep the same students and teacher or staff with each group, to the greatest extent practicable.
- Prioritize the use and maximization of outdoor space for activities where practicable.
- Minimize movement of students and teachers or staff as much as practicable. For example, consider ways to keep teachers with one group of students for the whole day. In secondary schools or in situations where students have individualized schedules, plan for ways to reduce mixing among cohorts and to minimize contact.
- Maximize space between seating and desks. Distance teacher and other staff desks at least six feet away from student desks. Consider ways to establish separation of students through other means if practicable, such as, six feet between desks, where practicable, partitions between desks, markings on classroom floors to promote distancing or arranging desks in a way that minimizes face-to-face contact.
- Consider redesigning activities for smaller groups and rearranging furniture and play spaces to maintain separation.
- Staff should develop instructions for maximizing spacing and ways to minimize movement in both indoor and outdoor spaces that are easy for students to understand and are developmentally appropriate.
- Activities where there is increased likelihood for transmission from contaminated exhaled droplets such as band and choir practice and performances are not permitted.
- Activities that involve singing must only take place outdoors.
- Implement procedures for turning in assignments to minimize contact.
- Consider using privacy boards or clear screens to increase and enforce separation between staff and students.

Non-Classroom Spaces

- Limit nonessential visitors, volunteers and activities involving other groups at the same time.
- Limit communal activities where practicable. Alternatively, stagger use, properly space occupants and disinfect in between uses.
- Consider use of non-classroom space for instruction, including regular use of outdoor space, weather permitting. For example, consider part-day instruction outside.
- Minimize congregate movement through hallways as much as practicable. For example, establish more ways to enter and exit a campus, create staggered passing times when necessary or when students cannot stay in one room and create guidelines on the floor that students can follow to enable physical distancing while passing. In addition, schools can consider eliminating the use of lockers and moving to block scheduling, which supports the creation of cohort groups and reduces changes of classrooms.
- Serve meals outdoors or in classrooms instead of cafeterias or group dining rooms where practicable. Where cafeterias or group dining rooms must be used, keep students together in their cohort groups, ensure physical distancing, and consider assigned seating. Serve individually plated or bagged meals. Avoid sharing of foods and utensils and buffet or family-style meals.
- Consider holding recess activities in separated areas designated by class.

Sports and Extra Curricular Activities (Updated August 3, 2020)

- Outdoor and indoor sporting events, assemblies, dances, rallies, field trips, and other activities that require close contact or that would promote congregating are not permitted at this time. For example, tournaments, events, or competitions, regardless of whether teams are from the same school or from different schools, counties, or states are not permitted at this time.
- Youth sports and physical education are permitted only when the following can be maintained: (1) physical distancing of at least six feet; and (2) a stable cohort, such as a class, that limits the risks of transmission (see [CDC Guidance on Schools and Cohorting](#)). Activities should take place outside to the maximum extent practicable.

- For sports that cannot be conducted with sufficient distancing or cohorting, only physical conditioning and training is permitted and ONLY where physical distancing can be maintained. Conditioning and training should focus on individual skill building (e.g., running drills and body weight resistance training) and should take place outside, where practicable. Indoor physical conditioning and training is allowed only in counties where gyms and fitness centers are allowed to operate indoors.
- Avoid equipment sharing, and if unavoidable, clean and disinfect shared equipment between use by different people to reduce the risk of COVID-19 spread.
- Consistent with guidance for gyms and fitness facilities, cloth face coverings must be worn during indoor physical conditioning and training or physical education classes (except when showering). Activities that require heavy exertion should be conducted outside in a physically distanced manner without face coverings. Activities conducted inside should be those that do not require heavy exertion and can be done with a face covering. Players should take a break from exercise if any difficulty in breathing is noted and should change their mask or face covering if it becomes wet and sticks to the player's face and obstructs breathing. Masks that restrict airflow under heavy exertion (such as N-95 masks) are not advised for exercise.
- Youth sports programs and schools should provide information to parents or guardians regarding this and related guidance, along with the safety measures that will be in place in these settings with which parents or guardians must comply.
- Activities where there is increased likelihood for transmission from contaminated exhaled droplets such as band and choir practice and performances are not permitted.



7. Limit Sharing

- Keep each child's belongings separated and in individually labeled storage containers, cubbies or areas. Ensure belongings are taken home each day to be cleaned.
- Ensure adequate supplies to minimize sharing of high-touch materials (art supplies, equipment, etc.) to the extent practicable or limit use of supplies and equipment to one group of children at a time and clean and disinfect between uses.
- Avoid sharing electronic devices, clothing, toys, books and other games or learning aids as much as practicable. Where sharing occurs, clean and disinfect between uses.



8. Train All Staff and Educate Families

- Train all staff and provide educational materials to families in the following safety actions:
 - Enhanced sanitation practices
 - Physical distancing guidelines and their importance
 - [Proper use, removal, and washing of face coverings](#)
 - Screening practices
 - How COVID-19 is spread
 - COVID-19 specific [symptom](#) identification
 - Preventing the spread of COVID-19 if you are sick, including the importance of not coming to work if staff members have symptoms, or if they or someone they live with has been diagnosed with COVID-19.
 - For workers, COVID-19 specific [symptom](#) identification and when to seek medical attention
 - The employer's plan and procedures to follow when children or adults become sick at school.
 - The employer's plan and procedures to protect workers from COVID-19 illness.
- Consider conducting the training and education virtually, or, if in-person, ensure a minimum of six-foot distancing is maintained.



9. Check for Signs and Symptoms

- Prevent discrimination against students who (or whose families) were or are diagnosed with COVID-19 or who are perceived to be a COVID-19 risk.
- Actively encourage staff and students who are sick or who have recently had [close contact](#) with a person with COVID-19 to stay home. Develop policies that encourage sick staff and students to stay at home without fear of reprisal, and ensure staff, students and students' families are aware of these policies.
- Implement screening and other procedures for all staff and students entering the facility.

- Conduct visual wellness checks of all students or establish procedures for parents to monitor at home. If checking temperatures, use a no-touch thermometer.
- Ask all individuals if they or anyone in their home is exhibiting [COVID-19 symptoms](#).
- Make available and encourage use of hand-washing stations or hand sanitizer.
- Document/track incidents of possible exposure and notify local health officials, staff and families immediately of any exposure to a positive case of COVID-19 at school while maintaining confidentiality, as required under FERPA and state law related to privacy of educational records. Additional guidance can be found [here](#). As noted in Section 11 below, the staff liaison can serve a coordinating role to ensure prompt and responsible notification.
- If a student is exhibiting symptoms of COVID-19, staff should communicate with the parent/caregiver and refer to the student's health history form and/or emergency card.
- Monitor staff and students throughout the day for signs of illness; send home students and staff with a fever of 100.4 degrees or higher, cough or other [COVID-19 symptoms](#).
- Policies should not penalize students and families for missing class.



10. Plan for When a Staff Member, Child or Visitor Becomes Sick

- Work with school administrators, nurses and other healthcare providers to identify an isolation room or area to separate anyone who exhibits symptoms of COVID-19.
- Any students or staff exhibiting symptoms should immediately be required to wear a face covering and be required to wait in an isolation area until they can be transported home or to a healthcare facility, as soon as practicable.
- Establish procedures to arrange for safe transport home or to a healthcare facility, as appropriate, when an individual is exhibiting COVID-19 symptoms:
 - Fever
 - Cough
 - Shortness of breath or difficulty breathing

- Chills
 - Repeated shaking with chills
 - Fatigue
 - Muscle pain
 - Headache
 - Sore throat
 - Congestion or runny nose
 - Nausea or vomiting
 - Diarrhea
 - New loss of taste or smell
- For serious injury or illness, call 9-1-1 without delay. Seek medical attention if COVID-19 symptoms become severe, including persistent pain or pressure in the chest, confusion, or bluish lips or face. Updates and further details are available on [CDC's webpage](#).
 - Notify local health officials immediately of any positive case of COVID-19, and exposed staff and families as relevant while maintaining confidentiality as required by state and federal laws. Additional guidance can be found [here](#).
 - Close off areas used by any individual suspected of being infected with the virus that causes COVID-19 and do not use before cleaning and disinfection. To reduce risk of exposure, wait 24 hours before you [clean and disinfect](#). If it is not possible to wait 24 hours, wait as long as practicable. Ensure a [safe and correct application](#) of disinfectants using personal protective equipment and ventilation recommended for cleaning. Keep disinfectant products away from students.
 - Advise sick staff members and students not to return until they have met CDC criteria to discontinue [home isolation](#), including at least 3 days with no fever, symptoms have improved and at least 10 days since symptoms first appeared.
 - Ensure that students, including students with disabilities, have access to instruction when out of class, as required by federal and state law.
 - Schools should offer distance learning based on the unique circumstances of each student who would be put at-risk by an in-person instructional model. For example, students with a health condition, students with family members with a health condition, students who cohabitate or regularly interact with high-risk individuals, or are otherwise identified as "at-risk" by the parents or guardian, are students whose circumstances merit offering distance learning.

- Implement the necessary processes and protocols when a school has an outbreak, in accordance with [CDPH guidelines](#).
- Investigate the COVID-19 illness and exposures and determine if any work-related factors could have contributed to risk of infection. Update protocols as needed to prevent further cases.
- Update protocols as needed to prevent further cases. See the CDPH guidelines, [Responding to COVID-19 in the Workplace](#), which are incorporated into this guidance and contain detailed recommendations for establishing a plan to identify cases, communicating with workers and other exposed persons, and conducting and assisting with contact tracing.



11. Maintain Healthy Operations

- Monitor staff absenteeism and have a roster of trained back-up staff where available.
- Monitor the types of illnesses and symptoms among your students and staff to help isolate them promptly as needed.
- Designate a staff liaison or liaisons to be responsible for responding to COVID-19 concerns. Workers should know who they are and how to contact them. The liaison should be trained to coordinate the documentation and tracking of possible exposure, in order to notify local health officials, staff and families in a prompt and responsible manner.
- Maintain communication systems that allow staff and families to self-report symptoms and receive prompt notifications of exposures and closures, while maintaining confidentiality, as required by FERPA and state law related to privacy of educational records. Additional guidance can be found [here](#).
- Consult with local health departments if routine testing is being considered by a local educational agency. The role of providing routine systematic testing of staff or students for COVID-19 (e.g., PCR swab testing for acute infection, or presence of antibodies in serum after infection) is currently unclear.
- Support students who are at higher risk for severe illness or who cannot safely distance from household contacts at higher risk, by providing options such as virtual learning or independent study.



12. Considerations for Reopening and Partial or Total Closures

California schools have been closed for in-person instruction since mid-March 2020 due to the COVID-19 pandemic. School closures to in-person instruction were part of a broader set of recommendations intended to reduce transmission of SARS-CoV-2, the virus that causes COVID-19. For more detailed direction on measures to be taken when a student, teacher, or staff member has symptoms or is diagnosed with COVID-19, please see the [COVID-19 and Reopening Framework for K-12 Schools in California](#).

- Check State and local orders and health department notices daily about transmission in the area or closures and adjust operations accordingly.
- When a student, teacher or staff member tests positive for COVID-19 and had exposed others at the school, refer to the [CDPH Framework for K-12 Schools](#), and implement the following steps:
 - In consultation with the local public health department, the appropriate school official should ensure cleaning and quarantine of exposed persons and whether any additional intervention is warranted, including the length of time necessary, based on the risk level within the specific community as determined by the local public health officer.
 - Close off the classroom or office where the patient was based and do not use these areas until after cleaning and disinfection. Wait at least 24 hours before cleaning and disinfecting. If 24 hours is not feasible, wait for at least two hours and as long as possible.
 - Additional areas of the school visited by the COVID-19 positive individual may also need to be cleaned and disinfected.
 - Implement communication plans for exposure at school and potential school closures to include outreach to students, parents, teachers, staff and the community.
 - Include information for staff regarding labor laws, information regarding Disability Insurance, Paid Family Leave and Unemployment Insurance, as applicable to schools. See additional [information on government programs supporting sick leave and worker's compensation for COVID-19](#), including worker's sick leave rights under [the Families First Coronavirus Response Act](#) and employee's rights to workers' compensation benefits and presumption of the work-relatedness of COVID-19 pursuant to the [Governor's Executive Order N-62-20](#), while that Order is in effect.
 - Provide guidance to parents, teachers and staff reminding them of

the importance of community physical distancing measures while a school is closed, including discouraging students or staff from gathering elsewhere.

- o Develop a plan for continuity of education. Consider in that plan how to also continue nutrition and other services provided in the regular school setting to establish alternate mechanisms for these services to continue.
- o Maintain regular communications with the local public health department.



EXHIBIT L

8/4/2020

Schools-FAQ



State of California—Health and Human
Services Agency
**California Department of Public
Health**



August 3, 2020

TO: All Californians

SUBJECT: California Department of Public Health Schools Guidance FAQs

General

What schools guidance has CDPH issued?

All CDPH and Cal/OSHA guidance can be found on the [covid19.ca.gov Industry Guidance to Reduce Risk](https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Schools-FAQ.aspx) webpage. These include:

- [Guidance on Schools and School-Based Programs \(PDF\)](#)
- [COVID-19 and Reopening In-Person Learning: Framework for K-12 Schools in California \(PDF\)](#)

What is the legal authority for enforcing the CDPH schools guidance?

The Governor has ordered, in multiple executive orders (PDF), that all California residents heed the guidance and directives of the state public health officer. Government Code section 8665 provides that any person who violates or who refuses or willfully neglects to obey an Executive Order shall be guilty of a misdemeanor and on conviction shall be punishable by a fine.

Which schools are subject to CDPH's guidance?

The guidance applies to all public and private schools operating in California. This is a public health directive and the Governor has ordered, in multiple executive orders (PDF), that all California residents heed the guidance and directives of the state public health officer.

Is there a statewide standard on whether or not to open or close schools for in-person instruction?

Education Code section 43504, enacted as part of the 2020-21 Budget, specifies that schools should "offer in-person instruction to the greatest extent possible."

The Framework for K-12 Schools in California (PDF) outlines standards for when schools should open and close for in-person instruction. Within those standards, local public health and school officials should collaborate to make decisions tailored to the circumstances and needs of the community.

If the local health jurisdiction has been on the county monitoring list within the prior 14 days, the school must conduct distance learning only, until their local health jurisdiction has been off the monitoring list for at least 14 days. The framework authorized local health officers to grant a waiver of this criteria, in order for elementary schools to open for in-person instruction under specified conditions. Further details about the waiver process are available in the *COVID-19 and Reopening In-Person Learning Elementary Education Waiver Process* document.

What if the school is in a local health jurisdiction that is not the county?

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School districts in local health jurisdictions that are cities are considered to be included as part of the county if the county is on the monitoring list.

Will teachers, support staff, and administrators be able to return to work physically without students on site while counties are on the monitoring list?

Yes, provided that adults on site engage in physical distancing and wear face coverings. School administrators should also consider precautions outlined in the guidance on office workspaces (PDF).

Do local health officers have to approve modes of instructional learning employed by schools or school districts?

No. Schools are not required to seek or receive approval from a state or local public health officer prior to adopting particular instructional models. However, schools and school districts should work closely with local public health officers to ensure that in-person instruction is conducted in a safe manner consistent with state and local public health guidance.

How should conflicting or inconsistent guidance between federal, state, and local authorities be addressed?

Governmental and non-governmental entities at all levels have issued guidance relating to the safe reopening of schools for in-person instruction. Under the operative executive orders (PDF) and 2020-21 Budget Act, schools must comply with orders and guidance issued by the California Department of Public Health and relevant local public health departments. Schools may comply with guidance from other federal, state, local, and non-governmental sources, to the extent those guidelines are consistent with state and local public health directives.

Testing and Screening

Who should be tested and how often?

As explained in the Framework for K-12 Schools in California, school staff should be tested, including teachers, paraprofessionals, cafeteria workers, janitors, bus drivers, or any other school employee that may have contact with students or other staff. School districts and schools should ensure that staff are tested periodically by their primary care provider or by referring teachers to a community testing site, as testing capacity permits and as practicable. Examples of recommended frequency include all staff being tested over 2 months, where 25% of staff are tested every 2 weeks, or 50% every month to rotate which staff members are tested over time.

Who will pay for the testing of school employees and students?

School employees and students who need testing would either go to their health care provider or a state-operated or other community testing site. The Department of Managed Health Care has filed an emergency regulation to require health plans to pay for COVID-19 testing for all essential workers, including school staff. In addition, tests are available at community testing sites throughout the state.

Does the CDPH guidance encourage an active screening of students, staff, and other individuals entering campus?

Since the original June 5th guidance, CDPH has recommended daily visual wellness and symptoms checks prior to individuals entering campus. In order to facilitate those checks, the California Office of Emergency Services has distributed multiple no-touch thermometers for each school throughout the state to local county offices of education. These checks can happen in a

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variety of ways, including: As the individual enters the building or during morning homeroom. Students can be asked about their symptoms or can complete a short checklist of symptoms and hand it in. Follow-up to those checklists should occur whenever symptoms of COVID-19 are identified.

Positivity, Notification of Positive Cases, and Quarantine

Who will be notified when a person at the school site tests positive or initiates self-quarantine due to confirmed or suspected exposure?

Schools should maintain communication systems that allow staff and families to self-report symptoms and receive prompt notifications of exposures and closures, while maintaining confidentiality, as required by FERPA and state law related to privacy of educational records and other privacy laws. Additional guidance can be found in the March 2020 Student Privacy Policy FERPA & Coronavirus Disease 2019 (COVID-19) FAQs (PDF) from the U.S. Department of Education. In addition, local public health departments will notify the school administration if a case and contact investigation reveals exposure at the school site.

What is the definition of "close contact"? Is there a consistent statewide definition?

Close contact is defined as contact within 6 feet for greater than 15 minutes without a face covering. The CDPH is following the Centers for Disease Control guidance on close contact.

Masks, Face Coverings and Face Shields

The American Academy of Pediatrics does not recommend masks or face coverings for students under middle school age. Why does CDPH have a different recommendation?

CDPH recommends face masks (or face shields for very young children) at age 2 or older, so that those who cannot manage masks can nonetheless be protected. CDPH guidance requires all children in 3rd grade or later to wear masks. Increasing evidence suggests wearing masks or face coverings can significantly decrease COVID-19 disease transmission. Other countries' experiences (e.g., China, Singapore) suggests that virtually all students can be taught to handle face coverings at that age.

Schools should review the CDPH Guidance for the Use of Face Coverings (PDF) and any applicable local health department guidance and incorporate face covering use for students and workers into their COVID-19 prevention plan.

What if an individual cannot wear a face covering?

The face covering guidance recognizes that there are some people who cannot wear a face covering for a number of different reasons. People are exempted from the requirement if they are under age 2, have a medical or mental health condition or disability that would make it difficult for them to properly wear or handle a mask, or when it would inhibit communication with a person who is hearing impaired.

Schools should develop protocols to provide a face covering to students who inadvertently fail to bring a face covering to school to prevent unnecessary exclusions. The California Office of Emergency Services has distributed appropriate face coverings for each school throughout the state to local county offices of education.

What if a student arrives at school without a face covering, and refuses to wear one provided by the LEA?

If a student refuses, the student must be excluded from on-campus instruction, unless they are exempt, until they are willing to wear a face covering. Students excluded on this basis should be offered other educational opportunities through distance learning. Disposable paper masks are thinner and may be less effective, but may still be used as a face covering to meet the

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requirement.

What is the guidance on face coverings and physical distancing on buses?

Face coverings are required on buses. The guidance acknowledges that a full 6 feet of physical distancing may not be practicable on buses, therefore face coverings are essential. Physical distancing should be maximized to the extent practicable.

Elementary School Waiver Process

What grade levels does the waiver apply to?

Waivers for in-person instruction may be requested for grades TK-6.

Can private schools file for a waiver?

The CDPH guidance provides that both public and private schools in counties on the County Monitoring List may request a waiver to conduct in-person instruction in elementary schools for grades TK-6. The private school-equivalent of a superintendent (in most cases, the head of school) may request a waiver from the local health officer to conduct in-person elementary school instruction, in consultation with labor (as applicable), parent, and community organizations. Local health officers, in turn, should review local community epidemiological data, consider other public health interventions, and consult with CDPH when considering a waiver request.

Why does the waiver only apply to elementary schools and not middle or high schools?

Based on the current best available scientific evidence, COVID-related risks in schools serving elementary-age students (grades TK-6) are lower than and different from the risks to staff and to students in schools serving older students. In particular, there appears to be lower risk of child-to-child or child-to-adult transmission in children under age 12, and the risk of infection and serious illness in elementary school children is particularly low.

What community organizations would schools have to consult with before considering a waiver?

Examples of community organizations include school-based non-profit organizations and local organizations that support student enrichment, recreation, after-school programs, health services, early childhood services or provide family support.

Applicability

Does this guidance allow for sports activities?

The guidance does not permit team competition, but does allow for individual or team physical conditioning and training and physical education where physical distancing can be maintained and ideally outdoors. Indoor physical conditioning and training is allowed only in counties where gyms and fitness centers are allowed to operate indoors. Please see the CDPH *Youth Sports Guidance* for further details.

Does this guidance allow for singing or playing instruments?

No. Activities where there is increased likelihood for transmission from contaminated exhaled droplets—such as singing, yelling, chanting, blowing wind instruments—are not permitted at this time.

Does this guidance apply to childcare programs?

This guidance applies to K-12. Please see separate childcare guidance.

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Schools-FAQ

Do these new guidelines apply to preschool?

Unless there is a local public health order stating otherwise, child care programs can remain open or re-open. There will be some variation for preschool programs that are based on a school campus: if the school campus is closed, then the local school district will decide if the childcare or preschool program can open

Closure Criteria

How should schools calculate the 5% benchmark for closing schools?

The benchmark will generally include the denominator of both students and staff, which should be tracked separately. The CDPH guidance provides that each school site should designate a liaison – the school nurse, if applicable – to help coordinate monitoring and communications to local health officials, as well as the school community. The liaison should monitor and report positive cases, and track whether the school approaches the 5% threshold during a 14-day period.

If a school has opened because its county was not (or is no longer) on the monitoring list, will schools be required to close if the county reenters the monitoring list?

No, the school will not be required to close. Closure requirements are outlined by the CDPH criteria laid out in the COVID-19 and Reopening Framework for K-12 Schools in California (PDF) document.

Once a school starts in distance learning, is it required to remain that way for the entire quarter, semester?

No. Education Code section 43504 specifies that schools should "offer in-person instruction to the greatest extent possible." However, in-person instruction should be conducted only if the conditions are safe for both students and staff. If a school starts in distance learning, school and public health officials should collaborate to prepare to reopen for in-person instruction as soon as practicable.

Other Exemptions

If a school is closed for in-person instruction, is it permissible for a small set of students—such as students with disabilities and other students with special needs—to receive in-person instruction on campus?

More detailed guidance on conditions under which permissible in-person instruction and services for small sets of students, such as those provided pursuant to an individualized education program (IEP), is forthcoming.

California Department of Public Health
PO Box, 997377, MS 0500, Sacramento, CA 95899-7377
Department Website (cdph.ca.gov)



Page Last Updated : August 4, 2020

EXHIBIT M



SONIA Y. ANGELL, MD, MPH
State Public Health Officer & Director

State of California—Health and Human Services Agency
California Department of Public Health



GAVIN NEWSOM
Governor

**COVID-19 and Reopening of In-Person Learning for Elementary Education
Waiver Notice to the California Department of Public Health (CDPH)**
(for use by Local Health Jurisdictions (LHJs))

August 3, 2020

Note: CDPH recommends that elementary schools within jurisdictions with 14-day case rates more than two times the threshold to be on the County Monitoring List (>200 cases/100,000 population) should not be considered for a waiver to re-open in-person instruction.

Instructions:

- Notice of all school or school district waivers proposed to be granted by a local health officer using this form should be sent to CDPH.
- For technical assistance regarding a waiver application, please contact CDPH.
- **Submit waiver notices and requests for technical assistance at this email address: K6Waiver@cdph.ca.gov.**
- Please do not submit any of your supporting documentation with this form.
- Submission of this document serves as your consultation with CDPH.
- CDPH will acknowledge receipt and follow up if there are any questions or concerns. If you have not received a further response within three business days of submission, you may approve or deny the waiver application consistent with the justification and guidance below.

Date of Application:

LHJ Name:

LHJ Contact:

Public Health Officer (If Not LHJ Contact):

Email:

Phone Number:

Justification: Based on the current best available scientific evidence, COVID-related risks in schools serving elementary-age students (grades TK-6) are lower than and different from the risks to staff and to students in schools serving older students. In particular, there appears to be lower risk of child-to-child or child-to-adult transmission in children under age 12, and the risk of infection and serious illness in elementary school children is particularly low.

CDPH Director's Office, MS 0500 | P.O. Box 997377 | Sacramento,
CA 95899-7377
(916) 558-1700 | (916) 558-1762 (fax)
Internet Address: www.cdph.ca.gov



There are health-related risks for children who are not provided in-person instruction, including lower rates of immunizations, higher rates of undetected child abuse and neglect, and other negative indicators of public health and wellbeing.

Guidance:

- Consistent with state law directing school districts to “offer in-person instruction to the greatest extent possible” (Ed. Code § 43504), local health officers should allow in-person elementary instruction for grades TK-6 to proceed even in counties subject to state monitoring if public health and safety guidance is implemented.
- Elementary in-person instruction must be provided in small, stable cohorts.
- Local health officers may conditionally grant an application with limits on the number of elementary schools allowed to re-open or allow re-opening in phases to monitor for any impact on the community.
- Local health officers in counties on the County Monitoring List within the prior 14 days must consult with CDPH (via submission of this form) before approving a waiver application from a district or school.
- **The local health officer must confirm that they have considered the following:**

Health & Safety

- Local health guidance, including appropriate mandatory requirements consistent with CDPH guidance
- Safety plans and availability of appropriate PPE, as recommended by the local health officer and CDPH guidance, for all elementary teachers and staff who will be involved in in-person instruction
- Availability of public health & school resources for COVID-19 investigation and response

Local Epidemiological Data & Health Care Capacity

- Current new case rate, testing % positivity trends, and the number and degree of indicators above thresholds to be on the monitoring list
- Local hospitalization trends and hospital capacity
- Any other local conditions or data contributing to inclusion on the monitoring list (*e.g.*, out of jurisdiction hospitalizations, enclosed outbreaks, *etc.*)



Testing

- Availability of testing resources within the community and, as applicable, via employee health plans to provide access to periodic testing to all elementary teachers and staff, with reasonable turn-around times

Other Consideration(s)

- The extent to which the school, school district, or system of private schools has consulted with relevant labor, community, and parent organizations, as applicable.
- _____

Please list below the waiver applicant name(s), school name(s), grade levels served, enrollment numbers, and the local health officer’s determination regarding the request:

<u>Waiver Applicant</u>	<u>School Name</u>	<u>Grade Levels</u>	<u>Enrollment</u>	<u>Approved or Denied</u>



EXHIBIT N

8/5/2020

In-Person-Elementary-Waiver-Process



SONIA Y. ANGELL, MD, MPH
State Public Health Officer & Director

State of California—Health and Human
Services Agency
**California Department of Public
Health**



GAVIN NEWSOM
Governor

August 3, 2020

TO: All Californians

SUBJECT: COVID-19 and Reopening In-Person Learning Elementary Education Waiver Process

Overview

California schools have been closed for in-person instruction since mid-March 2020 due to the COVID-19 pandemic. School closures to in-person instruction were part of a broader set of recommendations intended to reduce transmission of SARS-CoV-2, the virus that causes COVID-19. The California Department of Public Health (CDPH) developed the *COVID-19 and Reopening In-Person Learning Framework* (PDF) to support school communities as they decide when and how to implement in-person instruction for the 2020-21 school year.

This framework permitted schools and school districts to reopen for in-person instruction at any time if they are located in a local health jurisdiction (LHJ) that has not been on the county monitoring list within the prior 14 days. If the LHJ has been on the monitoring list within the last 14 days, the school must conduct distance learning only, until their LHJ has been off the monitoring list for at least 14 days.

The framework authorized local health officers (LHO) to grant a waiver of this criteria, in order for elementary schools to open for in-person instruction under specified conditions. Applicants must satisfy all waiver requirements in order to be granted a waiver. Waivers should be granted or denied pursuant to the process outlined below.

Waiver Process

- **CDPH recommends that schools within jurisdictions with 14-day case rates more than two times the threshold to be on the County Monitoring List (>200 cases/100,000 population) should not be considered for a waiver to reopen in-person instruction.**
- Closed elementary schools in counties on the monitoring list within the prior 14 days may not open for in-person instruction until they have received approval of a waiver submitted to the LHO.
- This elementary school waiver is applicable only for grades TK-6, even if the grade configuration at the school includes additional grades.
- A district superintendent, private school principal/head of school, or executive director of a charter school (hereinafter applicant) can apply for a waiver from the LHO to open an elementary school for in-person instruction.
- Applications and all supporting documents must be submitted to the LHO at least 14 days prior to the desired reopening date.
- Prior to applying for the waiver, the applicant (or his/her staff) must (1) consult with labor, parent, and community organizations, and (2) publish elementary school reopening plans on the website of the local educational agency (or equivalent). Examples of community organizations include school-based non-profit organizations and local organizations that support student enrichment, recreation, after-school programs, health services, early childhood services or provide family support.
- As described in the *CDPH/CalOSHA Guidance for Schools and School-Based Programs* (PDF), elementary school reopening plans must address several topics related to health and safety, in a manner consistent with guidance from CDPH and the local health department. Those topics include:
 - Cleaning and disinfection
 - Small, stable, cohorting
 - Entrance, egress, and movement within the school

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In-Person-Elementary-Waiver-Process

- Face coverings and other essential protective gear
- Health screenings for students and staff
- Healthy hygiene practices
- Identification and tracing of contacts
- Physical distancing
- Staff training and family education
- Testing of students and staff
- Triggers for switching to distance learning
- Communication plans
- When applying for the waiver, the applicant must submit to the LHO a waiver application form, to be provided by the LHO. The application must include evidence of (1) consultation with labor, parent, and community organizations and (2) publication of the elementary school reopening plans on the website of the local educational agency (or equivalent).
 - The applicant must sign an attestation confirming the names and dates that the organizations were consulted. If school staff are not represented by a labor organization, then the applicant must describe the process by which it consulted with school staff.
 - The applicant must confirm publication of the elementary school reopening plans on the website of the local educational agency (or equivalent).
- If applying on behalf of a school district, the applicant should submit a consolidated application and publish a plan for elementary schools in the district that are seeking to reopen for in-person instruction. If applying for an independent, private, faith-based, or charter school, the applicant should submit an application and publish a plan for each school.
- Upon receipt of a waiver application, the LHO will review and consider the application, supporting materials, and the following:
 - Available scientific evidence regarding COVID-related risks in schools serving elementary-age students, along with the health-related risks for children who are not provided in-person instruction.
 - State law directing public schools to "offer in-person instruction to the greatest extent possible." (Ed. Code § 43504).
 - Whether elementary in-person instruction can be provided in small, stable cohorts.
 - Local health guidance, safety plans, availability of appropriate PPE, and availability of public health and school resources for COVID-19 investigation and response.
 - Current new case rate, testing % positivity trends, and the number and degree of indicators above thresholds to be on the County Monitoring List.
 - Local hospitalization trends and hospital capacity.
 - Any other local conditions or data contributing to inclusion on the County Monitoring List.
 - Availability of testing resources within the community and via employee health plans.
 - The extent to which the applicant has consulted with staff, labor organizations, community, and parent organizations.
- Following review, the LHO will consult with CDPH regarding the determination whether to grant or deny the waiver application. Consultation with CDPH is accomplished by submitting a notice pursuant to CDPH instructions.
 - CDPH will acknowledge receipt of the notice and follow up if there are any questions or concerns. CDPH will provide technical assistance as requested.
 - If the LHO has not received a further response within three business days of submission, the waiver application may be approved or denied consistent with CDPH instructions.
- LHOs may conditionally grant an application with limits on the number of elementary schools allowed to re-open or allow re-opening in phases to monitor for any impact on the community.
- Closed elementary schools in counties on the monitoring list within the prior 14 days may not open for in-person instruction until they have received approval of a waiver submitted to the LHO.

California Department of Public Health
PO Box, 997377, MS 0500, Sacramento, CA 95899-7377
Department Website (cdph.ca.gov)



Page Last Updated : August 4, 2020

EXHIBIT O

[Local Public Health Letterhead]

[Date]

Dear District Superintendent, Charter School Director, or Private School Head of School:

On [Date of Monitoring List Placement], the California Department of Public Health (CDPH) placed [Name] County on its monitoring list. On July 17, 2020 Governor Gavin Newsom announced that if a county has been on the monitoring list within the prior 14 days, a school must conduct distance learning only, until the county has been off the monitoring list for at least 14 days.

In counties on the monitoring list, CDPH guidance allows a district superintendent, private school principal/head of school, or executive director of a charter school (hereinafter superintendent) to apply for a waiver from the local health officer to open an elementary school for in-person instruction. This waiver is applicable only for grades TK-6, even if the grade configuration at the school includes additional grades.

When applying for the waiver, the superintendent must submit to the local health officer evidence of (1) consultation with labor and parent organizations and (2) publication of the elementary school reopening plans on the website of the local educational agency (or equivalent).

The local health officer then reviews the application and reopening plan (along with local community epidemiological data), makes a determination whether to grant or deny the waiver, and consults with CDPH regarding that determination. Elementary schools in counties on the monitoring list within the prior 14 days may not open for in-person instruction until they have received approval of a submitted waiver from the local health officer.

In order to apply for a waiver, please complete and submit the attached Application Cover Form. An application must contain:

- Attestation that the superintendent (equivalent or designated staff) has consulted with all parent and labor organizations at each school site for which an application is being submitted. If no labor organization represents the school site staff, then consultation with school site staff is sufficient.
- Confirmation that elementary school reopening plans have been published on the website of the local educational agency (or equivalent). Reopening plans must address the components in the CDPH guidance for schools and school-based programs (which are also listed in the attached Application Cover Form).

Applications and all supporting documents should be submitted to the local health officer at least 14 days prior to the desired reopening date to [Email Address].

Sincerely,

[Name]

[Title]

[Health Organization]

Waiver Application Cover Form

(for use by a Local Education Agency or equivalent)

Please submit one application for each local educational agency or equivalent. If applying on behalf of a school district please submit one application for elementary schools in the district that are seeking to reopen for in-person instruction. If applying for an independent, private, faith-based, or charter school, please submit an application for each school.

Background Information

Name of Applicant (Local Educational Agency or Equivalent):

School Type:

_____ Traditional Public School

_____ Charter School

_____ Private, Independent, or Faith-Based School

Number of schools: _____

Enrollment: _____

Superintendent (or equivalent) Name: _____

Address: _____

Grades/Number of Students Proposed to be Reopened:

TK K 1st 2nd 3rd 4th 5th 6th

Date of Proposed Reopening: _____

Name of Person Completing Application: _____

Phone Number: _____

Email: _____

Signature: _____

Date: _____

I. Consultation

Please confirm consultation with the following groups:

Labor Organization

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

Parent and Community Organizations

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

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

II. Elementary School Reopening Plans

Please confirm that elementary school reopening plan(s) addressing the following, consistent with guidance from the California Department of Public Health and the local health department, have been published on the website of the local educational agency (or equivalent):

Cleaning and Disinfection: How shared surfaces will be regularly cleaned and disinfected and how use of shared items will be minimized.

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

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

- Face Coverings and Other Essential Protective Gear:** How CDPH's face covering requirements will be satisfied and enforced.
- Health Screenings for Students and Staff:** How students and staff will be screened for symptoms of COVID-19 and how ill students or staff will be separated from others and sent home immediately.
- Healthy Hygiene Practices:** The availability of handwashing stations and hand sanitizer, and how their use will be promoted and incorporated into routines.
- Identification and Tracing of Contacts:** Actions that staff will take when there is a confirmed case. Confirm that the school(s) have designated staff persons to support contact tracing, such as creation and submission of lists of exposed students and staff to the local health department and notification of exposed persons. Each school must designate a person for the local health department to contact about COVID-19.
- Physical Distancing:** How space and routines will be arranged to allow for physical distancing of students and staff.
- Staff Training and Family Education:** How staff will be trained and families will be educated on the application and enforcement of the plan.
- Testing of Students and Staff:** How school officials will ensure that students and staff who have symptoms of COVID-19 or have been exposed to someone with COVID-19 will be rapidly tested and what instructions they will be given while waiting for test results. Describe how staff will be tested periodically to detect asymptomatic infections.
- Triggers for Switching to Distance Learning:** The criteria the superintendent will use to determine when to physically close the school and prohibit in-person instruction.
- Communication Plans:** How the superintendent will communicate with students, staff, and parents about cases and exposures at the school, consistent with privacy requirements such as FERPA and HIPAA.

Additional Resources:

CDPH and Cal/OSHA Guidance for Schools and School-Based Programs

<https://files.covid19.ca.gov/pdf/guidance-schools.pdf>

California Department of Education Stronger Together: A Guidebook for the Safe Reopening of California's Public Schools

<https://www.cde.ca.gov/ls/he/hn/strongertogether.asp>

CDPH COVID-19 and Reopening In-Person Learning Framework for K-12 Schools in California, 2020-2021 School Year

<https://www.cdph.ca.gov/Programs/CID/DCDC/CDPH%20Document%20Library/COVID-19/Schools%20Reopening%20Recommendations.pdf>

SAMPLE

EXHIBIT P

[Local Public Health Letterhead]

[Date]

Dear District Superintendent, Charter School Director, or Private School Head of School:

On [Date of Monitoring List Placement], the California Department of Public Health (CDPH) placed [Name] County on its monitoring list. On July 17, 2020 Governor Gavin Newsom announced that if a county has been on the monitoring list within the prior 14 days, a school must conduct distance learning only, until the county has been off the monitoring list for at least 14 days.

In counties on the monitoring list, CDPH guidance allows a district superintendent, private school principal/head of school, or executive director of a charter school (hereinafter superintendent) to apply for a waiver from the local health officer to open an elementary school for in-person instruction. This waiver is applicable only for grades TK-6, even if the grade configuration at the school includes additional grades.

When applying for the waiver, the superintendent must submit to the local health officer evidence of (1) consultation with labor and parent organizations and (2) publication of the elementary school reopening plans on the website of the local educational agency (or equivalent).

The local health officer then reviews the application and reopening plan (along with local community epidemiological data), makes a determination whether to grant or deny the waiver, and consults with CDPH regarding that determination. Elementary schools in counties on the monitoring list within the prior 14 days may not open for in-person instruction until they have received approval of a submitted waiver from the local health officer.

In order to apply for a waiver, please complete and submit the attached Application Cover Form. An application must contain:

- Attestation that the superintendent (equivalent or designated staff) has consulted with all parent and labor organizations at each school site for which an application is being submitted. If no labor organization represents the school site staff, then consultation with school site staff is sufficient.
- Confirmation that elementary school reopening plans have been published on the website of the local educational agency (or equivalent). Reopening plans must address the components in the CDPH guidance for schools and school-based programs (which are also listed in the attached Application Cover Form).

Applications and all supporting documents should be submitted to the local health officer at least 14 days prior to the desired reopening date to [Email Address].

Sincerely,

[Name]

[Title]

[Health Organization]

Waiver Application Cover Form

(for use by a Local Education Agency or equivalent)

Please submit one application for each local educational agency or equivalent. If applying on behalf of a school district please submit one application for elementary schools in the district that are seeking to reopen for in-person instruction. If applying for an independent, private, faith-based, or charter school, please submit an application for each school.

Background Information

Name of Applicant (Local Educational Agency or Equivalent):

School Type:

_____ Traditional Public School

_____ Charter School

_____ Private, Independent, or Faith-Based School

Number of schools: _____

Enrollment: _____

Superintendent (or equivalent) Name: _____

Address: _____

Grades/Number of Students Proposed to be Reopened:

TK K 1st 2nd 3rd 4th 5th 6th

Date of Proposed Reopening: _____

Name of Person Completing Application: _____

Phone Number: _____

Email: _____

Signature: _____

Date: _____

I. Consultation

Please confirm consultation with the following groups:

Labor Organization

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

Parent and Community Organizations

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

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

II. Elementary School Reopening Plans

Please confirm that elementary school reopening plan(s) addressing the following, consistent with guidance from the California Department of Public Health and the local health department, have been published on the website of the local educational agency (or equivalent):

Cleaning and Disinfection: How shared surfaces will be regularly cleaned and disinfected and how use of shared items will be minimized.

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

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

- Face Coverings and Other Essential Protective Gear:** How CDPH's face covering requirements will be satisfied and enforced.
- Health Screenings for Students and Staff:** How students and staff will be screened for symptoms of COVID-19 and how ill students or staff will be separated from others and sent home immediately.
- Healthy Hygiene Practices:** The availability of handwashing stations and hand sanitizer, and how their use will be promoted and incorporated into routines.
- Identification and Tracing of Contacts:** Actions that staff will take when there is a confirmed case. Confirm that the school(s) have designated staff persons to support contact tracing, such as creation and submission of lists of exposed students and staff to the local health department and notification of exposed persons. Each school must designate a person for the local health department to contact about COVID-19.
- Physical Distancing:** How space and routines will be arranged to allow for physical distancing of students and staff.
- Staff Training and Family Education:** How staff will be trained and families will be educated on the application and enforcement of the plan.
- Testing of Students and Staff:** How school officials will ensure that students and staff who have symptoms of COVID-19 or have been exposed to someone with COVID-19 will be rapidly tested and what instructions they will be given while waiting for test results. Describe how staff will be tested periodically to detect asymptomatic infections.
- Triggers for Switching to Distance Learning:** The criteria the superintendent will use to determine when to physically close the school and prohibit in-person instruction.
- Communication Plans:** How the superintendent will communicate with students, staff, and parents about cases and exposures at the school, consistent with privacy requirements such as FERPA and HIPAA.

Additional Resources:

CDPH and Cal/OSHA Guidance for Schools and School-Based Programs

<https://files.covid19.ca.gov/pdf/guidance-schools.pdf>

California Department of Education Stronger Together: A Guidebook for the Safe Reopening of California's Public Schools

<https://www.cde.ca.gov/ls/he/hn/strongertogether.asp>

CDPH COVID-19 and Reopening In-Person Learning Framework for K-12 Schools in California, 2020-2021 School Year

<https://www.cdph.ca.gov/Programs/CID/DCDC/CDPH%20Document%20Library/COVID-19/Schools%20Reopening%20Recommendations.pdf>

SAMPLE

EXHIBIT Q

8/7/2020

COVID-19 County Monitoring Overview

COVID-19

County Data Monitoring

Overview

Over the past several months, California has used data and science to drive our response to COVID-19. The county data posted below is intended to give Californians insight into how their county is doing and provide some early indication of developing areas of concern.

It is incumbent upon state and local governments, business sectors, and individuals to work together and take actions that limit the transmission of COVID-19. Only together can we make a difference. Opened sectors should follow state guidance on how to reduce risk to the public, and individuals should continue to practice safety precautions such as wearing face coverings in public, physical distancing of at least six feet, frequent handwashing, and disinfecting surfaces. Those over 65 or those with underlying health conditions should continue to stay at home.

The state and local jurisdictions together have prepared to respond to COVID-19 by increasing testing capacity across the state, developing healthcare surge plans, expanding contact tracing capabilities, securing personal protection equipment (PPE) for essential services and business sectors, and ensuring protection of our most vulnerable populations. Many counties have attested to: 1) stabilization of their data, and 2) increased level of preparedness as they move to open business sectors in their jurisdiction. Many counties with a variance developed their own local containment plans, which were outlined or described in publicly posted **attestations**. The data and metrics here should be viewed as supplemental to the county identified triggers for modifications, included in those attestation plans and not a replacement for metrics used in their containment plans. This data will allow the public to monitor the impact of opening these business sectors and better understand when the local health officer and county officials determine that it is necessary to put new interventions in place.

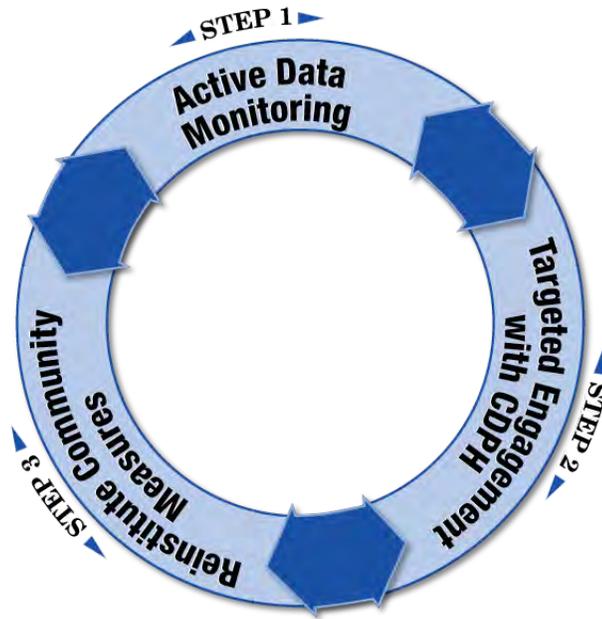
In addition, other factors may cause a county to be placed on the monitoring list such as elevated cases in specific populations, large outbreaks in congregate settings, elevated public interests, and significant resource requests for PPE, contact tracers, or testing capacity. The state will follow a county's flagged data for three days before it is placed on the targeted engagement list. Data that does not meet the state's threshold for that indicator will be bolded in the data table posted on this page.

The partnership and process is comprised of three steps that may cycle back and forth depending on progress.

Click on the steps within the graphic below to see more information:

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COVID-19 County Monitoring Overview



Links:

- [County Data Monitoring Overview](#)
- [County Data Chart](#)
- [Step 1: Active Data Monitoring](#)
- [Step 2: Targeted Engagement with CDPH](#)
- [Step 3: Reinstigate Community Measures](#)

Page Last Updated : August 6, 2020

EXHIBIT R

8/7/2020

COVID19County Data Table

COVID-19

County Data Monitoring

County Data Chart

A description of the data being monitored can be found in the **Understanding the Data Being Monitored** section. County data have been flagged for not meeting the objective set for that indicator. The data chart will be updated and posted daily.

Please note: the metrics described may differ from other state-reported data due to the way each metric is calculated. For example, the case rate in this report uses the earliest date that a person was known to have a confirmed infection rather than the date it was reported to the California Department of Public Health. The testing volume and testing positivity metrics in this report have a 7-day lag in order to account for delays in reporting. Detailed descriptions of how these metrics are calculated can be found in the **Understanding the Data Being Monitored** section.

Elevated disease transmission, increasing hospitalization, and limited hospital capacity metrics are only displayed for counties not meeting threshold criteria.

Update 08/07/2020:

- The transition of the federal requirements for hospital reporting is complete as of 8/6/2020 and is currently displayed in the County Data Monitoring chart.
- Data for case rate and testing positivity will not be displayed while the State is working to address the data lag issues recently identified.
- At this time, movement of counties on or off the list will be on hold until further notice.
- The July 13th State Health Order still applies to counties currently on the monitoring list.

Chart last updated on August 7, 2020.

		Elevated Disease Transmission		Increasing Hospitalization**	Limited Hospital Capacity**
Threshold	<150	Case Rate >100 OR Case Rate >25 AND Positivity >8%		>10% Increase	
County	Avg # tests per day (per 100,000 population) (7 day average with a 7 day lag)	Case rate per 100,000 (14 days)	Testing positivity (%) (7 day average with a 7 day lag)	% ICU beds currently available	% Ventilators currently available
Alameda*	---	---	---	✓	✓
Alpine	---	---	---	---	---
Amador*	---	---	---	✓	✓

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COVID19County Data Table

Butte*	---	---	---	13.2	✓
Calaveras	---	---	---	✓	✓
Colusa*	---	---	---	---	✓
Contra Costa*	---	---	---	✓	✓
Del Norte	---	---	---	✓	✓
El Dorado	---	---	---	✓	✓
Fresno*	---	---	---	8.9	✓
Glenn*	---	---	---	---	
Humboldt	---	---	---	✓	✓
Imperial*	---	---	---	14.3	✓
Inyo	---	---	---	✓	✓
Kern*	---	---	---	✓	✓
Kings*	---	---	---	✓	✓
Lake	---	---	---	✓	✓
Lassen	---	---	---	---	
Los Angeles*	---	---	---	✓	✓
Madera*	---	---	---	3.1	✓
Marin*	---	---	---	✓	✓
Mariposa	---	---	---	---	✓
Mendocino	---	---	---	✓	✓
Merced*	---	---	---	✓	✓
Modoc	---	---	---	---	✓
Mono	---	---	---	✓	✓
Monterey*	---	---	---	✓	✓
Napa*	---	---	---	✓	✓
Nevada	---	---	---	✓	✓
Orange*	---	---	---	✓	✓
Placer*	---	---	---	19.8	✓
Plumas	---	---	---	---	✓
Riverside*	---	---	---	✓	✓
Sacramento*	---	---	---	19.8	✓
San Benito*	---	---	---	0.0	✓
San Bernardino*	---	---	---	✓	✓
San Diego*	---	---	---	✓	✓
San Francisco*	---	---	---	✓	✓

8/7/2020

COVID19County Data Table

San Joaquin*	---	---	---	15.6	✓
San Luis Obispo*	---	---	---	✓	✓
San Mateo*	---	---	---	✓	✓
Santa Barbara*	---	---	---	✓	✓
Santa Clara*	---	---	---	✓	✓
Santa Cruz*	---	---	---	✓	✓
Shasta	---	---	---	✓	✓
Sierra	---	---	---	✓	✓
Siskiyou	---	---	---	✓	✓
Solano*	---	---	---	10.6	✓
Sonoma*	---	---	---	15.7	✓
Stanislaus*	---	---	---	7.0	✓
Sutter*	---	---	---	---	✓
Tehama	---	---	---	✓	✓
Trinity	---	---	---	---	✓
Tulare*	---	---	---	13.5	✓
Tuolumne	---	---	---	✓	✓
Ventura*	---	---	---	✓	✓
Yolo*	---	---	---	✓	✓
Yuba*	---	---	---	✓	✓

*Counties on the County Monitoring List as of 08/07/2020

Links:

- County Data Monitoring Overview
- County Data Chart
- Step 1: Active Data Monitoring
- Step 2: Targeted Engagement with CDPH
- Step 3: Reinstitute Community Measures

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EXHIBIT S

8/8/2020

County Monitoring Data- Step 1

COVID-19

County Data Monitoring

Step 1: Active Data Monitoring

County Data Chart

Understanding the Data Being Monitored

When reviewing the data, a few assumptions should be noted, such as: 1) COVID positive case rates amongst state and federal prison inmates are not included in the case rate; 2) increasing hospitalization and limited hospital capacity data may represent the county accepting patients from neighboring jurisdictions or increase in testing; and, 3) testing data may help explain or provide context for interpreting the elevated disease transmission data. All of these key assumptions and the extent to which a county's data is above the threshold level would factor into CDPH's targeted engagement with local health departments. Data in the county table and link is presented by county, which encompasses the city Pasadena, Long Beach, and Berkeley, who have their own city health departments.

As described above, the data and metrics monitored here should be viewed as supplemental to the triggers for modifications outlined by the county and not a replacement for metrics used in their local containment plans. For disease transmission and increasing hospitalization metrics, the data is provided over a different range of time than what was requested by the state for the variance attestations.

Elevated Disease Transmission (Source: CalRedie):

The 14-day case rate (without prison cases) and 7-day testing positivity rate are used to assess the level of COVID-19 burden in a county. For each measure, the higher the number, the more a county is impacted by COVID-19. However, it is important to look at this data in the context of average number of tests per day, as well as who is being tested. In general, higher number of tests per day indicates more widespread testing for COVID-19 beyond individuals who have symptoms. This means that more individuals who either do not have COVID-19 or have COVID-19 but are asymptomatic will be tested. As a result, as the number of tests per day increases, the case rate may increase (due to the identification of asymptomatic cases) and the testing positivity rate may decrease (due to more testing among individuals who do not have COVID-19).

A county is flagged for elevated disease transmission criteria if:

1) Case rate (per 100,000) >100

OR

2) Case rate (per 100,000) >25 **AND** testing positivity >8.0%

14-day case rate (without prison cases): The total number of cases diagnosed and reported over a 14-day period divided by the number of people living in the county. This number is then multiplied by 100,000. Due to reporting delay, there is a 3-day lag. For example, a case rate calculated on April 1st would correspond to cases occurring from March 15th - March 28th. Although case rates are often calculated using the date they were reported to the health department, this measure uses the episode date. The episode date is the earliest of several dates and corresponds to the earliest date that the case can be known to have had the infection.

7-day testing positivity: The total number of positive polymerase chain reaction (PCR) tests divided by the total number of PCR tests conducted. This number is then multiplied by 100 to get a percentage. Due to reporting delay (which may be different between positive and negative tests), there is a 7-day lag. For example, a case rate calculated on April 1st would correspond to specimens collected between March 18th - March 24th.

Increasing Hospitalizations (Source: California Hospital Association Survey):

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County Monitoring Data- Step 1

Monitoring changes to the number of individuals who are hospitalized for COVID-19 is another way to assess the burden of COVID-19 in a county. If more people are being hospitalized for COVID-19, it is likely that disease transmission is increasing, although increases in hospitalization rates are likely to lag by approximately two weeks. Unlike the case rate or testing positivity rate, the number of people hospitalized for COVID-19 is less likely to be influenced by how much testing is occurring. However, the number of patients currently hospitalized for COVID-19 may be influenced by a number of factors including: how long someone is hospitalized for COVID-19, whether hospitals in a county have accepted patient transfers from other counties, and who is being infected by COVID-19 (people who are older or have certain underlying medical conditions are more likely to require hospitalization).

A county is considered to meet the increasing hospitalization criteria if:

- 1) >10% increase in the average number of confirmed COVID-19 patients hospitalized

Percent change in confirmed COVID-19 patients hospitalized: Calculated by comparing the average number of laboratory confirmed COVID-19 patients hospitalized over the past 3 days to the 3 days prior. For example, a number calculated on April 1st would compare the average number of patients hospitalized on March 29th, 30th, 31st to the average number of confirmed patients hospitalized on March 26th, 27th, and 28th. Counties with an average of <20 laboratory confirmed COVID-19 patients hospitalized over the past 3 days are not considered to meet the increasing hospitalization criteria.

Limited Hospital Capacity (Data Source: California Hospital Association Survey):

If a county is experiencing increased transmission rates and increases in hospitalization, it is important to monitor whether there is sufficient remaining capacity in the health care system to care for patients in the county. In addition to overall hospital capacity, other key indicators of hospital capacity include availability of intensive care unit (ICU) beds and ventilators.

A county is considered to meet the limited hospital capacity if:

- 1) <20% of staffed ICU beds are available

OR

- 2) <25% of ventilators are available

ICU Bed Availability: The total number of available ICU beds divided by the total number of staffed ICU beds. This number is then multiplied by 100 to get a percentage. NICU beds are excluded from this calculation.

Ventilator Availability: The total number of available ventilators divided by the total number of ventilators. This number is then multiplied by 100 to get a percentage.

Links:

- County Data Monitoring Overview
- County Data Chart
- Step 1: Active Data Monitoring
- Step 2: Targeted Engagement with CDPH
- Step 3: Reinstitute Community Measures

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EXHIBIT T

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CountyMonitoringData- Step2

COVID-19

County Data Monitoring

Step 2: Targeted Engagement with CDPH

County Data Chart

In partnership, CDPH will work with Local Health Departments to set up strategy calls and provide technical assistance. The following areas will be discussed:

- Identify the drivers of the changing situation and whether it is increasing confirmed cases, uptick in hospitalizations and ICU patients, outbreaks in congregate settings such as skilled nursing facilities (SNFs) or jails/prisons, or community transmissions in settings such as churches, workplaces, or agriculture, and amongst other specific populations experiencing disease disproportionately.
- Review of the strategies already in place by the Local Health Department and community to address each of the areas of concern, including locally defined plans and protocols published through variance attestations.
- Discuss additional steps that should be taken in various environments such as more aggressive testing strategies, any issues with contact tracing, need for healthcare resources or infection control strategies.
- Discuss issues that may develop as a result of currently identified issues, e.g. additional SNF or community outbreaks leading to a healthcare surge.
- Discuss any gaps in resources and clear articulation of any additional roles for the state and/or local jurisdiction. Resource gaps should include commodities such as personal protective equipment (PPE), testing supplies, or other consumables.
- Review of business sectors that are open and whether any other state agencies may be needed in the discussion given their ownership of the facility or role in regulating that business sector.
- Review of Local Containment Triggers and Consideration of renewing non-pharmaceutical interventions (NPI).

The state will work closely with Local Health Departments to identify action steps and timelines for addressing issues that impact indicators of concern. Counties currently being monitored at this step, the drivers of their situation, and key action steps identified are below:

Resources

› Alameda County

Alameda County (has variance) is experiencing an increase in reported COVID-19 cases in recent weeks, indicating elevated disease transmission. This change is above what we expected as a result of the County's substantial expansion of testing. Likely drivers include: 1) increased interpersonal interactions without face coverings and physical distancing, and 2) ongoing transmission among health care workers, within households, in frontline workplace settings, and in skilled nursing and other congregate living facilities. County has reopened more slowly than the rest of the state and reports they are affected by accelerated reopenings across the region and state, as their residents routinely live, work, and recreate across county boundaries. Key actions to address COVID-19 transmission include: 1) pausing their reopening on June 29; 2) implementing a deeper outreach into impacted communities and workplaces regarding face coverings and physical distancing; 3) continuing case detection (testing); 4) continuing and increasing case investigation and contact tracing

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CountyMonitoringData- Step2

staffing with trusted community partners; 5) increasing support for addressing workplace COVID-19 prevention and response; and 6) coordinating response efforts with the State and regional partners. (Date added to CDM list: July 12, 2020)

› Butte County

Butte County (has variance) is experiencing an increase in reported COVID-19 cases in recent weeks, indicating elevated disease transmission. Likely drivers of this increase include: 1) private gatherings and 2) outbreaks in congregate living facilities. While they have experienced an increase in cases and hospitalizations have increased slightly, the number of COVID patients in ICU have remained low and the hospitals are not concerned about surge at this time. The ICU capacity metric for Butte County shows less than 20%, however the majority of the patients in ICU are non-COVID patients and the hospitals could bring on additional capacity for COVID patients if needed. Actions to address COVID-19 transmission include: 1) testing of all residents and staff in congregate facilities experiencing outbreaks; 2) established regular testing of all staff in skilled nursing facilities; 3) expanding number of contact tracers to continue follow up on each case; 4) development and distribution of flow charts for businesses on "what to do if...."; 5) working closely with the schools to plan for distance or in-person learning; 6) more community outreach and public information: PSAs for TV and radio, regular social media posts, weekly press conferences, information distributed to businesses, signage for businesses to require face coverings. (Date added to CDM List: July 22, 2020)

› Colusa County

Colusa County (has variance) is experiencing elevated disease transmission. Drivers of this include family and community gatherings. Actions to address these concerns include 1) NPI interventions such as encouraging social distancing, use of face coverings and hand hygiene. 2) Increasing case investigators and contact tracing 3) reassign staff to assist investigators and contact tracers 4) provide just in time training to current DHHS bilingual staff so they can immediately begin case investigation and contact tracing. 5) identify bilingual staff that can be reassigned within the County that can assist with translation only, not investigation or tracing 6) utilize the language line to allow non-bilingual staff to case investigate and contact trace 7) daily Facebook posts encouraging individuals to wear face coverings 8) Media campaign to explain the importance of both isolation and quarantine. (Date added to CDM list: July 5, 2020)

› Contra Costa County

Contra Costa County (has variance) is experiencing elevated disease transmission and increasing hospitalization. There is a concerning rise in the number of people hospitalized. This is in parallel to a rise in overall cases. Key actions to address the increase include 1) delaying the opening of additional business and activities in an effort to encourage people to stay home and avoid gatherings, 2) continuing to adhere to the State's guidance on face coverings and enforcement activities, 3) working with communities and community-based organizations to share messaging about face coverings and other prevention techniques along with the importance of testing, and 4) continuing to provide infection prevention expertise to assist skilled nursing facilities and other congregate care facilities on infection control practices and proper use of PPE. (Date added to CDM list: July 5, 2020)

› Fresno County

Fresno County (has variance) is experiencing elevated disease transmission. A driver of this are outbreaks in SNFs and the impact of the Avenal State Prison outbreak on staff who live in surrounding counties, such as Fresno. Key actions to address concerns include 1) continuing to provide Infection Preventionists expertise to assist SNFs on infection control practices; 2) ensure baseline testing of SNF residents and health care workers; 3) ensure adequate and proper use of PPE; and, 4) coordination and communication between CDCR, CDPH, and the Local Health Department to mitigate outbreaks at state prisons with employees who return to live in Fresno County. (Date added to CDM list: June 8, 2020)

› Glenn County

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CountyMonitoringData- Step2

Glenn County (has variance) is experiencing elevated disease transmission. Drivers of this include an increase in outbreaks and clusters related to 1) household contacts, 2) social gatherings 3) businesses in the county 4) one church gathering and 5) one case that traveled to Mexico. Actions to address these concerns include 1) Working with businesses on health check screenings and NPI enforcement and monitoring 2) Increasing case investigators and contact tracing 3) Increase testing and media campaigning for those that are symptomatic 4) Develop a process to handle incoming cases in a timely and efficient manner. (Date added to CDM list: June 29, 2020)

› Imperial County

Imperial County is experiencing elevated disease transmission. Drivers of this include U.S. citizens/residents traveling to or from Mexico to work and/or seek healthcare and other services, continued need for staffing solutions at hospitals, and outbreak at meat packing facility. Key actions to address concerns include 1) building additional testing capacity, 2) training and onboarding contact tracing staff, 3) transporting patients to hospitals in neighboring counties when hospital capacity is full or limited; and, 4) stand up support for alternative care sites. (Date added to CDM list: June 5, 2020)

› Kern County

Kern County (has variance) is experiencing an increase in reported COVID-19 cases during the last few weeks. The county has also significantly increased testing. The likely drivers of elevated disease transmission include: 1) An exponential expansion of testing Kern County residents; 2) Transmission in Skilled Nursing Facilities, prisons and other congregate facilities; 3) Household contacts and social gatherings among separate households. Strategies and actions to address the concerns include: 1) Continuing to implement an aggressive outreach program that strongly encourages disease prevention methods and targeting areas disproportionately impacted; 2) Working with the California Department of Public Health to require significant operational changes within our Skilled Nursing Facilities and positioning our new SNF accountability officer to effectively coordinate Kern County and State efforts; and 3) Coordinating and communicating with State agencies to mitigate disease transmission and outbreaks at State prisons. (Date added to CDM list: July 21, 2020)

› Kings County

Kings County (has variance) is experiencing elevated disease transmission, increasing hospitalizations, and limited hospital capacity. Drivers of this include county experiencing outbreaks at Avenal State prison within their jurisdiction, resulting in secondary infection to staff working within the central and satellite kitchens; outbreak at local Adventist Health (AH) admitting COVID positive patients from Tulare, Reedley, and SNF outbreaks. Key actions to address concerns include 1) coordination and communication between local health department, CDPH, and California Department of Corrections and Rehabilitation (CDCR) to mitigate outbreak at Avenal State Prison; 2) order needed resources through the Standardized Emergency Management System such as oxygen concentrators, health care staff, testing kits, and PPEs; and, 3) continue to engage with SNFs on infection control measures. (Date added to CDM list: June 5, 2020)

› Los Angeles County

Los Angeles County (has variance) is experiencing the possibility of elevated disease transmission. Drivers of this include having a high case rate that is highly related to high testing capacity and volume countywide, which also includes testing all residents and staff at over 235 SNFs. Key actions to monitor the situation include 1) monitoring positivity rate among those tested to ensure that there isn't a significant increase that may signal more community transmission; 2) continuing to provide Infection Preventionists expertise to assist SNFs and to ensure baseline testing at every SNF that has not reported any positive cases; and, 3) working with the state to ensure supply chain issues related to PPE at SNFs are resolved. (Date added to CDM list: June 5, 2020)

› Madera County

8/8/2020

CountyMonitoringData- Step2

Madera County (has variance) is experiencing elevated disease transmission and limited hospital capacity. Drivers of this include an increase in community spread cases related to 1) social gatherings 2) work exposure 3) person-to-person transmission in large households. Actions to address these concerns include 1) contact tracing 2) local and regional messaging campaigns 3) education and technical assistance with businesses. 4) collaborate with regional hospitals to make plans to transfer if needed 5) Setup Alternate Care Site for patients. (Date added to CDM list: July 4, 2020)

› Marin County

Marin County (has variance) is experiencing elevated disease transmission, increasing hospitalizations, and limited hospital capacity. Drivers of this include county experiencing an outbreak at San Quentin State Prison within their jurisdiction; increased community transmission among essential workers; and outbreaks in congregate settings and Latinx neighborhoods. Key actions to address concerns include 1) coordination and communication between local health department, CDPH, and California Department of Corrections and Rehabilitation (CDCR) to mitigate outbreak at San Quentin State Prison; 2) enhanced infection control practices and testing at residential care facilities for the elderly (RCFE) and skilled nursing facilities (SNF); and 3) partnerships with community-based organizations to increase testing, access to care and supports for vulnerable populations. (Date added to CDM list: July 3, 2020)

› Merced County

Merced County (has variance) is experiencing elevated disease transmission, increasing hospitalizations, and limited hospital capacity. Drivers of this include increased community transmission, increased exposures at work places (including several small outbreaks), and household clusters, particularly in the Latinx/Hispanic community. Action steps to address these concerns include: 1) increased marketing of community testing among priority populations; 2) increasing culturally responsive public messaging and education on the importance personal protection measures including face coverings; and, 3) educational outreach to businesses to convey importance of implementing safety measures in order to prevent future shutdown. (Date added to CDM list: June 29, 2020)

› Mono County

Mono County (has variance) has evidence of increasing disease transmission with recent rapid rise in positive cases and percent positives. The only hospital, Mammoth Hospital, a 17 bed CAH with 2 bed ICU, remains relatively unimpacted. About 95% of their cases have been in the Town of Mammoth Lakes (TOML), the largest town, with much less evidence of community transmission in unincorporated areas. County reports that the Hispanic community is disproportionately affected. Drivers include: 1) cases in the restaurant sector (Two-thirds of cases over the last 4 weeks have occurred in restaurant workers or their contacts), 2) Contact and exposure in tourism sector, 3) informal gatherings. County reports that tourism greatly increases their population and social activity and is believed to increase transmission. Informal gatherings are believed to be a significant source of new infections. Key actions to address these concerns include: 1) setting capacity limits on transient lodging in TOML, 2) active promotion of StaySafeToStayOpen behaviors, 3) enforcement of face covering orders and other applicable to businesses. County is working to increase access to testing although reliance on send-out testing is not optimal. Targeted testing in affected business sectors is ongoing. County's contact tracing staff have been able to meet needs to date. (Date added to the CDM list: July 23, 2020).

› Monterey County

Monterey County (has variance) is experiencing elevated disease transmission. Drivers include 1) community transmission as more individuals leave their homes to work or to seek services, and 2) workplace transmission followed by household transmission. Key actions to slow transmission of COVID-19 include 1) promoting and building additional testing capacity in geographic areas with low testing rates; 2) continuing case and contact investigations; 3) continuing to coordinate with local hospitals, clinics, and skilled nursing facilities to ensure surge response readiness, and; 4) focusing additional outreach and educational messaging in geographic areas and among populations disproportionately affected by COVID-19. (Date added to CDM list: July 2, 2020)

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› Napa County

Napa County (has variance) is experiencing elevated disease transmission. Drivers of this include family and community gatherings, increased community transmission, increased transmission among the Latino population within crowded household settings, and disproportionate impact on agricultural workers. Actions to address these concerns include: 1) NPI interventions such as encouraging social distancing, use of face coverings and hand hygiene; 2) increasing bilingual case investigators and contact tracing staff; 3) education on staying within household bubbles, using traditional and social media and door-hanger campaigns; 4) public education of social distancing and face coverings through radio, Facebook Live, newspaper and social media; 5) testing of all case contacts, surveillance testing of skilled nursing facilities and farmworkers within vineyard management with exposures or outbreaks; 6) formation of an intergovernmental compliance task force to enforce social distancing and face coverings; and 7) engagement of industry groups and community based organizations for vulnerable populations. (Date added to CDM list: July 8, 2020)

› Orange County

Orange County (has variance) is experiencing an increase in hospitalization. Drivers of this include: a) community transmission from gatherings, b) workplace transmission, c) outbreaks in non-medical congregate livings such as assisted living facilities, memory care facilities, etc. Orange County's key action steps to address concerns include: 1) collaborating with cities and the business community to increase public messaging on the importance of social distancing, not gathering, and mandate face covering. 2) increase testing sites and education outreach in communities where positive cases are high; and, aggressive targeted educational outreach to ethnic communities, 3) working with hospital and health systems to monitor and understand hospitalizations and prepare for the surge, 4) implementation of hospital criteria for shifting to Crisis Care Strategies (surge plan activations), 5) prioritizing medical resource distribution to hospitals most burdened with COVID-19 patients. 6) monitoring positivity rate among those tested to ensure that there isn't a significant increase that may signal more community transmission, 7) contracting with community-based organizations to provide outreach to specific ethnic groups; share messaging about face coverings and other prevention techniques along with the importance of testing; provide necessary supports for social determinant of health needs, 8) providing infection prevention expertise to assist skilled nursing facilities and other congregate care facilities on infection control practices and proper use of PPE. (Date added to CDM list: June 29, 2020)

› Placer County

Placer County (has variance) is experiencing increased hospitalizations and limited hospital capacity. Placer County is also experiencing an increasing trend in disease transmission. Drivers of increased disease transmission include large households where staying away from others while ill is difficult, community and extended family gatherings, and indoor work environments where physical distancing is difficult. The rising number of cases of COVID-19 in Placer County as well as in neighboring counties are driving an increase in hospitalizations. Placer County's two largest hospitals lie on the Placer-Sacramento County border and provide care to residents of both counties, as well as other neighboring counties. Key actions to address the situation include 1) Working with community-based organizations to provide guidance and support to residents of large households where isolation is difficult; 2) Public messaging on the importance of not gathering with non-household members; 3) Outreach to the business community regarding the importance of temperature checks, symptom screenings, face coverings for staff and customers, and supporting ill and exposed employees to stay home; and 4) Working with hospitals to review and, if necessary, implement surge plans. (Date added to CDM list: July 9, 2020)

› Riverside County

Riverside County (has variance) is experiencing elevated disease transmission. Drivers of this include: 1) outbreaks at state prisons and skilled nursing facilities (SNFs), 2) potential transmission at public protests with large numbers of people in close proximity without face coverings, 3) in-county patient transfers from Imperial County, 4) patients seeking care from Northern Baja California and traveling along SR-86 corridor into Coachella Valley and 5) general increases in local gatherings. Key action steps to address concerns include: 1) close monitoring of data; 2) increase testing volume at county and state sites; 3) continue SNF outreach and support and implement Quick Response Task Force assistance for high risk facilities; 4) expand contact tracing workforce; 5) increase public messaging on the importance of personal protection

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measures; and 6) coordination and communication between the local health department, CDPH, and California Department of Corrections and Rehabilitation (CDCR) to mitigate outbreaks at state prisons. (Date added to CDM list: June 17, 2020)

➤ Sacramento County

Sacramento County (has variance) has experienced the possibility of increasing hospitalization. Drivers of this include community transmission due to holiday gatherings amongst large families. Key action steps to address concerns include (1) increase of public messaging on the importance of social distancing, not gathering, and mandate face covering, (2) more testing sites and education outreach in communities where positive cases are high, and (3) targeted educational outreach to ethnic communities. (Date added to CDM list: June 24, 2020)

➤ San Benito County

San Benito County (has variance) is experiencing elevated disease transmission. Drivers of this include an increase in outbreaks and clusters related to 1) household contacts, 2) social gatherings and 3) businesses in the county. Actions to address these concerns include: 1) working with businesses on health check screenings and NPI enforcement; 2) monitoring increasing case investigators and contact tracing; 3) increasing testing and media campaigning for those that are symptomatic; and 4) working with external partners to improve efficient case reporting and processing. (Date added to CDM list: July 8, 2020)

➤ San Bernardino County

San Bernardino County (has variance) is experiencing elevated disease transmission and increasing hospitalizations. Drivers of this include: 1) community transmission from gatherings, 2) workplace transmission, 3) transmissions at state prison, state hospital, county jails and academy, and skilled nursing facilities, 4) transfer of patients from Imperial County. Action steps to address these concerns include: 1) expanding community testing and testing among priority populations; 2) coordination and communication between local health department, CDPH, and California Department of Corrections and Rehabilitation (CDCR) to mitigate outbreaks at state prisons; and with CDPH for outbreak mitigation at the State Hospital, 3) providing SNF Taskforce support and Infection Prevention expertise to support SNFs; 4) increasing public messaging and education on the importance personal protection measures including face coverings and personal responsibility; 5) working with labs and employers to increase turn-around time from diagnosis to isolation and initiation of case contacting; and 6) increasing number of contact tracers. (Date added to CDM list: June 21, 2020)

➤ San Diego County

San Diego County (has variance) has an elevated case rate due to widespread COVID-19 disease transmission. County has taken following key actions to mitigate the situation 1) closing restaurants, bar, and breweries to decrease access, exposure, and gatherings; 2) requiring customers of these venues to be seated at socially distanced tables; 3) encouraging outdoor dining, which contributes to a lower risk of infection; 4) encouraging the younger population to use face coverings and practice social distancing through outreach to universities, colleges, transitional age youth, and other community youth organizations; and 5) working with industry associations to conduct education and outreach. County has taken the following key actions to manage the situation 1) continuing to onboard sufficient case investigators and contact tracers to prevent additional community transmission; 2) increasing testing sites to reach vulnerable and younger populations; 3) deploying County strike teams to conduct site assessment at skilled nursing facility (SNFs), non-SNFs/long-term care facilities, and community setting outbreaks; and 4) evaluating and modifying efforts to ensure testing is available throughout the community for all populations. Lastly, county has taken the following key actions to monitor the situation include 1) monitoring the positivity rate among those tested to ensure that there is not a significant increase that may indicate more community transmission; 2) continuing to work with congregate care facilities to implement infection prevention and control measure and assist with education and testing; and 3) continuing to monitor, identify and assess impacts due to local demographics. (Date added to CDM list: July 3, 2020)

San Francisco County

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San Francisco County (has variance) is experiencing a significant increase in SARS-CoV-2 infections and COVID-19 hospitalizations. Since early to mid-June San Francisco case rates, positivity proportion, and hospitalizations have more than tripled. The Latinx community continues to be the most impacted, but infections have increased in other racial/ethnic groups, in low-income neighborhoods, in younger persons, in lower-wage essential workers, and across the city. Although the county currently has a variance, they paused their reopening two weeks ago. County believes drivers of increases in infections are due to multiple causes including (1) increases in economic activity, movement, and mixing, (2) increases in social gatherings, (3) increases in mixing opportunities for persons from different households, (4) limited compliance to indoor worksite requirements for face coverings, physical distancing, hand hygiene, and environment disinfection, and (5) continuing infections in low-income crowded housing and among lower-wage essential workers. We are developing a comprehensive plan to (a) expand community outreach, engagement, and mobilization with an equity focus, (b) expand education, support, and enforcement of worksites to comply with health and safety requirements, (c) expand and prioritize community testing, (d) expand case investigation and contact tracing, and (e) improve our surveillance and epidemiology efforts to identify the strongest risk factors for infection, and to evaluate our containment efforts. County plans to follow state directives and guidance. (Date added to CDM list: July 17, 2020)

› San Joaquin County

San Joaquin County (has variance) is experiencing increasing hospitalization and limited hospital capacity. Drivers of this include 1) community transmission due to gatherings, 2) workplace transmission followed by household transmission; 3) SNF outbreaks; and, 4) increase in widespread testing. Action steps to address concerns include: 1) increase public messaging on the importance of personal protection measures and the risks involved with mass gatherings in multiple languages; 2) continuing to provide Infection Preventionists expertise to assist SNFs on infection control practices, ensure baseline testing and proper use of PPE. (Date added to CDM list: June 7, 2020)

› San Luis Obispo County

San Luis Obispo County (has variance) has an elevated case rate due to widespread COVID-19 disease transmission. Drivers of the increase in cases include: 1) Re-opening of many business sectors that allow for more community mingling; 2) Increases in Community/Family gatherings; 3) Increase in certain community sector perception that the pandemic is not serious. County has taken following key actions to mitigate the situation 1) Increased testing to identify outbreaks and infected persons; 2) Engagement and enforcement to increase distance between patrons of bars and restaurants; 3) Increased social messaging to the public to encourage social distancing, and increase the understanding of the dangers of increased disease transmission; 4) Continuing to onboard case investigators, contact tracers and support staff to prevent additional community transmission; 5) Deployment of County strike teams to conduct site assessment at skilled nursing facility (SNFs), non-SNFs/long-term care facilities, and community setting outbreaks; 6) Offer rapid turn-around testing to identified contacts of known cases. (Date added to CDM list: July 13, 2020)

› San Mateo County

San Mateo County (has variance) is experiencing an elevated case rate that exceeds the State threshold. The County sees roots of community transmission related to social gatherings without sufficient physical distancing and wearing of facial coverings, as well as higher exposure for residents performing work that involves person-to-person contact and crowded housing conditions that make home isolation difficult. Key actions to address the increase include: 1) expanding the case and contact investigation team that is following up on every COVID-19 positive case and related contacts to assure safe quarantine and isolation in order to break the chain of transmission; 2) developing strategies to strengthen support for those facing barriers in safely isolating or quarantining; 3) continuing to work with hospital system partners and our Medi-Cal managed care plan partner to monitor and understand hospitalizations, support effective pathways to appropriate levels of care and prepare for surge, 4) continuing to provide infection prevention expertise and specimen collection and test processing support to assist skilled nursing facilities and other congregate care facilities in protecting all residents and staff; 5) continuing to analyze the epidemiology of local spread to inform additional prevention strategies; 6) reinforcing community-wide messaging about the importance of key behaviors individuals can take (wearing facial coverings, maintaining physical distance, avoiding gatherings, washing hands and not touching one's face) to keep themselves and the community safe; and 7) tailoring communication and outreach to the most impacted populations and communities to strengthen trust and engagement in case and contact investigation. The County continues to partner with

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cities, schools and community-based organizations and leaders to advocate for the longer-term policy changes that can prevent COVID-19 from exacerbating the burdens shouldered by the lowest income residents and populations of color. San Mateo County also continues to work with the State's decisions regarding reduced testing capacity at the Project Baseline sites and revised testing prioritization criteria that contribute to an increased positivity rate. (Date added to CDM List: July 29, 2020)

› Santa Barbara County

Santa Barbara County (has variance) is experiencing increasing hospitalization related to increasing cases in our north county region. Drivers of this increase include 1) community transmission due to gatherings, 2) workplace transmission and household transmission; 3) SNF outbreaks; and 4) increase in widespread community testing. Key action areas to address concerns include 1) engage community leaders, stakeholders, and members in taking actions to prevent community transmission; 2) continue prevention messaging through multiple mediums; 3) continue to enhance contact tracing; and 4) continuing to provide Infection Preventionists expertise to assist SNFs on infection control practices, ensure baseline testing, and proper use of PPE. (Date added to CDM list: June 15, 2020)

› Santa Clara County

Santa Clara County (has variance) is experiencing increased hospitalization. Drivers of increased hospitalization of COVID-19 patients may include: 1) increased transmission in the community; 2) patient transfers from outside the county; 3) patient transfers from long term care facilities; 4) /or increased transmission among residents or individuals from neighboring counties who seek care in hospitals in Santa Clara County. Although the percentage change in hospitalizations shows an increase, the increase in the absolute number of patients hospitalized is still low relative to the size of the population in Santa Clara County and is low relative to the number of hospital beds available in the County. Key actions to address the increase include: 1) coordination and communication between the local health department and hospitals in the county experiencing increases to identify underlying causes; 2) data collection from hospitals that serve large proportions of out-of- jurisdiction patients to identify county of residence; 3) coordination and communication between the local health department and long term care facilities to support these facilities with outbreak detection and control as well as care for residents with confirmed COVID-19 when appropriate to avoid transfer to the hospital; and 4) increased public messaging, in multiple languages, on harm reduction, including the importance of social distancing, consistent use of face coverings and the risks involved with mass gatherings. (Date added to CDM list: July 12, 2020)

› Santa Cruz County

Santa Cruz County (has variance) experienced a sharp upward trend in case rate in early July after having had success in "flattening the curve" for months. Along with the increased case rate, hospitalization numbers and test positivity have increased. South County communities are most impacted, with the Latinx population disproportionately impacted. County believes drivers of increases in infections are due to multiple causes including (1) increases in economic activity, tourism, and movement, (2) increases in social gatherings, (3) increases in mixing opportunities for persons from different households and different communities, (4) compliance fatigue around requirements for face coverings, physical distancing, hand hygiene, and environment disinfection, and (5) increasing infections in low-income crowded housing and among lower-wage essential workers. We have developed a collective impact approach across the County to expand community outreach, engagement, and mobilization with an equity focus. In addition, plans are in place to (a) expand education, support, and enforcement of guidance and orders, (b) expand and prioritize community testing, (c) expand case investigation and contact tracing, and (d) improve surveillance and epidemiology efforts to identify the strongest risk factors for infection and to evaluate containment efforts. County plans to follow all State directives and guidance. (Date placed on the CDM list: July 25, 2020).

› Solano County

Solano County (has variance) is experiencing increasing hospitalization. Drivers include a large outbreak among farm workers in the vineyards in Sonoma and Napa who are residing in Solano, as well as an ongoing surge in cases related to family gatherings and other social gatherings on the weekends. The farm worker cases total many dozens over the past

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one to two weeks, and the close-contact cases appear to have begun with weekend activities in early May and are continuing to the present. The large number of such cases overall is resulting in an increase in hospitalized cases. These cases are not at present resulting in a strain on the hospitals or in ICU admissions but the county is monitoring this closely. County reports that hospitals in their jurisdiction have multiple levels of surge capacity for hospitalizations and for ICU admissions, if these become necessary. Key action steps include: working with the neighboring counties and with the vineyard management companies to implement social distancing measures; 2) educating the workers themselves (using Spanish interpreters) on social distancing measures; 3) providing appropriate cautionary messages through social media and the press about the risks of gatherings, not social distancing and not using personal protection measures. (Date added to CDM list: June 29, 2020)

› Sonoma County

Sonoma County (has variance) is experiencing increasing hospitalization. Drivers of the situation include outbreaks in skilled nursing facilities (SNFs) and residential care facilities for the elderly, and rising case rates, particularly in the Latinx community, due to exposure of essential workers, household clusters, increasing workplace and community transmission with the state's reopening, and large social gatherings. Sonoma County's key actions to address concerns are:

1) restructuring of SNFs to allow for quarantine/isolation of PUIs and positive cases to avoid further spread, 2) field surveillance and testing at congregate care sites, 3) formation of a Latinx community workgroup, pop-up testing sites in Latinx community locations with highest rates of case transmission, and partnerships with community organizations and health partners to provide culturally sensitive case management and connection to resources, 4) building contact tracing and case investigation capacity and hiring of additional bilingual/bicultural staff, 5) public messaging and education on the importance of hygiene, social distancing, not gathering, and facial coverings, 6) outreach and support to businesses around implementing safety measures, 7) building alternate care site capacity to expand health care capacity and non-congregate care site for isolation/quarantine, and 8) securing PPE supplies in preparation for possible shortages in hospitals and skilled nursing facilities. (Date added to CDM list: July 10, 2020)

› Stanislaus County

Stanislaus County (has variance) is experiencing increasing hospitalization. Drivers of this include an 1) increase in outbreaks and clusters related to family gatherings, businesses (in and out of county) and healthcare facilities; 2) the hospital being a regional hospital accepting patients that are residents outside the county; 3) decreased attention to personal protection measures such as face coverings and social distancing. Action steps to address concerns include 1) prioritizing rapid contact tracing, isolation and quarantine by public health staff for new positive cases; 2) continual monitoring of tests being conducted in the county and relocating sites, when necessary, to more densely populated and higher incidence areas, 3) continually offering businesses resources and technical assistance to comply with local requirements; 4) closely monitoring healthcare facilities and continuing to provide Infection Preventionist expertise to assist SNFs with planning and response; 5) retaining trained employees from other county departments to continue to assist in contact tracing; 6) partnering with community-based organizations serving minorities for outreach, education, and mobile testing; and 7) increased messaging including a public media campaign to promote face covering and social distancing. (Date added to CDM list: June 17, 2020)

› Tulare County

Tulare County (has variance) is experiencing elevated disease transmission. Drivers of this include outbreaks in skilled nursing facilities and work places and barriers to preventing transmission within households. Increased hospitalizations and ICU utilization have been related to multiple conditions other than COVID19. Key action areas to address concerns include 1) continue to engage with SNFs and businesses and with ongoing collaboration with Licensing and Certification and the HAI program; 2) continue to enhance contact tracing; and, 3) continue public messaging through multiple mediums about actions to prevent community transmission. (Date added to CDM list: June 5, 2020)

› Ventura County

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Ventura County (has variance) is experiencing increasing hospitalizations related to increasing cases in our county. Drivers of this increase include: 1) community transmission due to gatherings; 2) essential workplace transmission followed by household transmission; 3) transmission in overcrowded housing; 4) SNF outbreaks; and 5) increase in widespread community testing through our drive-thru testing locations. Key action areas to address concerns include: 1) engage community leaders, stakeholders, and members in taking actions to prevent community transmission; 2) continue prevention messaging through multiple mediums including visiting workplaces/residential complexes in areas where we have increased community transmission; 3) continue to enhance case investigation and contact tracing efforts; and 4) continuing to provide Infection Preventionists expertise to assist SNFs on infection control practices, ensure baseline testing, and proper use of PPE. (Date added to CDM list: June 24, 2020)

› Yolo County

Yolo County (has variance) is experiencing elevated disease transmission and limited hospital capacity. Drivers of this include: 1) community transmission due to social and family gatherings; 2) workplace transmission; and 3) an increase in widespread testing at skilled nursing facilities. Action steps to address concerns include: 1) increase in disease investigation and contact tracing; 2) ongoing support for long-term care and congregate community facilities on infection control practices; 3) public messaging on social distancing and face covering mandates; 4) targeted educational outreach to religious groups and Latino communities; and 5) increased enforcement of mandated health and safety measures. (Date added to CDM list: July 8, 2020)

› Yuba County and Sutter County

Yuba County and Sutter County (has variance) are experiencing elevated disease transmission. Drivers of this include 1) household clusters relating to friend and family gatherings 2) workplace transmissions 3) 40% are unknown due to cases not able or not willing to provide source of exposure. Actions to address these concerns include 1) Strong messaging campaign to avoid large gatherings 2) aggressive outreach to the Latino community who have experienced a disproportionate burden of cases and hospitalizations 3) outreach and education to the Punjabi community given rising cases in this population in the past several weeks 4) Information campaign to the public regarding the importance of working with public health in regards to contact investigation and tracing as much as possible 5) hiring two additional teams of contact investigators and contact tracers 6) continue to aggressively work on education and outreach to businesses in the community. (Dates added to CDM list: July 11 and July 9, 2020, respectively)

Links:

- [County Data Monitoring Overview](#)
- [County Data Chart](#)
- [Step 1: Active Data Monitoring](#)
- [Step 2: Targeted Engagement with CDPH](#)
- [Step 3: Reinstigate Community Measures](#)

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- b. In accordance with CDC guidance, avoid sharing of electronic devices, toys, books, and other games or learning aids.
- c. Limit stuffed animals and any other toys that are difficult to clean and sanitize.
- d. In accordance with CDC and California Department of Pesticide Regulation (CDPR) guidance, and in consultation with local public health officials, develop a plan that includes:
 - i. A [safe and correct application](#) of disinfectants using personal protective equipment and ventilation recommended for cleaning.
 - ii. Disinfecting surfaces between uses, such as:
 - 1. Desks and tables
 - 2. Chairs
 - 3. Seats on bus
 - 4. Keyboards, phones, headsets, copy machines
 - iii. Disinfecting frequently—at least daily—high-touch surfaces, such as:
 - 1. Door handles
 - 2. Handrails
 - 3. Drinking fountains
 - 4. Sink handles
 - 5. Restroom surfaces
 - 6. Toys, games, art supplies, instructional materials
 - 7. Playground equipment
 - iv. When choosing disinfecting products, using those approved for use against COVID-19 on the Environmental Protection Agency (EPA) [List N: Disinfectants for Use Against SARS-CoV-2](#) and follow product instructions.
 - 1. To reduce the risk of asthma related to disinfecting, programs should aim to select disinfectant products on the EPA List N with asthma-safer ingredients (hydrogen peroxide, citric acid, or lactic acid).
 - 2. Avoid products that mix these ingredients with peroxyacetic acid, sodium hypochlorite (bleach), or quaternary ammonium compounds, which can cause asthma.
 - 3. Use disinfectants labeled to be effective against emerging viral pathogens, following label directions for appropriate dilution rates and contact times.
 - v. When cleaning, airing out the space before children arrive. Plan to do thorough cleaning when children are not present.
 - vi. Closing off areas used by any sick person and not using before cleaning and disinfection. To reduce risk of exposure, wait 24 hours before cleaning and disinfecting. If it is not possible to wait 24 hours, wait as long as possible.
- e. Make a Plan for Adequate Outdoor Air Circulation
 - i. In accordance with CDC guidance, ensure that ventilation systems and fans operate properly and increase circulation of outdoor air as much as possible by opening windows and doors and other methods. Do not open windows and doors if doing so poses a safety or health risk to children using the facility (for example, allowing pollen in or exacerbating asthma



symptoms). Maximize central air filtration for heating, ventilation, and air conditioning (HVAC) systems (targeted filter rating of at least MERV 13).

- f. Take steps to ensure that all water systems and features (e.g., drinking fountains, decorative fountains) are safe to use after a prolonged facility shutdown to minimize the risk of Legionnaires' disease and other diseases associated with water.
- g. Keep each child's belongings separated and in an individually labeled storage container, cubby, or area. Send belongings home each day to be cleaned.



Employee Issues. Engage employees on COVID-19 plans and provide necessary training and accommodations.

- a. Revisit existing bargaining agreement.
 - i. Engage the exclusive representatives of labor groups and work collaboratively in tailoring bargaining agreements to address the relevant employee issues in this checklist. Ideally, these are matters that would be resolved as part of the reopening planning process and prior to school starting so as to provide clarity for reopening.
 - ii. Create a plan for future bargaining that may be necessary as additional issues arise.
- b. Staffing Ratios
 - i. Ensure staffing levels are sufficient to meet unique facility cleanliness, physical distancing, student learning, and health and safety needs to address COVID-19.
 - ii. Consider rolling staff cohorts to meet needs and avoid overwork.
- c. Develop and provide staff training or utilize state-provided training on:
 - i. Disinfecting frequency and tools and chemicals used in accordance with the [Healthy Schools Act](#), [CDPR guidance](#), and Cal/OSHA regulations. For staff who use hazardous chemicals for cleaning, specialized training is required.
 - ii. Physical distancing of staff and students.
 - iii. Symptom screening, including temperature checks.
 - iv. Updates to the Injury and Illness Prevention Program (IIPP).
 - v. State and local health standards and recommendations, including, but not limited to, the following:
 - 1. Proper use of protective equipment, including information on limitations of some face coverings that do not protect the wearer and are not PPE but can help protect people near the wearer. Face coverings do not replace the need for physical distancing and frequent handwashing. Cloth face coverings are most essential when physical distancing is not possible. Also include training on removal and washing of cloth face coverings.
 - 2. Cough and sneeze etiquette.
 - 3. Keeping one's hands away from one's face.
 - 4. Frequent handwashing and proper technique.
 - 5. Confidentiality around health recording and reporting.
 - vi. Training for school health staff on clinical manifestations of COVID-19, pediatric presentations, and [CDC transmission-based precautions](#).
 - vii. Training on trauma-informed practices and suicide prevention.



- d. Designate a staff liaison or liaisons to be responsible for responding to COVID-19 concerns. Employees should know who they are and how to contact them.
- e. Reasonable Accommodations
 - i. Protect and support staff who are at higher risk for severe illness ([medical conditions that the CDC says may have increased risks](#)) or who cannot safely distance from household contacts at higher risk by providing options such as telework or negotiated change in classification or duties.
 - ii. If reasonable accommodations are not practicable, the LEA should work with the employee to develop a flexible leave plan that endeavors to avoid exhausting the employee's earned leave.



Communication with Students, Parents, Employees, Public Health Officials, and the Community

- a. School leaders should engage stakeholders, including families, staff, and labor partners in the school community, to formulate and implement the plans in this checklist.
- b. Communicate to staff, students, and parents about new, COVID-19-related protocols, including:
 - i. Proper use of PPE/EPG.
 - ii. Cleanliness and disinfection.
 - iii. Transmission prevention.
 - iv. Guidelines for families about when to keep students home from school.
 - v. Systems for self-reporting symptoms.
 - vi. Criteria and plan to close schools again for physical attendance of students.
- c. Target communication for vulnerable members of the school community.
- d. Create a communications plan for if a school has a positive COVID-19 case.
 - i. Address the school's role in documenting, reporting, tracking, and tracing infections in coordination with public health officials.
 - ii. Notify staff and families immediately of any possible cases of COVID-19. Review legal responsibilities and privacy rights for communicating about cases of the virus.
 - iii. Provide guidance to parents, teachers, and staff reminding them of the importance of community physical distancing measures while a school is closed, including discouraging students or staff from gathering elsewhere.
 - iv. Provide information to parents regarding labor laws, Disability Insurance, Paid Family Leave, and Unemployment Insurance.
 - v. Advise sick staff members and children not to return until they have met CDC [criteria to discontinue home isolation](#).
 - vi. Inform those who have had [close contact](#) with a person diagnosed with COVID-19 to stay home and self-monitor for symptoms and to follow [CDC guidance](#) if symptoms develop. If a person does not have symptoms follow appropriate CDC guidance for [home isolation](#).



INSTRUCTIONAL PROGRAMS

INSTRUCTIONAL SCHEDULING MODELS

As schools plan to reopen, the instructional schedule model chosen will become the foundation of a student's and family's future experience in their school community. There are many considerations and decision-making points LEAs will need to consider in their planning. First and foremost, LEAs planning for their instructional schedule model need to focus on ensuring student learning and competency development while also considering a student's social-emotional well-being.

We understand there are needed statutory changes to accommodate the instructional schedule model examples identified in this document. These instructional schedule model examples do not contemplate California's current instructional time, attendance for apportionment rules, and audit guidelines.

As schools reopen and considerations are made to meet the health and safety guidelines, the following are some instructional schedule model options and essential planning questions and action steps for LEAs to consider. LEAs should enter into their planning with a flexible approach, understanding that they may start the school year with one instructional schedule model and, as new information becomes available about health and safety, they may transition to a different model. Guidance on standards for quality distance learning is being developed and will be available on the CDE website.

No matter the instructional schedule model, please continue to work to eliminate the barriers to student success that existed before the closure. We have an unprecedented opportunity to improve how we care for and educate each child. Let's work to enhance the public good of our public schools as we implement more student-centered designs. These suggestions are only a few of the options that may be considered, so please work closely with your community to develop the list of essential planning questions that build on your assets and address your local needs.

Instructional Scheduling Model Options

EXAMPLE A: TWO-DAY ROTATION BLENDED LEARNING MODEL

Students report to school on two designated days based on grade level for in-person instruction (example: Monday/Wednesday for grade levels K–3, Tuesday/Thursday for grade levels 4–6). On the other days, students are engaged in enrichment opportunities aligned with academic goals established by the school through various programs, either on site or with community partners, that are coordinated by school instructional staff. This could mean small group instruction for certain student groups, such as English learners receiving designated English language development. Physical education, health, and other content area teachers, as well as administrators and teachers on special assignment, could be included to reduce



student–teacher ratios. On Fridays, all students would be engaged in distance learning opportunities and teachers in collaborative planning and/or professional learning opportunities. An important consideration is maximizing pre-existing student–teacher relationships. This could include students returning to teachers they had before the closure, creating advisory groups that build on positive relationships, or instituting looping to ensure students know who they will be working with for the next two or more years.

EXAMPLE B: A/B WEEK BLENDED LEARNING MODEL

Half of the student population attends in-person learning opportunities four full days per week while the other half is engaged in distance learning opportunities. The students would alternate each week. All grade bands would be included. The instructional program would be sequenced to accommodate both asynchronous and synchronous learning opportunities for students. One day a week, all students would be engaged in distance learning while teachers would use the time for collaborative planning and professional learning. LEAs may also decide to have certain grade levels attend only in-person instruction while other grade levels engage in only distance learning instruction.

EXAMPLE C: LOOPING STRUCTURE

For schools serving grade levels TK–8, there is an opportunity for students to stay with the same teacher in cohorts for multiple grade levels. Looping provides opportunities for improved relationships between students and teachers, more targeted and efficient instruction, and a higher attendance rate. For example, a teacher and student cohort would stay together for first and second grade, increasing the opportunity for literacy rates on or above grade level. Teachers and students staying together over multiple grade levels can build a better understanding of health and safety, decreasing risks to students and staff.

EXAMPLE D: EARLY/LATE STAGGERED SCHEDULES

Grade level bands would have staggered start and dismissal times, such as AM/PM rotations (for example, TK–2, 3–5, 6–8, 9–10, 11–12). The bell schedule would accommodate multiple recesses and lunch periods and multiple meal distribution points, along with time for students to engage in handwashing before entering classrooms. Students could be in a homeroom with teachers rotating to decrease student congregation in hallways.

Essential Planning Questions/Action Steps for LEAs

- How will the LEA engage with their education partners and staff in collaboratively making the decision of choosing an instructional schedule model?
- How will the LEA create a process for evaluating and adapting models throughout the year with all educational partners and staff?
- As an LEA is contemplating different instructional schedule models, a review of the LEA's infrastructure and resources should be considered in the decision-making process. For example:
 - What technology access and resources are available for students and families?
 - What technology support resources are available for students and families?



- What technology policies are in place to protect private and sensitive student information? Are policies current and compliant with California data privacy laws?
- How does a survey of physical buildings and space inform the instructional schedule model decision?
- How will the LEA survey needs of staff and provide aligned professional learning?
- How will all students' needs be addressed within the instructional schedule model?
- What instructional and social–emotional supports will students and families need?
- How will you measure success and effectiveness of the model?
- What model are other schools in the area choosing to help with consistent and coherent approaches to support families?
- Conduct a survey or review on current teacher/staff, student, and family needs. Review data and determine LEA strengths, barriers, and capacity to support identified needs.
- What is the communication plan for reopening with a new instructional schedule model?
 - LEAs should consider communication for different audiences and critical messages, including
 - ▶ how messages will be delivered and
 - ▶ how to improve the efficacy of communication by identifying and addressing potential language barriers, cultural barriers, and disability accommodations or supports necessary for communicating to families and other audiences.

INSTRUCTIONAL PLANNING

As LEAs choose the instructional schedule model that best fits the needs of their students and families, considerations for intentional planning of instruction will be key to a successful implementation. Instructional planning should include time for general and special education staff to collaboratively plan and learn from each other. To support this collaboration, a system to learn in real time how the learning environment is or is not working for students is essential. Ideally, this feedback loop would allow for school leaders to see how well students are engaged in their learning, whether the instructional supports and accommodations are working, and whether the material is relevant and accessible to the student.

Essential Questions for Consideration

- What planning time and infrastructure will teachers and staff need to discuss real-time feedback from students?
- What planning resources will staff need to work together to design and lead changes in their classrooms?
- What data will be collected as a feedback loop on students' experiences to inform planning?
- How will the LEA ensure students with disabilities and other special populations are fully integrated into every aspect of preparation and participation of the instructional model?
- How will Universal Design for Learning (UDL) be utilized during instructional planning time?
- How will the teacher teams determine essential state standards to focus learning?
- How will staff engage with the student to figure out learning barriers and plan to find innovative ways to meet their needs?



- What academic and social–emotional supports or interventions are provided to those students who are struggling with the instructional program model?
- How will the LEA ensure not only the needs of all students are addressed, but that the decision made will benefit all students, staff, and families?

COLLABORATION AND ASSESSMENT

In order to inform instruction and gauge student learning, it is important to consider and solidify a systematic cycle of assessments including initial screenings and formative and summative assessments. For data to lead to meaningful change in student outcomes, teachers and administrators need designated collaboration time to analyze data, identify shifts and changes in instruction to meet student needs, implement intervention strategies, and assess the effectiveness of instructional strategies. This section assists district leadership and school boards as they make reopening determinations related to using assessments to inform instruction for all students, including those with unique learning needs such as students with disabilities, English language learners, students placed in foster care, and students experiencing homelessness.

Because parents may have children enrolled in multiple schools across districts, it is vital that communication protocols, online learning platforms, and expectations are coherent and consistent. This also engages parents as partners in learning.

Curriculum Frameworks

California’s curriculum frameworks are guidance documents for implementing the content standards adopted by the State Board of Education. The standards themselves are a resource to inform teachers, administrators, and parents of the skills and knowledge that students should master and learn at each grade or proficiency level. All curriculum frameworks include information on how to ensure access and equity for all students. Much of this guidance includes how to utilize the Universal Design for Learning (UDL) practices in instructional planning and delivery.

INITIAL SCREENING/DIAGNOSTIC ASSESSMENTS

Purpose: Diagnostic assessments are used to identify specific areas where instruction or intervention may be needed to improve student learning.

Due to interrupted instruction caused by COVID-19, local educational agencies (LEAs) should consider scheduling universal screenings at a variety of intervals. For example, diagnostic assessments can be administered at the beginning of the school year (or in summer if appropriate or feasible).

FORMATIVE ASSESSMENTS/PROGRESS MONITORING

Purpose: Formative assessments and progress monitoring take place during the lesson and provide actionable information about students’ learning status relative to the desired lesson goal. Teachers can use data from formative assessments immediately to adjust their instruction and ensure students progress towards learning goals.



Essential Questions

- Are there common diagnostic, formative, and summative assessment tools across the district/site for comparative analysis to identify specific targeted student learning needs?
- If assessments must be given at home, how have students been prepared for and given opportunity to practice the protocols for administration? If parent support or guidance is needed, how have they been prepared?
- Is there a clearly defined multitiered system of support that includes guidance for implementing Tier 1 strategies before offering Tier 2 interventions? When and how to offer Tier 2 and Tier 3 supports?
- Do staff have structured collaboration time to engage in improvement cycles including reviewing student assessments, planning instructional shifts and strategies based on data, establishing clear outcome goals, debriefing the lesson as a team, and repeating the process? What might this look like in a virtual setting?
- How will districts ensure appropriate accommodations are made for students?

Considerations

- Consider a data management platform to collect, house, and disaggregate local data on a regular basis.
- Consider developing a regularly scheduled time for grade-level teams and staff meetings to engage in cycles of inquiry around student data. Rural districts might use this opportunity to connect grade-level teams virtually for collaboration.
- Establish a common protocol for regular and consistent communication to parents.
- Develop a plan to meet the social–emotional needs of the student prior to administering an assessment. Examples include greetings and a warm-up game (with physical distancing) to ease anxiety, prior to asking students to demonstrate learning. If diagnostic testing has not been widely implemented in previous years, staff administering the assessments should be sure to clarify the purpose of diagnostic assessments.
- Interventions may include a regularly scheduled 30-minute session with an intervention provider or specialist through video conference, scaffolding for specific task assignments (e.g., an outline or sentence starters for written responses), pre-highlighted texts, more frequent feedback or check-ins, time management supports, or maintaining a daily written agenda. Students in upper grade levels may be offered guidance for monitoring their own progress and implementing interventions independently, if appropriate. For example, students can implement supports like setting their own timer to chunk assignments, keeping a daily agenda that outlines tasks and goals, or creating a playlist or active routine to help with stress or anxiety management.
- Formative assessment examples may include collecting exit tickets through a digital platform at the end of each class session, whether online or in person; using an opener to reinforce skills and check for understanding on concepts recently taught; giving students opportunities to share what is working and what is not working; or continuing to provide ample opportunity for discussion and meaningful content interaction with students through high-order thinking questions. As students are given opportunities to participate in engaging activities, be sure to provide students with ample time to think and develop a solid response, as appropriate.
- When reviewing all assessment data, focus on a continuous improvement learning model.



- Provide professional learning for teachers on diagnostic assessments.
- Existing learning management systems can also provide opportunities to assign students quiz-style assessments that they can complete synchronously (in real time through distance learning) or asynchronously (learning same material at different times/locations). Students can be permitted to complete the assessment multiple times to allow for reteaching.
- Learning goals should be clearly established and explicitly communicated to students. Providing students with an essential question or learning goal at the beginning of instruction, and frequently referring back to the question or goal, provides transparency for students. In a virtual environment, this can include prominently posting the learning goal or essential question on a teacher's web page, asking students to keep a learning log to track their key learnings throughout a lesson or unit, or weekly check-ins that require students to respond to the essential question using information from the week's lessons and activities.
- Consider using choice boards, which provide students with a variety of options that demonstrate learning and allow students to revise or resubmit work after reteaching or receiving feedback. Feedback should be timely, specific, and actionable, either through written or oral communication, videos or sound recordings, or student-to-student feedback in online breakout sessions.
- Consider working with students to develop a portfolio (online or paper), selecting their work products to put in an online file, and submitting reflection videos.

Resources

See [Appendix B](#) for Instructional Programs resources.

SOCIAL-EMOTIONAL LEARNING

There is a growing body of research proving that social and emotional learning (SEL) is fundamental to academic success. SEL must be woven into the work of every teacher, in every classroom and every after-school and summer learning program if we truly want to prepare all our students for college and careers. We know the COVID-19 pandemic has created different types of traumatic experiences and high levels of stress for many of our staff, students, and families. This experience emphasizes the importance of social-emotional well-being for all. LEAs will need to have the emotional recovery of students, staff, and families at the forefront of their planning and decision making.

When educators and students practice physical distancing at school or through distance learning, it does not mean they must lose social and school connections. During the COVID-19 response, it is critically important to place adult and student wellness first to establish a positive, safe, and supportive learning environment. Leading with SEL is essential because children need social and emotional support as they, like the adults around them, navigate the unprecedented challenges of alternative learning contexts, and because SEL helps students access academic content through building essential self-management skills, resilience, and connections.

As students return to campus in classrooms adapted to ensure physical distancing, consider how your local education agency might adapt instruction to account for the following:



- Before school starts, how will the LEA engage with families and provide activities to help families feel comfortable on the school campus?
- Before school starts, how will the LEA engage with staff to help them feel comfortable when returning to their classrooms and schools?
- How will the LEA support staff to integrate SEL practices? What types of professional development will be offered and how often will it be available?
- How will school staff provide non-academic-focused check-ins with students?
- How might wearing masks alter our understandings of how individuals are feeling? Consider lessons on alternative ways to communicate feelings.
- How can we positively communicate the need for physical distancing in the classroom? Children naturally hug, touch, etc. when playing. Consider finding ways to positively reinforce good practices.
- How will we handle students' and/or families' varied understandings of physical distancing measures? Consider age-appropriate lessons on the science behind infection. Such lessons may also be leaned upon when addressing students who express concern when seeing other classmates exhibit signs of allergies or other noncontagious symptoms.
- How will students who need additional support to physically distance or who may not be able to wear a mask due to a manifestation of their disability be supported at the school site? What, if any, exceptions can be made in such circumstances?
- How can we support movement to ensure children are expending adequate energy? As student movement from classroom to classroom or recess activities are restricted, there may not be as many opportunities for physical activity during the school day. Consider building in transition activities that allow for movement.
- How do we integrate SEL practices into instructional planning?

As the possibility of a virus resurgence exists, so does the possibility of alternating between virtual learning and in-person classroom activities. The CDE has compiled a list of resources that provide a range of SEL options for educators, administrators, other school leaders, and families/guardians as they support their students during distance learning. To view the list of resources, visit the CDE SEL and Distance Learning web page at <https://www.cde.ca.gov/ci/se/seldistance.asp>. Many of these resources can be used inside and outside the classroom.

The CDE is committed to helping educators learn more about SEL and how to infuse social and emotional supports into every child's school experience. The CDE convened a group of experts from different sectors of the education system to advise the best ways to support SEL implementation. The team developed California's Social and Emotional Learning Guiding Principles ([full version](#) and [summary](#)) and a social and emotional learning [resource guide](#). To learn more about this work, visit the CDE SEL web page at <https://www.cde.ca.gov/eo/in/sociallearning.asp>.



SPECIAL EDUCATION

As LEAs make plans to reopen school sites, they are presented with a unique opportunity—to ensure students with disabilities and other special populations are fully integrated into every aspect of preparation and participation, and to ensure the needs of all students are addressed and the decision benefits all students, staff, and families. As Tucker and Kruse wrote:

We must prepare in a way that is flexible enough to respond to an uncertain future under COVID-19, yet robust enough to ensure that all students—including students with disabilities—have an equal opportunity to succeed over the long term. Doing so can help ensure that equity is built into the foundation of a new era of education.¹

Creating A Universally Designed, Inclusive Plan for Reopening That Plans for the Needs of Diverse Learners and Students with Exceptional Needs

Seize the opportunity to develop an integrated plan for reopening that addresses the needs of students with disabilities from the build. While this is not an exhaustive list, the Special Education Local Plan Area (SELPA) Administrators of California surveyed their membership and provided the following areas to consider as LEAs build their plans to return to school sites.

AREAS IDENTIFIED SPECIFIC TO STUDENTS WITH DISABILITIES (SWD)

The following areas have been identified as overarching areas of concern that should be addressed in reopening planning.

Health and Safety

Personal Protective Equipment (PPE)/Essential Protective Gear (EPG)

- Consider the differing requirements of PPE/EPG for the differing populations of students with disabilities (i.e., for those requiring medical procedures, toileting, lifting and mobility assistance).
- Consider how the LEA will address students with disabilities who refuse or are not able to wear masks.

Planning for Students who are Medically Fragile and/or Immune Compromised

- Clearly define how staff can honor physical distancing recommendations, yet meet student medical, personal, or support needs.
- Determine how adequate space and facilities will be utilized to maintain health and safety of students and staff, especially when tending to individual student medical or personal needs.
- Build in flexibilities to keep students connected and included in the class and school community regardless of how much physical time they are able to attend school. Ensure the ability to quickly pivot to attending class virtually in order to retain some regular connection to teacher and peers.
- Determine any special or unique needs for students with disabilities related to planned district or schoolwide procedures and protocols related to the following:
 - Daily health screening and temperature checks

¹ Eric Tucker and Lindsay Kruse, 2020, “Preparing to Reopen: Six Principles That Put Equity at the Core,” *Getting Smart*. <https://www.gettingsmart.com/2020/05/preparing-to-reopen-six-principles-that-put-equity-at-the-core/>.



- Restroom use as well as diapering and toileting
- Paths of travel
- Use of campuses for recess or recreational activities
- Cleaning and disinfecting

Physical Distancing

- Establish any necessary flexibilities for specific students-with-disabilities populations such as preschool-age, students with extensive support needs, behavioral challenges, etc.
- Establish flexibilities and plan for how to implement physical distancing given lack of space and facility limitations, particularly for children who will struggle with maintaining physical distancing.
- Address potential issues from physical distancing rules that could result in unintended segregation of students on campuses away from peers without disabilities.
- Plan for maintaining access to peers without disabilities and ensure that students remain in the least restrictive environment.
- Determine how the LEA will provide related services in instructional models while staying physically distant.
- Discuss how LEA staff and providers will conduct assessments while practicing physical distancing.



Ensuring a Free Appropriate Public Education (FAPE) under the Individuals with Disabilities Education Act

- Work with each family and student to determine what FAPE looks like for each student and family during COVID-19. It may be different than the individualized education program (IEP) developed pre-COVID-19.
- Use the LEA model(s) for all students as the basis for establishing FAPE.
- Ensure children with disabilities are included in all offerings of school education models by using the IEP process to customize educational opportunities and provide supports when necessary.
- Use annual IEP to plan for traditional school year and while not required, it is suggested LEAs include distance learning plans or addendums to address distance learning needs during immediate or future school site closures.

UTILIZING THE IEP AND CONSIDERATION OF FAMILY NEEDS

Utilize and Update Individualized Education Programs (IEPs)

In the early stages of the COVID-19 pandemic, the federal Office of Special Education Programs (OSEP) and CDE provided guidance that IEP amendments were not necessarily required for the immediate change to distance learning. However, the duration and overarching changes to education delivery in many cases will warrant changes to students' IEPs. This ensures that the IEPs account for the local delivery of education as school sites reopen, including contingencies for pivoting in and out of distance learning.



In accordance with the Individuals with Disabilities Education Act (IDEA), each student with a disability has unique needs and it is the purpose of the education system to ensure every student has access to their grade-level standards and makes progress in their education. The IEP is the roadmap for each student with a disability, and in these challenging and evolving times including COVID-19 restrictions, it is critical that the IEP team meets and works with the family to jointly determine what is working for each student in distance learning as well as what accommodations and modality of learning allows the greatest access.

Communicate Openly and Often with Families

Do not underestimate the need to initiate and have ongoing communication with families. Even for those families who switched apprehensively to distance learning, re-engaging and reaching out often and sometimes through multiple avenues is critical to ensure connectedness and support, particularly for families who may be in crisis.

Collaborative, ongoing discussion about an appropriate path forward once school sites reopen for each student, given each student's unique needs and circumstances, is critical to ensuring equitable access and offering of FAPE for students with disabilities. We know every family situation and feeling about the current pandemic are as unique as the needs of the children. Honoring the fears, challenges, diversities, and preferences of families is critical to the success of students with disabilities in reopening our schools.

ENGLISH LEARNERS



School closures will have an increased impact on learning acceleration for the 1.1 million English learners enrolled in California public schools. When schools reopen—whether it is via distance learning, physical attendance, or a blended model—it is important that LEAs continue to ensure the goal of English learners acquiring fluent English proficiency as rapidly and effectively as possible is attained.

Our English learners, like all our students, have had a disruption of their daily lives, have worries about their own families, and have experienced high stress situations. These students will need additional supports to rebalance and refocus on the task of learning and being productive in the school community. The goal remains for English learners to achieve the same rigorous grade-level academic standards that are expected of all students, within a reasonable period of time. To accomplish these goals, all English learners must receive a comprehensive program of designated and integrated English language development (ELD) instruction targeted to their proficiency level, and appropriate academic instruction in a language acquisition program (5 CCR[c][1]).



The California English Learner Roadmap Policy

The Educational Programs and Services for English Learners (EL Roadmap Policy) sets the direction for educating English learners in California. The EL Roadmap Policy provides LEAs with four guiding principles to support and embrace the English learners they serve:

- Principle One: Assets-Oriented and Needs-Responsive Schools
- Principle Two: Intellectual Quality of Instruction and Meaningful Access
- Principle Three: System Conditions That Support Effectiveness
- Principle Four: Alignment and Articulation Within and Across Systems

These principles should continue to guide LEAs in implementing instructional programs for English learners during distance learning and the transition to reopening schools. This includes ensuring that LEAs support English learners' social-emotional well-being. LEAs should ensure that they embrace English learners as the assets they are while also providing them with the support they need to succeed. The same is true for English learner students with disabilities. For dually identified students, a knowledgeable educator should be involved in planning distance learning needs for students with an individualized education program (IEP). The Practitioners' Guide for Educating English Learners with Disabilities is available on the [CDE Educating English Learners with Disabilities](#) web page.

If an LEA is providing remote learning for its students, the LEA must provide language instruction services to English learners. LEAs must continue to provide designated and integrated ELD and have the flexibility to determine how services will be provided to English learners. The LEA can determine where, when, and what students receive in order to continue to make progress toward English language proficiency to meet grade-level academic achievement.

Under state and federal law, there is no required amount of time that must be allocated to English language services. LEAs do have a dual obligation to provide English learners a program designed to overcome language barriers, to address any deficits incurred while learning English. These services may be provided virtually, online, or via telephone.

California schools have over 700 language acquisition programs where students are learning in two languages through dual language or bilingual models, and those should continue to be implemented through the use of technology and support from LEAs that are effectively providing the services. While LEAs may not be able to provide services in the way they normally would during this national emergency, LEAs must make every attempt to continue to provide these services.

As we return to schools, it will be critical to leverage the Local Control and Accountability Plan (LCAP) concentration funds, supplemental federal Title I, Title III, and federal flexibilities on programs and supports to accelerate learning. Engaging parents and the community in this acceleration can be done with a parent liaison who facilitates family engagement. Using these resources helps ensure equipment, internet connectivity, access to the necessary materials, and professional development for teachers of English learners. Title III funds can support dual enrollment for students to be able to complete the A–G requirements or obtain college credit.

School closures and the reopening process may also impact reclassification. If an LEA was not able to administer the English Language Proficiency Assessments for California (ELPAC) to all students during the 2019–20 school year due to school closures, the LEA should follow the most recent guidance provided



by the CDE: LEAs may not exit an English learner from EL status unless the student has demonstrated proficiency (level 4) on the ELPAC. Schools should closely monitor English learners and students who were reclassified as fluent English proficient to evaluate whether students need additional services. An English learners' English proficiency level may have decreased because the student has experienced limited instruction for an extended time during school closures. Therefore, close monitoring is key to ensure that English learners have the opportunity to recover any academic losses incurred during school closures.

Collaboration is key to supporting English learners during distance learning and throughout the transition to reopening schools. Consider practices such as remote instruction, telephone calls, meetings held on digital platforms, online options for data tracking, and documentation of services, supports, and accommodations provided. In addition, an LEA might consider non-technology-based strategies, such as providing instructional packets or assigning projects and written assignments to English learners.



In addition to collaborating with classroom teachers and school, district, and county educators, engaging the parents of English learners remains important during distance learning and school reopening. LEAs have an obligation to ensure meaningful communication with parents of English learners in a language they can understand and to adequately notify parents of the same information about any program, service, or activity that is shared with parents of students who are not classified as English learners. LEAs should translate all mailings and emails to parents to provide access to the information in a language they understand. For parents who are not literate, LEAs may use recorded telephone calls that go to families that include the option to select a language in which to hear the message. Working with parents and offering them the opportunity to be involved in their children's education is key to the students' success at all times, especially during distance learning and the transition to reopening.

Essential Questions That LEAs Need to Consider

- How will designated and integrated ELD be provided?
- How will we support English learners with oral language development?
- How will we engage English learners' families and ensure they receive information and convey information in a language they understand?
- How will we ensure that the social-emotional and physical health needs of English learners are addressed?
- How will we ensure that English learners have the tools needed to engage in the curriculum, including access to technology as well as access to books or assignment packets?



- How will we track English learners' progress and ensure that all current English learners and reclassified students make progress?
- How will we support English learners who are not making progress toward proficiency?
- How will we provide opportunities for home language development for all English learners and ensure that the home language is seen as an asset?
- How will we address the needs of multilingual students and English learners enrolled in multilingual programs?
- How will we ensure that English learners have access to the full curriculum, including ELD?
- How will we provide professional learning opportunities and tools to teachers and paraprofessionals focused on meeting the needs of English learners during distance learning and the transition to reopening schools?

CAREER TECHNICAL EDUCATION

As California begins the process of reopening its schools, special consideration must be given to those that offer programs in career and technical education (CTE). CTE programs and the local educational agencies (LEAs) that offer them need to consider the conduct of instruction, how career counseling should be offered, and the measures required to ensure safety without losing quality work-based learning (WBL) opportunities. For a safe reopening, CTE programs should review the health and safety guidance and checklist as well as guidance for other work sectors that the student may be working in. <https://www.dir.ca.gov/dosh/coronavirus/Health-Care-General-Industry.html>

As schools plan to reopen, reviewing the following 12 essential elements described by the California Workforce Pathways Joint Advisory Committee (CWPJAC) will help create a quality CTE program. These 12 elements are supported by the CWPJAC Guiding Principles. The Guiding Principles and the 12 essential elements are located at <https://www.cde.ca.gov/ci/ct/gi/guidingpps.asp>.

CTE programs are part of the comprehensive educational system and must be held to the same general guidelines set by the LEA. However, due to the nature of CTE programs and the hands-on approach that is needed, additional elements must be considered as schools plan for a safe reopening. Please refer to the CDE Career Technical Education page as a starting point for how current CTE students are being served, at <https://www.cde.ca.gov/ci/ct/>. There are also resources for CTE distance learning at <https://www.cde.ca.gov/ci/ct/dl/>.

CTE Instruction

CTE classrooms often engage students in learning activities that stretch the imagination and require critical thinking as well as experimentation. As such, students need to be prepared to enter the classroom or learning space feeling safe and comfortable. When schools are planning for reopening, they should consider what types of instructional models would best match the CTE program goals and ensure students and staff are engaging in a safe manner according to the health and safety guidelines.

LEAs should consider the following as they move to reopen their CTE classrooms.

- Develop a system to clean all equipment or tools being used using the health and safety guidance as the foundation for their planning. Tools are checked out often during an instructional period and returned at the end of that class. A process should be developed to ensure that all tools are cleaned each time they are returned so that they are ready for the next student or next class.



- In an instructional laboratory such as a shop, equipment is used numerous times during a class period and may need to be sanitized according to the health and safety guidance. Extra time should be spent at the beginning of the year to review typical safety precautions with additional time reviewing special circumstances centered on cleanliness to avoid exposure to COVID-19.
- A process should be developed to ensure all equipment is clean and safe every time a class occurs. Many CTE courses assign tasks to students who assist in cleanup at the end of class, and the students should be trained in all safety processes and procedures. It would be appropriate to assign a student each period to ensure that equipment is properly cleaned following each use.
- To reduce the number of students in a CTE laboratory and maintain physical distancing, consider having half of the students remain in the classroom while the other half participates in the laboratory instruction.

A high-quality CTE program includes instruction and also engages students in career counseling, leadership, and experiential learning. To reopen schools, all three components need to be addressed along with high-quality CTE instruction.

Career Counseling

Career counseling is an important component for a student when they decide which high-quality CTE program to choose. When schools reopen, they should consider the following with regard to career counseling.

- Since counselors and teachers will likely be able to see students on site but with less face time, they may need to rely on blended instruction with some in-person direction and some via a remote platform. Direction could also be delivered by recorded instruction posted on a class web page.
- Educators should rely on online tools such as the California CareerZone, found at <https://www.cde.ca.gov/ci/ct/cc/>, California Career Center, and mobile apps such as the Career Surfer, My Stuff Job Central, and My Stuff CAP (career action plan) which students can use on their own and at their own speed to complete assignments.
- Educators will need lesson plans and activities developed for distance learning that can be given to students with less upfront direction due to the limited time of in-person instruction.

Experiential Learning

An important component of a quality CTE program is experiential learning. This is where a student is able to gain additional skills through job shadowing, internships, and entrepreneurial experiences. To ensure that students remain safe and healthy while completing this instructional strategy, LEAs should consider the following.

- Work with business and industry partners to develop a plan to maintain distancing requirements while students are on site.
- Look into alternatives to on-site placement. Are there opportunities for virtual industry opportunities?
- Work with teachers on potential methods to supervise and monitor students who are taking part in experiential learning opportunities. Teachers should consider skills being obtained by the student and also notice safety and cleanliness policies.



For long-term preparation, LEAs must explore different modes of delivering work-based learning (WBL), problem- and project-based learning, and how a blended approach of virtual and in-person instruction can create more experiential learning opportunities for students.

Career and Technical Student Organizations

Leadership development through participation in a Career Technical Student Organization (CTSO) provides skills that are necessary to be successful in any career. Critical thinking, consensus building, teamwork, and job readiness skills are a few of the many standards addressed through participation in a CTSO. As a graded component in a CTE course, it is important that the LEAs review the expectations and how they can be accomplished in a safe and healthy way.

Engage students in a process to review their calendar of events in an effort to provide creative alternatives to participation. Some considerations might include:

- Holding monthly meetings in a way that enhances the distancing requirements
- Developing engaging activities that can be completed virtually
- Working with community groups to plan for safely participating in service projects
- Reviewing the LEA's current travel policy and adopting revised strategies to ensure safe and healthy travels, as many CTSO activities are out-of-class and often out-of-town
- Reviewing the current travel restrictions for students and faculty, addressing travel within the community, county, state, and even nationally
- Addressing the need of the travel versus the risks
 - For example, if a group of seven students is traveling within a 30-mile radius to participate in a competition, what would the restrictions be? If the students were traveling the same distance to take part in a meeting, would the same restriction apply? What if the students were participating in a leadership conference with students from other communities?

For many students, their CTE class is what keeps them in school and engaged in learning. Significantly, it is the hands-on learning that takes place within a high-quality CTE program, and it is the social gathering that builds relationships. LEAs are encouraged to provide safe and healthy opportunities for students to develop alternatives that keep the students engaged in the hands-on learning process as well as having the opportunities to be social.

To ensure that learning is occurring, be creative; engage industry partners, teachers, and students; and listen actively. These are big steps that help CDE properly prepare young people to enter the career of their choice and/or elect to continue their education beyond high school.



EXPANDED LEARNING

As school districts consider their options for reopening and redesigning the school day, they should be reaching out proactively to their expanded learning partners. Publicly funded after-school and summer programs operate at more than 4,500 school sites around the state, serving over 860,000 students—more than 80 percent of whom are socioeconomically disadvantaged (California Department of Education 2018).² Expanded learning partners have a unique set of assets and expertise that are particularly important in the COVID-19 era. In particular, after-school and summer programs have an explicit commitment (defined in [Quality Standards for Expanded Learning in California: Creating and Implementing a Shared Vision of Quality](#)) to build the positive relationships, safe and supportive environments, and engaging activities that students most need in this time of uncertainty and stress.³

DIFFERENT TYPES OF EXPANDED LEARNING PROGRAMS

After-school and summer programs are often run by nonprofit, community-based organizations, sometimes under contracts with school districts for public funding like the state After School Education and Safety (ASES) Program or the federal 21st Century Community Learning Center (21st CCLC) and After School Safety and Enrichment for Teens (ASSETs). Sometimes these programs operate with private grants and/or charge parent fees. They may run programs on school sites or in the community.

Why: The Science Grounding

Stress has a major impact on the developing brain. The Science of Learning and Development Alliance is a great resource for teachers, administrators, and LEAs to understand how stress affects students (see its research at <https://www.soldalliance.org/resources>). In the pandemic, students may have experienced high levels of stress from the disruption of their daily lives, worries about their own and family members' health, and possibly financial strains in the household and community. For children living in unstable or unsafe conditions, the stress and trauma—resulting in ongoing, unbuffered cortisol—threaten to have long-term negative impacts on their bodies and brains. These students will likely return to school needing additional supports to rebalance their limbic systems and refocus on the task of learning and being productive in a school community.

This is where expanded learning can play a key role. Oxytocin—released through the experience of trusting relationships and safe, calm, predictable environments—acts as a buffer to cortisol, allowing children to access the higher order thinking, planning, remembering, and regulating functions of their limbic system.⁴ Expanded learning programs are an untapped resource that not only complement academic skill-building, but more importantly, specialize in building positive relationships with young people and their families.

2 California Department of Education, 2018, *Characteristics of Schools and Students Participating in After School Programs 2017 Report*. <https://www.cde.ca.gov/ls/ex/documents/lrafterschoolprograms17.pdf>.

3 California Department of Education, 2014, *Quality Standards for Expanded Learning in California: Creating and Implementing a Shared Vision of Quality*. https://www.afterschoolnetwork.org/sites/main/files/file-attachments/quality_standards.pdf?1490047028.

4 Turnaround for Children, n.d., "The Science." <https://www.turnaroundusa.org/what-we-do/the-science/>.



Staff in these programs often have had similar experiences of the student population and can quickly form authentic relationships with students. And, because family members sign their children out with staff at the end of the after-school program, expanded learning staff are more likely to have relationships with families, often acting as a bridge to school-day teachers through the ongoing communication that naturally takes place. In fact, during distance learning, some districts have relied on their expanded learning partners to find and re-engage families that they could not reach remotely. Expanded learning programs also focus on creating safe, supportive learning environments that foster a sense of belonging for all students, reinforce high expectations for behavior, and inspire engagement, skill development, and mastery—all of which are enhanced and deepened through the trust built between students and expanded learning staff. In this time of dysregulation and readjustment, expanded learning providers are key allies in reaching students and rebalancing their equilibrium for learning.

How: Innovation, Time, and People

There are multiple models being considered for a redesigned school structure to comply with health standards and physical distancing requirements. After-school programs can help in each model. Across all of the following configurations, expanded learning providers can ensure that students are having positive social interactions with adults and peers in safe and supportive environments that value youth engagement and learning.

STAGGERED TIMES

Some districts may have A and B groups that attend on alternating days or in AM and PM rotations. In either case, expanded learning staff could be

- working with the group that is not currently in class,
- doing innovative and engaging activities that build on the lessons taught in class,
- supporting students in completing projects assigned in class, or
- doing computer science activities, theatre, visual arts, or science to enrich students' learning experiences.

DIFFERENT GRADE LEVELS

Similarly, if districts choose to have in-school programming for younger students and continue distance learning for older students, after-school providers could schedule in-person activities for the older students so that they have opportunities to be with peers, practice social and emotional skills, get support with their school work, and have enriching activities to keep them engaged and active.

EPISODIC DISTANCE LEARNING

Should the pandemic re-emerge and require periodic distance learning, after-school providers can partner in ensuring that all students have remote access to learning and school meals, and are also maintaining connections with adults from their school communities.

ALL IN-PERSON INSTRUCTION

After-school providers will still be essential partners in helping students readjust to the school environment and re-engage with learning.



What: Eager Partners

What are your next steps?

- Find out who is offering after-school and summer programs at or near your schools.
- Invite them to talk about their approach and their programs.
- Engage them in the planning process as early as possible to align with instructional programs to accelerate learning. They often know much about the local community and its resources and opportunities. When asked, they are good at coming up with innovative solutions and flexible models for supporting the students.
- Be clear about your parameters and expectations, and then continue to engage as equal partners. Like you, expanded learning providers are professionals and experts in their field.
- Do any existing memoranda of understandings (MOUs) require updates on modifications to ensure students and staff are safe?



PROFESSIONAL RELATIONSHIPS AND LEARNING

Reopening schools utilizing new instructional models requires special attention to professional relationships and learning. Any large-scale transition for schools can only be achieved with commitment through strong educator supports. Educators must be supported in ways that allow them to focus on student learning. An important part of this support should include building and nurturing staff relationships. This can be achieved by addressing the strain of isolation through video conferencing, digital environments, and time for educators to stay in touch with each other, and by ensuring teachers have agency in determining the focus of professional learning (PL). PL sessions should also be facilitated with adult social-emotional learning in mind, incorporating practices such as welcoming rituals, engagement activities, and optimistic closures.



Implementation of a quality PL system aligned to California's [Quality Professional Learning Standards](#) ensures that the transition to a new instructional program model will result in positive outcomes for students and educators. Schools should conduct surveys of educators and families regarding early efforts to transition to distance learning to analyze what worked well and what needs improvement before transitioning to a new instructional program model. Data should be continuously collected throughout the transition to inform PL and should be disaggregated by student groups in order to identify the most critical student needs. The content of PL experiences should help administrators and teachers build a shared understanding of what successful implementation of the instructional program model looks like for all students and what the system needs in order to achieve it. PL should also cover health and safety protocols. Community of practice models should continue, through effective use of digital tools, to try new approaches and share results with colleagues, facilitate common planning and peer observation, and provide tailored supports as needed. Instructional leaders should support teachers in building confidence within the new model by providing opportunities to learn and experiment with tools and resources.



ESSENTIAL PLANNING QUESTIONS

- How will the school maintain positive relationships among staff?
- What information can we solicit from students, families, and educators about distance learning efforts and a transition to a new instructional program model that can inform PL opportunities?
- What does successful implementation of the new instructional program model look like and what supports do educators need in order to achieve it?
- What PL structures can continue under the new instructional schedule model and what adjustments need to be made in order to maintain quality and safety and accelerate student learning?
- What opportunities will be provided to teachers in order to build their confidence with the new instructional program model?

MODELS AND BEST PRACTICES

[CDE Quality Professional Learning from a Distance](#)

[CDE Distance Learning Guidance](#)

[CDE COVID-19 Webinars](#)

[Learning Forward: Tips for Leading Professional Learning Online](#)

[Education Week \(Opinion\): What Does Remote Instructional Leadership Look Like During a Pandemic?](#)

[Oakland Unified School District's Three Signature Social Emotional Learning \(SEL\) Practices](#)

[Chief Learning Officer: How Can We Build Relationships in Virtual Isolation?](#)



CONTINUITY OF RELATIONSHIPS AND LEARNING PLANS

Through the COVID-19 pandemic the importance of the physical space of schools has been amplified. The physical space of schools is where shared experiences happen, memories are created, connectedness and relationships are built, and meals are shared. When LEAs quickly pivoted to distance learning models, one of the reasons school staff found success was because of the existing relationships and connectedness built during the school year.



Relationships and connectedness are at the core of our healthiest school communities. We know from experience and the science of learning and development that meaningful relationships are essential for students to grow as learners. The student/staff relationships are the foundation of students' connectedness to the school community and learning. Staff to staff relationships provide the space for staff collaboration and growth. Student to student relationships allow peers to connect to each other and begin to understand diverse perspectives, helping them become more compassionate human beings.

When schools are developing their reopening plans it is important to include a plan to ensure that the learning and the connected relationships developed while the school buildings were open can continue if another school building closure occurs. This is also an opportune time for schools that have previously closed for wildfires, other natural disasters, or public safety power shutdowns (PSPS) to include how learning and relationships will continue if those, or similar, disasters occur again.

Below are essential questions for consideration when developing continuity of relationships and learning plans.

ESSENTIAL QUESTIONS FOR CONSIDERATION

- How will LEAs maintain relationships and connectedness when the physical school buildings are closed?
- How will the LEA continue some of the same practices, such as student announcements, even when the physical school buildings are closed?
- How will the LEA continue to provide opportunities for staff collaboration and professional learning?
- How will LEAs create a feedback loop about the experiences of students, staff, and families to inform their ongoing planning and communication?



CONTINUITY OF RELATIONSHIPS AND LEARNING

- How will LEAs consider the diverse needs of all students and plan for common and differentiated social–emotional and academic supports?
- How will LEAs continue their community partnerships to amplify their efforts of continuity of relationships and learning?
- How are all of our relationships becoming more equitable and strengthening our community?



MENTAL HEALTH AND WELL-BEING OF ALL

The entire education community has been affected by the COVID-19 pandemic. The community has experienced high levels of stress from the disruption of daily lives and worries about the physical health of oneself and others, and many have been under financial strains. For many, especially children, living with these strains in the household and community, the stress and trauma threaten to have long-lasting negative impacts on the body and brain. Each person will need additional supports and systems that will help to rebalance and refocus on the task of learning and being productive in a school community.

When considering the reopening of schools, LEAs should contemplate not only the physical health of their constituents but also their mental health and wellness and make it a priority within their planning. LEAs should examine the availability and accessibility of mental health resources and supports for their students, families, and staff members as they return to school, continue distance learning, or participate in a blended model. LEAs should ensure that strong partnerships with mental health supports are created and a system is in place to allow for student and staff support referrals without wait time. This checklist is intended to help local LEAs in their planning for the reopening of schools.



TIER 1: UNIVERSAL SUPPORTS: WHOLE SCHOOL SAFETY AND PREVENTION PLANNING

- What is the LEA doing to promote wellness of students on a daily basis?
 - Conduct universal screening to identify social–emotional needs of students.
 - Share student mental health need assessment data with stakeholders during LCAP stakeholder engagement process.
 - Encourage school boards to adopt policies that support staff and student wellness.
 - Consider strategies to become a trauma-responsive school system to support the school community.
 - Conduct routine check-ins using a trauma- and resilience-informed lens.
 - Develop a system to connect with students and families to promote attendance.



- Engage with students and families using culturally responsive techniques.
- Are staff trained in providing supports through a trauma-informed and responsive lens?
 - Use Psychological First Aid to assess immediate needs and provide support.
 - Use professional development time to increase trauma knowledge and skills.
- What is the LEA doing to reduce the stigma associated with accessing services?
 - Engage staff in professional development about mental health destigmatization.
- Has the LEA adopted a suicide prevention policy?
 - Share the National Suicide Prevention Lifeline 1-800-273-8255 widely. (Include it on staff and secondary student ID cards.)
 - Include mental health and wellness resources on district and school websites and in communications with families (newsletters, emails, texts, robocalls, etc.).
- Has the LEA engaged the school community and mental health practitioners in a survey to understand its constituents' needs in order to build upon existing assets and determine the current mental health needs of staff, students, and families? (For example, the CDE offers a free [CalSCHLS Learning from Home Survey](#).)
 - Conduct schoolwide mental health assessment that includes trauma and stress.
 - Assess and review necessary staffing ratios to meet student needs (teachers, support services, etc.).

TIER 1: COMMUNITY AND FAMILY ENGAGEMENT AND SUPPORT

- How are LEAs engaging community-based and local government partners in supporting the mental wellness of staff and students?
 - Collaborate with stakeholders, such as county behavioral health departments and local HMOs and PPOs, to promote staff wellness and provide workshops and supports regarding adult and student mental health, trauma responsiveness, suicide prevention, and resilience.
 - Suggest all LEAs (county offices of education, districts, and school sites) include information and links to increase access to mental health and wellness resources.
 - Share resources for basic needs: food banks, Medi-Cal, Covered California, energy programs, Section 8 housing, prescription and patient assistance programs, unemployment supports, local job postings, local CalFresh and food distribution, free internet access, etc.
 - Provide a link to CDE's Resources for Students in Crisis: <https://www.cde.ca.gov/ls/cg/mh/studentcrisishelp.asp>.

TIER 1: UNIVERSAL SUPPORTS: STAFF WELLNESS

- What supports are available to promote staff wellness and prevent burnout, compassion fatigue, and secondary traumatic stress?
 - Provide trainings on secondary traumatic stress and self-care (e.g., Support for Teachers Affected by Trauma [STAT]).
 - Promote mindfulness techniques and staff social supports.



- Provide routine communication (in-person or virtual) to staff members to encourage self-care, including examples, and examples of wellness (e.g., saying no, accepting oneself and others, and not being at 100% all the time).
- Promote the use of staff support groups to enhance staff cohesion and coping.
- Provide a monthly informational insert in staff checks about mental wellness and local resources.

TIER 1: CLASSROOM STRATEGIES

- How do LEAs promote safety and consistency in the classroom?
 - Establish and implement daily routines for both in-person and remote delivery.
 - Include stress management or mindfulness practices in daily classroom routine.
 - Consider impact of stress and trauma when assessing and supporting students.
 - Use restorative circles (in-person and virtually).

TIER 2/3: EARLY AND TARGETED INTERVENTION FOR STUDENTS AND STAFF

- What supports are currently in place to assist students and staff with mental health issues?
 - Provide staff with resources from their Employee Assistance Program (EAP).
 - Align district funding, policies, and programs to fully support mental wellness for students and staff.
 - Implement or scale up Social Emotional Learning (SEL) to promote social–emotional competencies among students. Promote and support adult SEL.
 - Maintain or expand student mental health services using LCFF, ESSA Title II and IV funds, or other leveraged resources.
- What technology is being used to deliver mental health services remotely? Is this technology platform HIPAA or FERPA compliant? Is it secure?
 - Review district policy and coordinate with mental health partners to ensure confidentiality.
 - Assess what supports are currently in place to assist students with mental health issues.
 - Encourage students to use counseling services as needed. Promote messaging to remove stigma.
 - See that staff are trained in evidence-based practices (CBITS, SSET, DBT for Schools, etc.).
 - Provide information about and access to tele-behavioral health services for counseling services (group, individual).



COMMUNICATION AND COMMUNITY ENGAGEMENT



COMMUNICATION

The COVID-19 pandemic has created intense stress and trauma for the stakeholders schools serve. Any carefully crafted reopening plan will be only as successful as an LEA's ability to maintain trust and credibility through frequent and transparent, two-way communication.

Research on risk communication shows that people are less able to comprehend information when under stress and trust is determined when organizations demonstrate empathy and honesty during a crisis. CDE recommends that schools develop comprehensive communication plans targeting key audiences—such as students, parents and caregivers, employees, and community members—that are responsive to stakeholder concerns. Implementing clear, consistent, and specific communication protocols will allow everyone to safely reengage in this next transition for schools.

Effective communication plans will:

Effective communication plans will:

- Understand and utilize the communication methods preferred by target audiences.
- Determine the desired outcomes of communication efforts and design key messages to achieve them.
- Differentiate key messaging across multiple platforms (e.g., email, text messaging, push alerts, infographics, website posts, social media, news media outlets, printed mailings, etc.).
- Include languages other than English.
- Use communication methods that will accommodate persons with hearing and visual impairments.
- Develop frequent messaging that includes all critical information to reduce confusion, anxiety, or misunderstandings. Certainty reduces stress, even when there are not always specifics to share. For example, if plan or action step specifics are not yet available, provide detailed updates and information about the decision-making process and factors being considered (especially as they pertain to stakeholder feedback).



- Ensure communication is bias free and destigmatizing and does not perpetuate stereotypes.
- Use existing school resources to amplify messaging: school campus signage, marquees, existing handouts, etc.
- Provide contact information for follow-up questions or concerns.
- Develop a dedicated hotline and web page that includes answers to common questions and that all staff can direct the public to for the latest updates. This measure can reduce the burden on individual employees and will promote message clarity and consistency across schools.
- Encourage consistency of messaging by developing internal talking points for frontline staff, including principals, teachers, office and clerical staff, etc.

Communication strategies leading up to school reopening should emphasize the safety measures undertaken by the school, including personal protective equipment (PPE) for students, teachers, and staff, cleaning and sanitization protocols, physical distancing measures, and mental health and well-being supports. LEAs should also inform parents about the importance of symptom onset and keeping students home when sick. Communication efforts should also outline processes for parent and guardian visits, pick-up, and drop-off.

LEAs should consider partnering with community organizations, local government, health officials, and higher education partners, leveraging trusted third-party messengers to reach a broader audience.

COMMUNITY ENGAGEMENT

As schools begin to plan for reopening, they must actively and authentically engage parents and caregivers, families, and students in the decision-making process in order to build trust and credibility for any plans that are implemented. Effective community engagement will:

- Clearly communicate the organization's objectives.
- Ensure stakeholders understand the ask and their role in the process.
- Specify how and when feedback will be used in the decision-making process.
- Reflect back to stakeholders the feedback received to demonstrate the organization has listened.
- Close the loop and strengthen credibility by communicating how feedback was acted upon.

Examples of effective community engagement strategies include:

- Qualitative and quantitative surveys.
- Focus groups and listening sessions with target stakeholders.
- Previews of draft plans with representative stakeholders to build early understanding and solicit real-time feedback.
- Appointment of representative stakeholders—administrators, students, educators, parents and caregivers, health officers, etc.—to steering committees and task forces charged with developing plans.



EARLY LEARNING AND CARE

Early learning and care (ELC) programs are critical to the California economy. Many essential workers have children who require supervision and care while they perform their essential functions in the community. These children need a safe, quality environment with rich learning experiences and responsive interactions while their parents work.

Many school districts have ELC programs located on the school site that serve infants and toddlers or preschoolers during the day or operate as before or after school programs. The majority of these programs have contracts to provide care that are overseen by the CDE Early Learning and Care Division (ELCD) while other schools might operate an Early Head Start or Head Start program or use Title 1 funds for early learning.

Local school systems may want to consider reopening ELC programs on their campuses even if other classrooms remain closed in order to ensure families in their communities have adequate care for their children while they are at work. (See the [CDC guidance](#) and additional guidance from CDSS as available for more information about making the decision to reopen.)

As LEA ELC programs make decisions about whether and how to reopen in adherence to local and state health directives, they should ensure compliance with all program requirements. To ensure the health and safety of staff and children, programs should utilize resources developed by the California Department of Social Services (CDSS) and by ELCD outlining new regulations and operating procedures.

LEA ELC program providers will need to be well-resourced with cleaning and medical supplies, paying specific attention to handwashing stations, use of PPE by staff—face coverings at a minimum, and disinfecting procedures for all shared surfaces and materials, including toys and other manipulatives. (See [MB 20-06](#) and [PIN 20-06-CCP](#) for additional guidance.) All staff and children should minimally undergo temperature checks at the start of each day and appropriate actions should be taken as health concerns including, but not limited to, a temperature above 100.4 degrees Fahrenheit or known exposures to COVID-19 arise.

LEA ELC program providers should also take steps to ensure their ability to maintain reasonable physical distancing prior to reopening, including the following:





- Adhering, to the extent possible, to best practices guidance issued by the CDSS and ELCD regarding group size and ratios while also maintaining contractual requirements, unless waived.
- Instituting procedures to ensure children are grouped in the same configuration, with the same staff throughout the day and restrict mixing between groups. This may require reconfiguring the physical space (e.g., deconstructing centers to ensure access to all types of activities for all children) or moving children between physical spaces throughout the day.
- Closing or repurposing communal spaces such as cafeterias and libraries while implementing physical distancing procedures. Such spaces may offer opportunities for reconfiguring to support smaller groups of children.
- Maximizing outdoor time for children in accordance with schedules to rotate use and allow for cleaning of any shared materials or equipment.
- Utilizing head-to-toe placement of children and creating physical barriers, as needed, to protect children and ensure distancing during naptimes.
- Staggering arrival and pick-up times to limit direct contact with and between parents and caregivers to the greatest extent possible and creating processes such as curbside pick-up or different doors for entering and exiting to the greatest extent possible.

For additional guidance on implementing physical distancing with young children, see [recommendations from the Center for Disease Control \(CDC\)](#), [recommendations from the University of California San Francisco Child Care Health Center](#), and guidance in [MB 20-06](#).

ELCD will continue to support contractors who are unable to reopen and supplement providers who do reopen as funding and Executive Orders prevail. (See [MB 20-11](#) and [MB 20-06](#).)



SCHOOL SERVICES

TRANSPORTATION

Background

Many LEAs in California operate a school bus program to transport students to and from school. The California school transportation system is the largest mass transportation operation in the state. The system comprises 24,201 public and privately owned school buses, which transport approximately 1,121,857 students to and from school each day.

As the LEAs plan for reopening and decide on their instructional model, transporting students will need to align with the chosen model. Collaboration between the instructional program staff, school transportation staff, and city bus services will be necessary to ensure students reliant on school and city buses will be at school on time. Given the complexities of aligning transportation and instructional models, collaboration and further statewide dialogue on strategies and different scenarios will need to occur. It is critical to plan for the safe transportation of students to and from school during this pandemic.

Best Practices

In order to practice physical distancing on a school bus, the seating capacity must be reduced. This may necessitate the use of a seating chart to designate which seats are available for use.

Routing is the responsibility of the transportation providers at local levels. Each LEA or private carrier will need to evaluate the need of the students that are provided transportation. Transportation providers should be assessing their routes now to determine what will work for their individual area by surveying families and collaborative planning with stakeholders.

Loading/Unloading Zones and Bus Stops

LEAs and private carriers need to consider whether there is enough space for physical distancing at bus stops and school loading and unloading zones. Once physical space is confirmed, it is important to inform students and parents and guardians of steps they must





take to keep students and staff safe during loading and unloading. If transportation providers take the temperature of children prior to loading and unloading the school bus, the provider may need procedures in place for proper training to meet local policies.

Physical Distancing on School Buses

- Determine maximum capacity of students for each vehicle while meeting 6-foot physical distancing objectives.
- Create a plan for seating based on maximum capacity determined above. Sample options:
 - Option 1: Seat one student to a bench on both sides of the bus, skipping every other row.
 - Option 2: Seat one student to a bench, alternating rows on each side to create a zigzag pattern on the bus.
 - Mark or block seats that must be left vacant.
- Assign a bus aide to ensure distancing and do symptom screenings.
- Ensure 6-foot distancing at bus stops and while loading and unloading.
- Prevent students from walking past each other by taking the following measures:
 - Seat students from the rear of the bus forward.
 - Board afternoon runs based on the order in which students will be dropped off. Students who get off first should board last and sit in the front.
- Require face coverings for students and staff at bus stops and on buses.

Vehicle Cleaning

More information on cleaning practices is available in the [CDC Cleaning and Disinfecting Your Facility Guidelines](#).

NOTE: Wear disposable gloves to clean and disinfect.

Maintenance Scheduling

Vehicles may have exceeded a 45-day maintenance or inspection date while sitting out of service during the COVID-19 stay-at-home orders.

Vehicles need to meet all maintenance and inspection requirements before being placed back into service in accordance with [Title 13 CCR 1232 Periodic Preventive Maintenance Inspection](#).

Carriers and drivers need to look closely at each Vehicle Inspection Approval Certificate (CHP 292) in accordance with [Title 13 CCR 1231 Vehicle Inspection Approval Certificate](#).

Carriers and drivers need to make sure the vehicle's certificate is still valid and that 13 months from the last inspection have not been exceeded in accordance with [Vehicle Code 2807 Lawful Orders and Inspections](#).

Driver Training and Certification

LEAs and private carriers shall ascertain that all drivers meet licensing requirements before operating vehicles.



STUDENT MEALS

Student Meals

A successful nutrition program is a key component to every educational environment. School meals protect the most vulnerable children against hunger. A child cannot focus on learning when they are feeling hungry. School meals boost learning, and studies show that students perform best academically when well nourished. Therefore, ensuring a child has access to healthy and appealing meals in schools is extremely important.

As school food service operations transition from serving meals during unanticipated school closures to serving meals in a blended learning school environment, school districts will need to consider national, state, and local health and safety guidelines. It is important that school districts engage school food service directors in district discussions regarding plans for reopening schools to ensure that students participating in all learning models have access to healthy meals.



School districts will need to consider the resources and flexibilities necessary to transition food service operations to an on-site or off-site student meal delivery system or operate both at the same time. This includes applying for state or nationwide waivers and updating school policies, standard operating procedures, and trainings to ensure compliance with Child Nutrition Program requirements and procuring equipment, supplies, and menu options necessary for meal service.

Considerations for Changes in Food Service Operations

HEALTH AND HYGIENE PROMOTION

- Designate a COVID-19 coordinator.
- Teach and reinforce handwashing and use of a cloth face covering by employees when near other employees or students.
- Have adequate supplies for both employees and students including soap, hand sanitizer, and tissues.
- Post signs on how to stop the spread of COVID-19.

CLEANING AND SANITATION

- Update standard operating procedures for sanitation of school kitchens, cafeterias, food warehouses, and central production kitchens.
- Train all employees on health and safety protocols, including correct application of disinfectants and maintaining physical distancing.



- Clean and disinfect surfaces frequently touched by students during meal service, including tables, chairs, carts used in transportation, and point-of-service touch pads. Use timers for cleaning reminders.

MEAL PREPARATION

- Ensure gloves, masks, disposable aprons, and other supplies are readily available.
- Promote fresh healthy menu options that are individually plated meals and preportioned and prewrapped produce.
- Use disposable trays and wrap cold items in plastic and hot food with foil.
- Consider how work stations can be reorganized for proper physical distancing during meal preparation and meal service.
- Adjust employee shifts to minimize number of staff in the kitchen.

ONSITE MEAL SERVICE

- Assess whether to serve meals in the classroom or cafeteria or to use outdoor seating.
- Encourage physical distancing through increased spacing, small groups, and limited mixing between groups, if feasible. Stagger meal times to allow for cleaning between meal services and to serve students in smaller groups.
- Provide at least 6 feet of physical distancing between groups or tables by increasing table spacing, removing tables, marking tables as closed, or providing a physical barrier between tables.
- Provide physical guides, such as tape on floors or sidewalks and signage on walls to ensure that students remain at least 6 feet apart in lines or while waiting for seating.

- Remove or suspend use of share tables and self-service buffets for food and condiments.
- Consider having staff wear masks and gloves while using point of service (POS) touch pads, replace touch pads with a scanner, or have hand sanitizer available.
- Install physical barriers, such as sneeze guards and partitions, at POS and other areas where maintaining physical distance of 6 feet is difficult.
- Consider increasing access points for providing meal service.
- Ensure cleaning of every table between groups of students or meal service times.

OFFSITE MEAL SERVICE (WITH APPROVED USDA WAIVERS)

- Offer grab-and-go student meals for consumption at home, including drive-through, delivery, or curbside pick-up options.
- Assess whether there are students who are unable to access school meal distribution sites and identify ways to address these gaps.
- Consider whether it is feasible to continue to use buses to distribute meals to students.

COMMUNICATION WITH STUDENTS AND FAMILIES

- Notify parents and the school community about school meal service and options.
- Use a variety of communication methods such as social media, newsletters, and school websites.



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APPENDIX A. CDE HEALTH AND SAFETY CHECKLIST

CDC DECISION-MAKING TREE

Visit <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/Schools-Decision-Tree.pdf> for guidance on reopening decisions.

CAMPUS ACCESS

- [CDC: What to Do If You Are Sick](#)
- [CDC: People Who Are at Higher Risk for Severe Illness](#)

HYGIENE AND PPE

- [CDC: Hygiene Practices](#)
- [CDC: Using Personal Protective Equipment \(PPE\)](#)
- [CDC: Use of Cloth Face Coverings to Help Slow the Spread of COVID-19](#)

CLEANING AND DISINFECTING

- [EPA: 6 Steps for Safe and Effective Disinfectant Use](#)
- [EPA: List N - Disinfectants for Use Against SARS-CoV-2](#)

EMPLOYEE ISSUES

Information for Staff Training

- [Healthy Schools Act](#)
- [CDPR: California School & Child Care Integrated Pest Management \(IPM\)](#)
- [CDC: Interim Infection Prevention and Control Recommendations for Patients with Suspected or Confirmed Coronavirus Disease 2019 \(COVID-19\) in Healthcare Settings](#)

Protect and Support Staff Who Are at Higher Risk for Severe Illness

- [CDC: People Who Are at Higher Risk for Severe Illness](#)

Communication with Students, Parents, Employees, Public Health Officials, and the Community

- [CDC: Criteria to Discontinue Home Isolation](#)
- [CDC: Public Health Recommendations for Community-Related Exposure](#)



APPENDIX B. RESOURCES

Instructional Programs

COLLABORATION AND ASSESSMENTS

Multi-Tiered System of Support

For more information, please visit the California Department of Education's Multi-Tiered System of Support (MTSS) web page at <https://www.cde.ca.gov/ci/cr/ri/>.

Grade Two Diagnostic Assessments

The Grade Two Diagnostic Assessments web page at <https://www.cde.ca.gov/ta/tg/da/> provides more information about the optional diagnostic assessments for students in grade level two for English Language Arts (ELA) and mathematics that meet the requirements of California *Education Code*, Section 60644.

Grade K–8 Assessments

All instructional materials adopted by the State Board of Education include assessments for measuring what students know and are able to do, and also advise teachers how to use assessment results to guide instruction. Thus, if the district is utilizing SBE-adopted materials, standards-based assessments are provided in the instructional materials.

Tools for Teachers

A preview release of Tools for Teachers, the new Smarter Balanced formative assessment component of its system, is scheduled to be available June 16, 2020, at <http://www.smarterbalanced.org/tools-for-teachers/>. Tools for Teachers provides subject- and grade-specific resources intended to help educators apply the formative assessment process during daily instruction.

Curriculum Frameworks

All of the curriculum frameworks discuss the use of assessment of learning. Screening assessments identify students who may need additional supports or instruction, diagnostic assessments provide specific information about the difficulties, and progress-monitoring assessments provide feedback on whether planned interventions to address the difficulties are effective. These assessments can operate in short or medium cycles.

To access the various frameworks, please visit the CDE Curriculum Frameworks and Instructional Resources page at <https://www.cde.ca.gov/re/di/or/cfird.asp>.

Progress Monitoring: Interim Assessments Resources

For resources to support progress monitoring, please see the CDE Smarter Balanced Interim Assessments for ELA and mathematics web page at <https://www.cde.ca.gov/ta/tg/sa/sbacinterimassess.asp>.

- More than 160 interim assessments are scheduled to be available August 20, 2020.
- Although developed for grade levels three through eight and high school, the Smarter Balanced Interim Assessments can be administered to students at any grade level (i.e., K–12).
- Results from these assessments will be electronically available to educators within 20 minutes of administration after a school or district coordinator creates the student groups for teachers to access these results.



For practice or training resources visit the California Assessment of Student Performance and Progress (CAASPP) web page at <http://www.caaspp.org/practice-and-training/> or the English Language Proficiency Assessments for California (ELPAC) Practice and Training Tests web page at <https://www.elpac.org/resources/online-practice-and-training-test/>.

For additional information or support for distance learning instructional strategies and learning acceleration, please contact the Curriculum Frameworks and Instructional Resources Division at distancelearning@cde.ca.gov.

For additional information or support for assessments, please contact the Assessment Development and Administration Division at caaspp@cde.ca.gov for CAASPP; elpac@cde.ca.gov for ELPAC; and pft@cde.ca.gov for Physical Fitness Test.

SOCIAL–EMOTIONAL LEARNING

- [CDE SEL and Distance Learning web page](#)
- *California's Social and Emotional Learning Guiding Principles* ([full version](#) and [summary](#)) and social and emotional learning [resource guide](#)
 - To learn more about this work, visit the CDE SEL web page at <https://www.cde.ca.gov/eo/in/socialemotionalllearning.asp>

ENGLISH LEARNERS

The CDE English Learners web page at <https://www.cde.ca.gov/sp/el/> contains state and federal guidance, resources, webinars, program models, and newsletters to assist LEAs with implementing distance learning and the transition to reopening schools. This web page includes:

- Guidance
 - US Department of Education Guidance
 - English Language Advisory Committee (ELAC) and District English Learner Advisory Committee (DELAC) Guidance
 - State Seal of Biliteracy Guidance
 - Distance Learning FAQs
- Resources
 - This section includes resources to support English learners; newcomers; multilingual students; and immigrant, refugee, and migratory students during distance learning and the transition to schools reopening, including supporting their social–emotional needs and physical health.
- Webinars or Models
 - Language Acquisition Programs; Dual Language
 - Distance Learning Designated/Integrated ELD
- English Learner Support Division (ELSD) and Parent Newsletters

The Practitioners' Guide for Educating English Learners with Disabilities is available on the CDE [Educating English Learners with Disabilities](#) web page.



CAREER TECHNICAL EDUCATION

- The Guiding Principles and the 12 essential elements are located at the [Workforce Pathways Guiding Policy Principles page](#)
- [CDE Career Technical Education page](#) as a starting point for how current CTE students are being served
- [Resources for CTE distance learning](#)
- [California CareerZone](#)
- [California Career Center](#)
 - [California Career Center Mobile Applications page](#) featuring Career Surfer, My Stuff Job Central, and My Stuff CAP (career action plan) which students can use on their own and at their own speed to complete assignments
- [Cal/OSHA Industry Guidance](#)

EXPANDED LEARNING

- [Quality Standards for Expanded Learning in California: Creating and Implementing a Shared Vision of Quality](#)
- [Science of Learning and Development Alliance resources](#)

Professional Relationships and Learning

- [CDE Quality Professional Learning Standards](#)

MODELS AND BEST PRACTICES

- [CDE Quality Professional Learning from a Distance](#)
- [CDE Distance Learning Guidance](#)
- [CDE COVID-19 Webinars](#)
- [Learning Forward: Tips for Leading Professional Learning Online](#)
- [Education Week \(Opinion\): What Does Remote Instructional Leadership Look Like During a Pandemic?](#)
- [Oakland Unified School District's Three Signature Social Emotional Learning \(SEL\) Practices](#)
- [Chief Learning Officer: How Can We Build Relationships in Virtual Isolation?](#)

Mental Health and Well-Being of All

- [CalSCHLS Learning from Home Survey](#)
- [CDE Resources for Students in Crisis](#)

Early Learning and Care

During the state of emergency, the ELCD released Management Bulletins to guide contractors through the COVID closures. This guidance was developed by ELCD in coordination with CDSS Community Care Licensing Division (CCL), CDE Nutrition Services Division, and the California Head Start State Collaboration Office.

- [MB 20-11](#) COVID-19 Guidance: Emergency Closures
- [MB 20-09](#) COVID-19 Guidance on Program Self Evaluation, Contract Monitoring, and Program Quality Requirements



- Please see the following associated webpage:
 - ▶ [Early Learning and Care Resources for Family Engagement and Professional Development](#)
- [MB 20-08](#) COVID-19 Guidance on Procurement and Audits
- [MB 20-06](#) COVID-19 Guidance Regarding Emergency Childcare Services for Essential Workers and At-Risk Populations
 - Please see the following associated forms:
 - ▶ [COVID-19 Self-Certification Form](#) (PDF)
 - ▶ [COVID-19 2020 Confidential Application for Emergency Childcare Services](#) (PDF)
 - ▶ [COVID-19 Temporary Waiver Request](#) (PDF)
- [MB 20-05](#) COVID-19 Guidance on Temporary Waiver of Family Fees
- [MB 20-04](#) COVID-19 Guidance on Apportionment, Attendance, and Reporting Requirements

The links below provide access to guidance documents.

CDSS AND CCL

- [PIN 20-06-CCP](#) (PDF) Social and Physical Distancing Guidance and Healthy Practices for Child Care Facilities in Response to the Global Coronavirus (COVID-19) Pandemic Written in Collaboration with the California Department Education

US DEPARTMENT OF HEALTH AND HUMAN SERVICES

HHS Administration for Children and Families Early Childhood Development [Caring for Our Children Basics: Health and Safety Foundations for Early Care and Education](#)

School Services

TRANSPORTATION

[Cal/OSHA Guidance for Transportation](#)

Vehicle Cleaning

- [CDC: Cleaning and Disinfecting Your Facility Guidelines](#)

Maintenance Scheduling

Vehicles may have exceeded a 45-day maintenance or inspection date while sitting out of service during the COVID-19 stay-at-home orders.

Vehicles need to meet all maintenance and inspection requirements before being placed back into service in accordance with [Title 13 CCR 1232 Periodic Preventive Maintenance Inspection](#).

Carriers and drivers need to look closely at each Vehicle Inspection Approval Certificate (CHP 292) in accordance with [Title 13 CCR 1231 Vehicle Inspection Approval Certificate](#).

Carriers and drivers need to make sure the vehicle's certificate is still valid and that 13 months from the last inspection have not been exceeded in accordance with [Vehicle Code 2807 Lawful Orders and Inspections](#).

STUDENT MEALS

[Cal/OSHA Guidance for Restaurants](#)



APPENDIX C. FREQUENTLY ASKED QUESTIONS (FAQS): SAFE REOPENING OF SCHOOL DISTRICTS

1. What will LEAs do if a teacher has an underlying health condition?

LEAs should work with the teacher to obtain a medical note and may need to consider providing these teachers with accommodations, such as telework or negotiated change in classification or duties.

2. What will the plan be for nonteaching staff with underlying health conditions?

LEAs may need to provide these employees with the ability to work remotely. There may need to be some reassignment of duties that lends to these staff being able to work remotely, or in some other way that meets their need for accommodations, for example, a parent engagement liaison assisting parents with technical support.

3. If students have underlying health conditions or parents/family members have underlying health conditions, what accommodations will LEAs make?

LEAs will likely need to consider providing these students with the option to distance learn so as to protect students and families with compromised health systems from being in harm's way.

4. How will LEAs arrange students and staff to accommodate physical distancing conditions?

LEAs will likely have to maintain small class sizes and limit the number of students in hallways and common spaces. There may need to be a morning session and afternoon session at each school so as to accommodate all students arranged into small class sizes and to offset space limitations.

5. How will LEAs work with early-grade students who, because of their age, may struggle with maintaining physical distance or wearing a mask?

If students from early grades participate in in-person instruction, LEAs may need to arrange them in small groups and may need to increase the number of staff who work with the students in classrooms to help keep students separated in physical distancing ways.

6. How will you manage school spaces (hallways, common areas, etc.) to accommodate physical distancing needs?

Staff will likely need to remind students in hallways and common spaces to maintain physical distancing. LEAs will need to have signage throughout the campus communicating physical distancing requirements.

7. How will you handle requests from parents who state a preference for distance learning instead of in-person instruction for their children?

There are families that may request distance learning and LEAs should consider providing parents, who request it, with the option to learn through distance learning.

8. How will LEAs handle physical education considering the need for physical distancing?

LEAs may need to consider providing physical education through instruction provided to students in small groups or through distance learning where students complete assignments independently.



9. How will LEAs manage meals during school hours?

LEAs may need to consider serving meals utilizing different spaces on campus for health and safety reasons. For those with staggered start times, this could be accomplished in ways such as providing “grab-and-go” meals as students who attended a morning session ending by lunch time leave campus.

10. How will LEAs handle physical distancing guidelines during bus transport?

LEAs will need to consider how transportation can best support their chosen instructional model. LEAs may need to consider deploying more buses or bringing students to schools in shifts in order to maintain physical distances on buses. Buses will have to be fully sanitized between each run. CDE recommends that students should wear cloth face coverings and maintain 6 feet of physical distance while on buses.

11. What will LEAs do if students forget to bring a mask or do not have one?

LEAs will likely have to maintain a supply of masks at school for students and staff who forget to bring one.

12. What, if any, temperature-taking procedures will LEAs utilize?

LEAs will need to designate staff and create a system for student entry that accommodates temperature checks for all students. This could include a self-screening process for families prior to coming to school. In some instances, they may also need to arrange for staff to take the temperatures of students and staff as they arrive to prevent the further spread of the coronavirus.

13. How will LEAs address hand sanitizing procedures for students?

LEAs may have to establish hand sanitizing stations at all school entrances and on playgrounds so that students and staff can sanitize their hands upon entering and exiting the campus and classrooms.

14. How will LEAs address campus cleaning and sanitizing?

Campuses will have to deploy deep-cleaning schedules at campuses at least daily, frequently disinfecting door handles, handrails, sink handles, restroom surfaces, playground equipment, and shared items. Considerations will need to be made for longer breaks within the instructional day to accommodate handwashing. Occupational safety guidelines should be consulted to determine the interval and the ingredients needed to ensure that desks and surfaces are properly sanitized.

15. How will LEAs handle after-school program needs?

If LEAs offer after-school programs, physical distancing guidelines will have to be followed at all times. School and after-school program staff ratios will need to be adjusted (more staff and smaller student group sizes).

16. How will LEAs address sports and extracurricular activities?

LEAs will need to consult public health experts for when these activities may be safely resumed. LEAs are encouraged to be in touch with their local lead of the California Interscholastic Federations.



17. How will LEAs ensure consistency of instruction across classes and schools in each district? Given that during distance learning the amount and nature of work varied from class to class, how will LEAs promote consistency in districts where there is a blended form of instruction (i.e., in-person instruction and distance learning)?

LEAs will need to engage in a collaborative planning process with teachers to develop a scope and sequence for learning and a continuity of learning plan should future school building closures be necessary.

18. How will locker rooms be sanitized and managed?

These facilities will need to be sanitized daily and possibly after each physical education class or activity.

19. How will students with special needs be served (for example, students with moderate/severe special needs and students who are assigned with a 1:1 paraprofessional)?

LEAs will need to engage in a collaborative Individual Education Plan meeting that provides accommodations for the instructional program model that best meets the needs of the student. This could include how a student would access the support of a 1:1 paraprofessional in a blended learning model or a distance learning model.



STRONGER TOGETHER | A GUIDEBOOK FOR THE SAFE REOPENING OF CALIFORNIA'S PUBLIC SCHOOLS

APPENDIX D. DEPARTMENT OF PUBLIC HEALTH GUIDANCE

[CDPH Guidance Documents: Coronavirus Disease 2019 \(COVID-19\)](#)



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American Federation of State, County and Municipal Employees (AFSCME)
Association of California School Administrators (ACSA)
California Association of School Business Officials (CASBO)
California Charter Schools Association (CCSA)
California Collaborative for Educational Excellence (CCEE)
California County Superintendents Educational Services Association (CCSESA)
California Department of Public Health (DPH)
California Division of Occupational Safety and Health (Cal/OSHA)
California Federation of Teachers (CFT)
California Governor's Office of Emergency Services (CalOES)
California Labor Federation (CLF)
California Parent Teachers Association
California School Boards Association (CSBA)
California School Employees Association (CSEA)
California Special Education Local Plan Areas (SELPA)
California Teachers Association

Service Employees International Union (SEIU) 1000
Service Employees International Union (SEIU) Local 99
Service Employees International Union (SEIU) State Council
Small School Districts Association (SSDA)
SSPI Superintendents Advisory Council

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Cindy Quiralte, Policy Advisor
Keith Yamanaka, Chief Counsel
Daniel Thigpen, Director, Communications
Michael Funk, Director, Expanded Learning Support Division
Shanine Coats, Director, Curriculum Frameworks & Instructional Resources Division
Veronica Aguila, Director, English Learner Support Division
Barbara Murchison, Director, Educator Excellence & Equity Division
Juan Mireles, Director, School Facilities & Transportation Division
Kim Frinzell, Director, Nutrition Services Division
Kristin Wright, Director, Special Education
Mao Vang, Director, Assessment Development & Administration Division
Pradeep Kotamraju, Director, College & Career Transition Division
Stephen Propheter, Director, Early Learning & Care Division
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CDE Press & Technology Services Division

EXHIBIT FF

8/9/2020

Distance Learning Frequently Asked Questions - Distance Learning (CA Dept of Education)



Home / Teaching & Learning / Curriculum and Instruction Resources / Distance Learning

Distance Learning Frequently Asked Questions

Frequently asked questions (FAQs) about Distance Learning pursuant to Education Code 43500-43511.

[Coronavirus \(COVID-19\) Main Web Page](#)

[Distance Learning Main Web Page](#)

[Expand All](#) | [Collapse All](#)

General

1. [What is distance learning?](#)

Distance learning is defined in *Education Code* Section 43500(a).

Distance learning means instruction in which the pupil and instructor are in different locations and pupils are under the general supervision of a certified employee of the local educational agency (LEA). Distance learning may include, but is not limited to, all of the following:

- Interaction, instructions, and check-ins between teachers and pupils through the use of a computer or other communications technology.
- Video or audio instruction in which the primary mode of communication between the pupil and certified employee is online interaction, instructional television, video, telecourses, or other instruction that relies on computer or communications technology.
- The use of print, video, and audio materials incorporating assignments that are the subject of written or oral feedback.

2. [What is considered in-person instruction?](#)

In-person instruction is defined as instruction under the immediate physical supervision and control of a certificated employee of the LEA while engaged in educational activities required of the pupil.

3. [What is considered an LEA for these purposes?](#)

An LEA for purpose of these provisions means a school district, county office of education (COE), or a charter school, excluding a charter school classified as a nonclassroom-based charter as of the 2019–20 fiscal year.

4. [When can LEAs offer distance learning?](#)

The intent is that LEAs offer in-person instruction to the greatest extent possible. However, LEAs can, and in some instances must, offer distance learning and/or hybrid models of learning under certain circumstances during the 2020–21 school year [*Education Code* Section 43503(a)(2)].

- Distance learning and/or a hybrid model of learning (a combination of in-person and distance learning) can be offered as a result of an order or guidance from a state or local public health official.
 - ◆ According to a letter to the [Journal](#) (PDF), the intent is not to require a directive from local public health officials specific to closing down in-person learning, but rather that LEAs actively work in consultation and collaboration with public health officials in determining whether to offer distance learning for a particular site or LEA-wide. The provision is also not intended to prevent an LEA from adopting a distance learning, hybrid, or mixed-delivery instructional model to ensure safety. Instead LEAs have flexibility to determine what instructional model the LEA will adopt during the COVID-19 Pandemic, taking into account the needs of their students and staff and their available infrastructure, provided the model adheres to an applicable state and local health guidance.
 - ◆ LEAs do need to continue to follow all other public health guidance, directives, and orders, including those not specific to schools, that impact school indoor and outdoor facilities and activities (e.g., social distancing guidance).
- For students who are medically fragile, students who are self-quarantining because of exposure to COVID-19, or for students who would be put at risk by in-person instruction.
 - ◆ The letter to the Journal notes that the intent is to allow LEAs to offer distance learning based on the unique circumstances of each student. It allows for medically fragile students, and those in self-quarantine, but also for those students who would be put at-risk by in person instruction and as such, does not require an LEA to verify or make a determination that a request for this allowance meets a specific standard.

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Distance Learning Frequently Asked Questions - Distance Learning (CA Dept of Education)

- Non-classroom-based charter schools do not provide distance learning as defined in EC Section 43500(a). Instead, non-classroom-based charter schools continue to provide independent study pursuant to their petition. As a result, this new requirement does not apply to non-classroom-based charters who were defined as such pursuant to EC Section 47612.5 as of the 2019–20 fiscal year.

Distance learning requirements are in place for the 2020–21 school year. LEAs that offer distance learning will not face penalties for instruction that doesn't meet the requirements outlined in *Education Code* Section 43504 prior to September 1, 2020. To the extent possible it is recommended that LEAs begin the school year meeting the requirements outlined.

- [COVID-19 Industry Guidance: Schools and School-Based Programs](#) (PDF; released July 17, 2020)

5. Is an LEA required to offer distance learning?

An LEA must offer instruction through distance learning if it is unable to offer in-person instruction in part or fully pursuant to a state or public health order.

6. What type of distance learning model can LEAs offer?

LEAs have the flexibility to determine what model best fits their situation, which includes hybrid and mixed-delivery models, so long as it ensures the safety of students and staff. The chosen model must take into account the needs of students and staff, as well as the infrastructure available to the school. The model must also adhere to applicable state or local public health orders or guidance (e.g., wearing face coverings, social distancing requirements, etc.) and include all necessary academic and other supports designed to address the needs of pupils who are not performing at grade level, or need support in other areas. The requirements for distance learning are outlined in *Education Code* Section 43503.

7. Does an LEA need to get approval from a public health official to transition to distance learning?

An LEA does not need to seek out or receive approval from a state or local public health officer prior to transitioning instruction to a distance learning model. However, LEAs are required to following public health orders and guidance, as applicable, in determining safe in-person instruction, and when distance learning may be necessary. Parents should be informed of how instruction will occur, in a language understandable to the parent, pursuant to *Education Code* Section 48985.

8. Does an LEA need to get approval from a public health official for its planned model of distance learning?

An LEA does not need to seek out or receive approval from a state or local public health officer prior for its planned model of distance learning model. However, LEAs are required to following public health orders and guidance, as applicable, in determining safe in-person instruction, and when distance learning may be necessary. Parents should be informed of how instruction will occur, in a language understandable to the parent, pursuant to *Education Code* Section 48985.

9. Is distance learning available to individual students who are at-risk or whose parents have a concern about their student participating in in-person learning?

Yes, distance learning must be offered for students who are medically fragile, would be put at risk by in person instruction, or who are self-quarantining because of concerns of exposure to COVID-19.

10. Do schools need to confirm there is a valid reason that a student "would be put at risk by in-person instruction," or is the student's risk required to meet a specific standard?

No. There is not a definition of students who "would be put at risk by in-person instruction," as there are many circumstances when distance learning may be more appropriate. For example, a student may have a health condition, family members with health condition, live or regularly interact with high-risk individuals, or otherwise be identified as "at-risk" by a parent or guardian. There is no requirement for an LEA to verify or make a determination that a request to utilize distance learning meets a specific standard or require documentation.

11. What is considered "live interaction?"

Education Code Section 43503 requires that distance learning include "daily live interaction." Daily live interaction is two-way communication between a certificated employee and student each instructional day, at the actual time of occurrence. Daily live interaction is required for every student with both a certificated employee and their student peers. In particular English learners, and students with special needs benefit from daily oral language development opportunities.

Examples of daily live interaction include in-person and virtual communication or interactions, including but not limited to synchronous online instruction (per statute) and phone calls where both parties communicate at the time of occurrence. One-way communication, including voicemails, emails, or print materials, is not considered a live interaction.

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Distance Learning Frequently Asked Questions - Distance Learning (CA Dept of Education)

Pursuant to *Education Code* Section 43503(b)(6), if daily live interaction is not feasible as part of regular instruction, the governing board or body of the LEA shall develop, with parent and stakeholder input, an alternative plan for frequent live interaction that provides a comparable level of service and school connectedness.

12. What is the difference between daily live interaction and daily participation?

The purpose of daily live interaction, which occurs with teachers and students, is to provide instruction, monitor progress, and maintain school/social connectedness. The intent of daily live interaction is to ensure each student has live contact at least once each instructional day with a certificated employee, and ideally live contact with peers, even if live contact is not possible as part of daily instruction.

Daily participation is used to track attendance and ensure daily engagement by all students in learning activities. However, documenting daily participation may be met through daily live interaction with a teacher or virtual assignments. Daily participation may also be documented through participation in online activities, completion of regular assignments, and contacts between employees of the LEA, including those other than teachers, and pupils or parents or guardians.

13. Is the requirement for daily live interaction met if the interaction is only between an individual student and a teacher?

No. All students are required to receive daily live interaction with both a certificated employee and their peers for the purpose of instruction, progress monitoring and school connectedness. Teachers may meet individually with students but this alone does not meet the requirements for daily live interaction. The minimum standard should be the same for all students regardless of which school or program the student participates in within the LEA. Every effort should be taken to determine the amount of interaction that is needed for students to progress academically and remain engaged in learning and connected to the school community.

14. Is there a requirement for how frequently regular communication with parents or guardians regarding a pupil's academic progress must occur?

The statute does not define how this communication must occur, however LEAs should align communications on student academic progress with communications related to re-engagement of students pursuant to *Education Code* Section 43503(f)(2). LEAs should consider including the following when creating their local policy on how frequently to communicate with parents:

- Language of the parent
- Progress along the continuum of language development
- Access to content
- Strategies to improve attendance and motivation
- Information for parents to learn the virtual systems used by teachers
- Information for parents to understand home schedules and learning environments
- Social-emotional effects from distance learning
- Additional strategies included in the LEA's Learning Continuity and Attendance Plan pursuant to *Education Code* Section 43509(f)(1) (F).

15. May the State Board of Education (SBE) waive any of the requirements in Part 24.5 of Division 3 of Title 2 of the *Education Code*?

No, pursuant to *Education Code* Section 43511(a), the SBE may not waive any portion of the distant learning provisions.

16. Can students avail themselves of an independent study program rather than distance learning in the 2020–21 school year? (new 7/31/20)

Students can participate in independent study programs during the 2020–21 school year. When offering independent study programs, an LEA will need to ensure that the LEA still meets the statutory distance learning requirements in order to avoid any audit penalties. These requirements include the following:

- Adopt a learning continuity plan and attendance plan that includes plans for the distance learning program
- Track and report daily participation
- Maintain a weekly engagement record for each student documenting synchronous or asynchronous instruction for each whole or partial day of distance learning, verifying daily participation, and tracking assignments
- Schedule students for a minimum days' worth of assignments each day as certified to by a certificated employee
- Develop written procedures for tiered reengagement strategies for all pupils who are absent for more than three schooldays or 60 percent of the instructional days in a school week
- Provide either daily live interaction or develop an alternative plan for frequent live interaction

17. May the requirement for daily live interaction be met through synchronous learning (e.g., classroom instruction provided through interactive web meetings such as Zoom or Webex)? (new 7/31/20)

Yes. Pursuant to *Education Code* Section 43503(b)(6), synchronous instruction may meet the requirements of daily live interaction, provided the remaining components of daily live interaction are also met. This includes interaction with certificated employees and peers.

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Distance Learning Frequently Asked Questions - Distance Learning (CA Dept of Education)

Attendance and Absences

18. What is required if students are not participating regularly in instruction?

Education Code Section 43504(f) requires each LEA to develop written procedures for tiered reengagement strategies for all pupils who are absent from distance learning for more than three schooldays or 60 percent of the instructional days in a school week. These procedures shall include, but are not limited to, verification of current contact information for each enrolled pupil, daily notification to parents or guardians of absences, a plan for outreach from the school to determine pupil needs including connection line with health and social services as necessary and, when feasible, line transitioning the pupil to full-time in-person instruction.

19. Are LEAs required to collect information on absences during distance learning? (new 7/31/20).

Yes, pursuant to *Education Code* Section 52066(d)(5)(a) and (b), LEAs are required to collect information on absences and report absenteeism through the California Longitudinal Pupil Achievement Data (CALPADS) system.

Personal Protective Equipment (PPE)

20. How can LEAs secure PPE when they are offering in-person instruction?

All County Offices of Education received an initial allocation of PPE to support LEAs and expanded learning programs in their county with the initial restart of school, as announced by Governor Newsom on June 5, 2020. LEAs should contact their COE for additional information on this allocation from the Governor's Office of Emergency Services (Cal OES).

Cal OES and the Department of General Services (DGS) are working to provide California Multiple Award Schedules (CMAS) contract vehicles that all LEAs will be able to use to procure PPE at discounted rates secured by the state. Until these contracts are available, the [Safely Making California website](#)  includes a searchable database of manufacturers for face masks, gloves, face shields, sanitizers, and other items.

Nutrition

21. Will students who are participating in distance learning be provided meals?

Yes. LEAs are required to provide nutritionally adequate meals for pupils who are eligible for Free and Reduced-Price meals whether engaged in in-person instruction or distance learning. Information regarding meals should be communicated in the language and format the parent understands.

Please refer to [School and Child and Adult Day Care Meals](#) for additional COVID-19 guidance as well FAQs.

English Learners

22. How are the needs of English learners being met through distance learning?

English learners must receive designated and integrated English Language Development (ELD), including assessment of English language proficiency, support to access curriculum, the ability to reclassify as fully English proficient, and support for dual language learning.

The LEAs are to incorporate designated and integrated ELD as part of the core instruction during distance learning model. Students are to continue to be assessed via distance learning to informally assess the progress in ELD pursuant to Section 11300 of Title 5 of the California Code of Regulations for English learners. LEAs are to continue to offer dual language support and language acquisition programs via distance learning. For more information regarding the ELPAC assessment using social distancing protocols, please see the assessment guidance provided on the [CDE COVID-19 Assessment FAQs web page](#).

Nonclassroom-based Charter Schools

23. Are non-classroom-based charter schools programs considered distance learning?

Nonclassroom-based charter schools do not provide distance learning as defined in *Education Code* Section 43500(a). Instead, nonclassroom-based charter schools shall continue to provide independent study pursuant to their charter petition. As a result, these new requirements do not apply to nonclassroom-based charters who were defined as such pursuant to *Education Code* Section 47612.5 as of the 2019–20 fiscal year. A nonclassroom-based charter school described in *Education Code* Section 47612.5 as of the 2019–20 fiscal year shall continue to comply with all of the statutory requirements in Article 5.5 (commencing with Section 51745) of Chapter 5 of Part 28 of Division 4 and the implementing regulations for that article.

8/9/2020

Distance Learning Frequently Asked Questions - Distance Learning (CA Dept of Education)

Senate Bill (SB) 98 does require that a nonclassroom-based charter school to adopt a learning continuity and attendance plan pursuant to *Education Code* Section 43509, and shall not be required to adopt a local control and accountability plan pursuant to *Education Code* Section 47606.5.

Virtual Schools

24. Can a school district open a virtual school or an independent study school to serve all students through distance learning? (new 7/31/20).

Independent study or virtual programs offered as a form of independent study at school districts should be offered as a program, and are not a school type. Although for the 2020–21 school year, a school district is able to meet its instructional day requirements through distance learning and the annual instructional time requirements have been temporarily suspended, the requirement that instruction be under the immediate supervision of a certificated employee to be included in instructional day and minute calculations and the requirement that all students be offered specific annual instructional minutes will be back in effect in 2021–22. These requirements are both district level and site level requirements, which carry a financial penalty for not meeting them. The CDE would advise against opening a virtual or independent study school because school districts can put themselves at risk for potential audit findings and/or fiscal penalties in future years by operating a virtual school.

In addition, distance learning and independent study are not interchangeable. While there is commonality between the two programs, the distance learning requirements established in Part 24.5, of the *Education Code* beginning with Section 43500 are different than the requirements of independent study. In order to establish an existing independent study program as a distance learning program for 2020–21, that independent study program would need to meet both independent study requirements and distance learning requirements.

Individualized Education Programs

25. Are there new requirements related to Individualized Education Programs (IEPs) and distance learning? (new 8/4/20).

Yes. *Education Code* Section 56345 was amended by SB 98 (Chapter 24, Statutes of 2020) to require that IEPs include a description of the means by which the IEP will be provided under emergency conditions, in which instruction or services, or both, cannot be provided to the pupil either at the school or in person for more than 10 school days. This description must be included in the development of each initial IEP or addressed during the regularly scheduled revision of an IEP, and must take public health orders into account.

SB 98 included other notable changes related to special education and distance learning. Please refer to the [related guidance](#) posted on the CDE website for more information.

Questions: California Department of Education | COVID19@cde.ca.gov

Last Reviewed: Tuesday, August 04, 2020

EXHIBIT GG

California Department of Education, August 2020

Learning Continuity and Attendance Plan Instructions (2020–21)

Senate Bill 98 (SB 98) established the Learning Continuity and Attendance Plan (Learning Continuity Plan), which is intended to balance the needs of all stakeholders, including educators, parents, students and community members, while streamlining meaningful stakeholder engagement and condensing several preexisting plans. In particular, it was important to combine (1) the intent behind Executive Order N-56-20 (<https://www.gov.ca.gov/wp-content/uploads/2020/04/EO-N-56-20-text.pdf>), which required a written report and envisioned an off-cycle Local Control and Accountability Plan (LCAP) due December 15th, and (2) the ongoing need for local educational agencies (LEAs) to formally plan for the 2020–21 school year in the midst of the uncertainty caused by the COVID-19 pandemic. The Learning Continuity Plan replaces the LCAP for the 2020–21 school year and supersedes the requirements in Executive Order N-56-20. This plan is intended to memorialize the planning process that is already underway for the 2020–21 school year. All LEAs, which includes school districts, county offices of education, and charter schools are required to complete the Learning Continuity Plan.

Instructions

The following resources, among others, may be helpful to LEAs when answering prompts within the Learning Continuity Plan:

- California Department of Public Health Website (<https://www.cdph.ca.gov/>)
- California Department of Education (CDE) Coronavirus Response and School Reopening Guidance web page (<https://www.cde.ca.gov/ls/he/hn/coronavirus.asp>)
- CDE Stronger Together, A Guidebook to the Safe Reopening of California’s Public Schools (<https://www.cde.ca.gov/ls/he/hn/documents/strongertogether.pdf>)
- California Collaborative for Education Excellence (CCEE), *The Continuity of Learning Playbooks* (<https://k12playbook.ccee-ca.org/>) and Supporting Families and Communities in Distance Learning CCEE Supporting Families and Communities (<https://ccee-ca.org/wp-content/uploads/2020/05/CCEE-Webinar-Community-Engagement-Initiative-Supporting-Families-and-Communities-in-Distance-Learning.pdf>)
- CCEE COVID-19 Distance Learning Technical Assistance resources (<https://ccee-ca.org/distance-learning.asp#TechnicalAssistance>)
- Support for English learners in response to COVID-19 (<https://www.cde.ca.gov/sp/el/er/covid19resources.asp>)
- Special Education Guidance in response to COVID-19 (<https://www.cde.ca.gov/ls/he/hn/specialedcovid19guidance.asp>)
- Support for Foster Youth in response to COVID-19 (<https://www.cde.ca.gov/ls/pf/fy/fyspcovid19.asp>)
- Support for Students and Families Experiencing Homelessness in response to COVID-19 (<https://www.cde.ca.gov/sp/hs/cy/>)

Additional Guidance and Resources can be found at the CDE Learning Continuity and Attendance Plan web page (<https://www.cde.ca.gov/re/lc/learningcontattendplan.asp>)

Responses to the prompts below should be specific, concise and clear, with the overall goal of promoting stakeholder understanding.

In responding to the prompts throughout the Learning Continuity Plan, an LEA may include information from an existing plan to the degree that it addresses the prompt and related instructions.

General Information

A description of the impact the COVID-19 pandemic has had on the LEA and its community.

Briefly provide information deemed relevant to enable a reader to more fully understand how the LEA's Learning Continuity Plan has been informed by the impacts the LEA and its community have experienced from the COVID-19 pandemic.

Stakeholder Engagement

Purpose

Stakeholder engagement has long been recognized as an important component of school planning and improvement. Meaningful stakeholder engagement has been linked to:

- An improved understanding of current needs and possible solutions
- More informed decision-making
- Greater trust between parties
- Stronger and longer lasting partnerships

An LEA must consult with parents, pupils, teachers, principals, administrators, other school personnel, and local bargaining units, in developing its Learning Continuity Plan.

During the consultation and stakeholder feedback process regarding the development of the Learning Continuity Plan, LEAs shall include efforts to reach pupils, families, educators, and other stakeholders who do not have internet access, or speak languages other than English.

Specifically, an LEA shall:

- Solicit recommendations and comments regarding the specific actions and expenditures proposed to be included in the Learning Continuity Plan, using the most efficient method of notification possible.

- Provide the opportunity to submit written comments regarding specific actions and expenditures proposed to be included in the Learning Continuity Plan.
- Present the Learning Continuity Plan to the Parent Advisory Committee and the English Learner Parent Advisory Committee separately for review and comment*
 - District and County Office of Education (COE) superintendents must respond in writing to comments received from these committees.
- Present the Learning Continuity Plan to the community at a public hearing of the governing board of the school district, the county office of education, or charter school for review and comment (the agenda must be posted at least 72 hours prior to the public hearing and include the location where the learning continuity and attendance plan will be available for public inspection).
- Adopt the Learning Continuity Plan in a public meeting of the governing board of the school district, the county office of education, or charter school that is held after, but not on the same day as, the public hearing held pursuant to California *Education Code (EC)* 43509.

*Applicable to School Districts and COEs only

Given the impacts of the COVID-19 pandemic on California's school communities, there has been an increased awareness of the importance and necessity for meaningful and timely stakeholder engagement. Information and resources that support effective stakeholder engagement, define student consultation, and provide the requirements for advisory group composition, can be found under *Resources* on the following web page of the CDE's website: <https://www.cde.ca.gov/re/lc>.

Senate Bill 98 (Statutes of 2020, Chapter 24) established the requirement for LEAs to develop a Learning Continuity Plan that is informed by stakeholder engagement. Furthermore, the bill codified provisions to promote remote participation and to address language accessibility.

Instructions

A description of the efforts made to solicit stakeholder feedback.

A sufficient response to this prompt will describe the overall stakeholder engagement process, including the efforts to reach pupils, families, educators, and other stakeholders who do not have internet access, or who speak languages other than English; and a description of how stakeholder engagement was considered before finalizing the Learning Continuity Plan.

A description of the options provided for remote participation in public meetings and public hearings.

A sufficient response to this prompt will describe how the LEA promoted stakeholder engagement, and the option(s) provided that allowed remote participation in the public hearings and local governing board meetings.

- A local governing board/body is authorized to hold public meetings via teleconferencing and to make public meetings accessible telephonically or otherwise electronically to all members of the public seeking to observe and to address the local legislative body or

state body consistent with the flexibility afforded by Executive Order N-29-20 (<https://www.gov.ca.gov/wp-content/uploads/2020/03/3.17.20-N-29-20-EO.pdf>), published on March 18, 2020.

A summary of the feedback provided by specific stakeholder groups.

A sufficient response to this prompt will describe and summarize the stakeholder feedback provided by specific stakeholders. A sufficient response to this prompt will indicate ideas, trends, or inputs that emerged from an analysis of the feedback received from stakeholders.

A description of the aspects of the Learning Continuity Plan that were influenced by specific stakeholder input.

A sufficient response to this prompt will provide stakeholders and the public with clear, specific information about how the stakeholder engagement process influenced the development of the Learning Continuity Plan. This response must describe aspects of the Learning Continuity Plan that were influenced by or developed in response to stakeholder feedback.

- For the purposes of this prompt, “aspects” may include sections or specific actions within a section of the Learning Continuity Plan that may have been influenced by stakeholder input.

Continuity of Learning

In-Person Instructional Offerings

Purpose

In-person instruction is defined in California *Education Code (EC)* Section 43500(b) to mean instruction under the immediate physical supervision and control of a certificated employee of the LEA.

Given the uncertainty of the impact of the COVID-19 pandemic, in-person instruction may not be immediately allowable under state and local health orders. However, LEAs must be prepared to offer in-person instruction when possible. A sufficient response will address the actions the LEA will take when health and safety allows a return to in-person instruction.

Instructions

A description of the actions the LEA will take to offer classroom-based instruction whenever possible, particularly for students who have experienced significant learning loss due to school closures in the 2019–2020 school year or are at a greater risk of experiencing learning loss due to future school closures.

A sufficient response to this prompt will describe the LEA’s classroom-based instructional schedule model, including how the LEA will ensure student learning and competency development while also considering a student’s social–emotional well-being.

- The LEA's classroom-based instructional schedule model should include plans and protocols to ensure the safety of students and staff, consistent with public health guidance, including considerations for campus access, hygiene practices, protective equipment, physical distancing, and cleaning and disinfecting to ensure physical health and safety in school facilities and vehicles.
- To identify students who have experienced significant learning loss due to the school closures in 2019-20, LEAs should consider and solidify a systematic cycle of assessments, including initial screenings and formative and summative assessments. LEAs may use this data to develop an instructional schedule model to address student needs with a focus on implementation of intervention strategies to accelerate learning for students at risk of experiencing continued learning challenges due to the impacts of COVID-19 and ongoing distance learning.

Actions Related to In-Person Instructional Offerings

For each action related to in-person instructional offerings, please enter the following information in the table:

- A description of what the action is. This may include a succinct description of how the action contributes to meeting the increased or improved services requirement for foster youth, English learners, or low-income students, as applicable. Enter the total amount of expenditures associated with this action; and
- Indicate whether the action contributes to meeting the increased or improved services requirement as described in the Increased or Improved Services section using a "Y" for Yes or an "N" for No.

Please add additional rows, as necessary.

Distance Learning Program

Continuity of Instruction

A description of how the LEA will provide continuity of instruction during the school year to ensure pupils have access to a full curriculum of substantially similar quality regardless of the method of delivery, including the LEA's plan for curriculum and instructional resources that will ensure instructional continuity for pupils if a transition between in-person instruction and distance learning is necessary.

A sufficient response to this prompt will:

- Include specific information that explains how the LEA will provide continuity of instruction and learning to ensure that pupils have access to a full curriculum of substantially similar quality regardless of the method of delivery; and
- Provide a succinct description of the curriculum and instructional resources that will be developed or utilized that will ensure instructional continuity for pupils if a transition between in-person instruction and distance learning is necessary.

Access to Devices and Connectivity

A description of how the LEA will ensure access to devices and connectivity for all pupils to support distance learning.

A sufficient response to this prompt will describe how the LEA will ensure access to devices and connectivity for all pupils to support distance learning whenever it occurs, including:

- The process used to ascertain the needs of students. In doing so, the LEA may consider the needs of teachers and families in order to ensure that students have access to devices and connectivity.
- The plan for ensuring access to devices and connectivity for all pupils to support distance learning, whenever it occurs, and for providing technological support to ensure access to devices and connectivity.
- Descriptions of the efforts of the LEA to ensure students and families with unique circumstances have access to devices and connectivity.
- Description of methods used to reach students and families who were unable to access devices and connectivity following school closure in the 2019-20 school year.

Pupil Participation and Progress

A description of how the LEA will assess pupil progress through live contacts and synchronous instructional minutes, and a description of how the LEA will measure participation and time value of pupil work.

A sufficient response to this prompt will provide specific information about how the LEA will track and monitor student progress through live contacts and synchronous instructional minutes, and a description of how the LEA will measure participation and time value of student work.

- Instructional time for distance learning is calculated based on the time value of synchronous and/or asynchronous assignments made and certified by a certificated employee of the LEA.

Distance Learning Professional Development

A description of the professional development and resources that will be provided to staff to support the distance learning program, including technological support.

A sufficient response to this prompt will provide specific information about the professional development and resources the LEA will provide to staff to support the distance learning program, including technological support.

- When responding to this prompt, an LEA may find it helpful to refer to the “Professional Learning and Relationships” section in the CDE’s *Stronger Together: A Guidebook for the Safe Reopening of California’s Public Schools* (<https://www.cde.ca.gov/ls/he/hn/documents/strongertogether.pdf>). This section includes essential questions for LEA planning, as well as models and best practices related to professional learning.

Staff Roles and Responsibilities

A description of the new roles and responsibilities of affected staff as a result of COVID-19.

A sufficient response to this prompt will describe how the LEA has adapted the roles and responsibilities of employees that have necessarily changed as a result of COVID-19 such as, but not limited to:

- Modifications made to staff roles and responsibilities to meet the academic and social-emotional needs of students while ensuring the health and safety of staff and students.
- Changes to an employee's original role or responsibility when that original role or responsibility is not feasible in a remote environment.

Supports for Pupils with Unique Needs

A description of the additional supports the LEA will provide during distance learning to assist pupils with unique needs, including English learners, pupils with exceptional needs served across the full continuum of placements, pupils in foster care, and pupils who are experiencing homelessness.

A sufficient response to this prompt must describe the additional support that the LEA will provide during distance learning to assist pupils with unique needs, including additional supports provided to the following groups:

- English learners;
- Pupils with exceptional needs served across the full continuum of placements;
- Pupils in foster care; and
- Pupils who are experiencing homelessness.

Actions Related to Distance Learning Program

For each action related to the Distance Learning Program, please enter the following information in the table:

- A description of what the action is. This may include a description of how the action contributes to meeting the increased or improved services requirement for foster youth, English learners, or low-income students, as applicable. Enter the total amount of expenditures associated with this action; and
- Indicate whether the action contributes to meeting the increase or improved services requirement as described in the Increased or Improved Services section using a "Y" for Yes or an "N" for No.

Please add additional rows, as necessary.

Pupil Learning Loss

A description of how the LEA will address pupil learning loss that results from COVID-19 during the 2019–2020 and 2020–21 school years, including how the LEA will assess pupils to measure learning status, particularly in the areas of English language arts, English language development, and mathematics.

A sufficient response to this prompt will describe how, with what tools, and at what frequency the LEA will assess pupils to measure learning status, within any instructional delivery model, particularly in the following areas:

- English language arts
- English language development (ELD)
- Mathematics

Pupil Learning Loss Strategies

A description of the actions and strategies the LEA will use to address learning loss and accelerate learning progress for pupils, as needed, including how these strategies differ for pupils who are English learners; low-income; foster youth; pupils with exceptional needs; and pupils who are experiencing homelessness.

A sufficient response to this prompt will include specific actions and describe the strategies used to address learning loss and accelerate learning progress. In addition, the response must include a description as to how these strategies differ for:

- English Learners;
- Low-income pupils;
- Foster youth;
- Pupils with exceptional needs; and
- Pupils who are experiencing homelessness.

Effectiveness of Implemented Pupil Learning Loss Strategies

A description of how the effectiveness of the services or supports provided to address learning loss will be measured.

A sufficient response to this prompt will describe how and by what methods the LEA will measure the effectiveness of services or supports provided to address learning loss.

- When responding to this prompt, an LEA may find it helpful to refer to the “Instructional Programs” section in the CDE’s *Stronger Together: A Guidebook for the Safe Reopening of California’s Public Schools* (<https://www.cde.ca.gov/ls/he/hn/documents/strongertogether.pdf>)

Actions to Address Pupil Learning Loss

For each action addressing Pupil Learning Loss, please enter the following information in the table below:

- A description of what the action is. This may include a description of how the action contributes to meeting the increased or improved services requirement for foster youth, English learners, or low-income students, as applicable. Enter the total amount of expenditures associated with this action; and
- Indicate whether the action contributes to meeting the increased or improved services requirement as described in the Increased or Improved Services section using a “Y” for Yes or an “N” for No.

Please add additional rows, as necessary.

Mental Health and Social and Emotional Well-Being

A description of how the LEA will monitor and support mental health and social and emotional well-being of pupils and staff during the school year, including the professional development and resources that will be provided to pupils and staff to address trauma and other impacts of COVID-19 on the school community.

A sufficient response to this prompt will describe how the LEA will support mental health and social and emotional well-being of pupils during the school year which includes:

- What professional development will be provided to staff.
- What resources will be provided to pupils and staff to address trauma and other impacts of COVID-19 on the school community.

When responding to this prompt, LEAs may find it helpful to consider the guidance provided on pages 34–36 in the “Mental Health and Well-Being of All” section in the CDE’s *Stronger Together: A Guidebook for the Safe Reopening of California’s Public Schools* (<https://www.cde.ca.gov/ls/he/hn/documents/strongertogether.pdf>).

Pupil and Family Engagement and Outreach

A description of pupil engagement and outreach, including the procedures for tiered reengagement strategies for pupils who are absent from distance learning and how the LEA will provide outreach to pupils and their parents or guardians, including in languages other than English, when pupils are not meeting compulsory education requirements, or if the LEA determines the pupil is not engaging in instruction and is at risk of learning loss.

A sufficient response to this prompt will provide a description of pupil engagement and outreach including:

- The procedures for tiered reengagement strategies for pupils who are absent from distance learning.
- How the LEA will provide outreach to all pupils and their parents and guardians, including in languages other than English, when pupils are not meeting compulsory education requirements or if the LEA determines the pupil is not engaging in instruction and is at risk of learning loss.

School Nutrition

A description of how the LEA will provide nutritionally adequate meals for all pupils, including those students who are eligible for free or reduced-price meals, when pupils are participating in both in-person instruction and distance learning, as applicable.

A sufficient response to this prompt will describe how the LEA will provide nutritionally adequate meals for all pupils, including those students who are eligible for free or reduced-price meals, when pupils are participating in both in-person instruction and distance learning, as applicable.

- When responding to this prompt, LEAs may find it helpful to consider the changes in food service operations provided on pages 43–44 in the “School Services” section in the CDE’s *Stronger Together: A Guidebook for the Safe Reopening of California’s Public Schools* (<https://www.cde.ca.gov/ls/he/hn/documents/strongertogether.pdf>).

Additional Actions to Implement the Learning Continuity Plan [additional rows and actions may be added as necessary]

This table should include additional actions related to the implementation of the Learning Continuity Plan that are not already included in the plan, including any actions related to the Mental Health and Social Emotional Well Being, Pupil and Family Engagement and Outreach, and School Nutrition Sections of the plan if needed. If applicable, please enter the following information in the table:

- The section of the Learning Continuity Plan related to the action described. If the actions and expenditures described in this table do not apply to one particular section the LEA may put “N/A.”
- A description of what the action is. This may include a succinct description of how the action contributes to meeting the increased or improved services requirement for foster youth, English learners, or low-income students, as applicable.

- Enter the total amount of expenditures associated with this action; and
- Indicate whether the action contributes to meeting the increased or improved services requirement as described in the Increased or Improved Services section using a “Y” for Yes or an “N” for No.

Please add additional rows, as necessary.

Increased or Improved Services for Foster Youth, English Learners, and Low-Income Students

Purpose

EC Section 43509 maintains the requirement for LEAs to describe how they are increasing or improving services for unduplicated pupils pursuant to *California Code of Regulations*, Title 5 (5 CCR) Section 15496. In developing the Learning Continuity Plan, LEAs are to consider the unique needs of foster youth, English learners, and low-income students.

The responses to the prompts in the Increased or Improved Services section of the Learning Continuity Plan provide stakeholders and the LEA community with a comprehensive description, within a single dedicated section, of how an LEA plans to increase or improve services for its unduplicated students as compared to all students.

Descriptions provided should include sufficient detail yet be sufficiently succinct to promote a broader understanding of stakeholders to facilitate their ability to provide input.

Requirements and Instructions

Percentage to Increase or Improve Services

Identify the percentage by which services for unduplicated pupils must be increased or improved as compared to the services provided to all students in the Learning Continuity Plan year as calculated pursuant to 5 CCR Section 15496(a)(7).

Increased Apportionment Based on the Enrollment of Foster Youth, English Learners, and Low-Income Students

Specify the estimate of the amount of funds apportioned on the basis of the number and concentration of unduplicated pupils for the Learning Continuity Plan.

Required Descriptions

For the actions being provided to an entire school, or across the entire school district or county office of education (COE), an explanation of (1) how the needs of foster youth, English learners, and low-income students were considered first, and (2) how these actions are effective in meeting the needs of these students.

For the actions included in the Learning Continuity Plan and marked as contributing to the increased or improved services requirement for foster youth, English learners, and low-income students and that are being provided on an LEA-wide or schoolwide basis, provide a general explanation of these actions consistent with 5 CCR Section 15496(b).

Principally Directed and Effective: For these actions, explain how:

- The LEA considered the needs, conditions, or circumstances of its unduplicated pupils as a result of COVID-19;
- The action, or aspect(s) of the action (including, for example, its design, content, methods, or location), is based on these considerations; and
- The action is intended to meet the needs of the students in response to the COVID-19 pandemic.

A description of how services for foster youth, English learners, and low-income students are being increased or improved by the percentage required.

Consistent with the requirements of 5 CCR Section 15496, describe how the services marked in the Learning Continuity Plan as contributing to the increased or improved services requirement for foster youth, English learners, and low-income students contribute to meeting the percentage calculated as compared to the services provided for all students. Additionally, consistent with the requirements of 5 CCR Section 15496, please describe any other actions or services that contribute towards meeting the increased or improved services requirement.

- To improve services means to grow services in quality and to increase services means to grow services in quantity.

A sufficient description to this prompt must address how the action(s) are expected to result in the required proportional increase or improvement in services for unduplicated pupils as compared to the services the LEA provides to all students.

EXHIBIT HH

California Department of Education, July 2020

Learning Continuity and Attendance Plan Template (2020–21)

The instructions for completing the Learning Continuity and Attendance Plan is available at

<https://www.cde.ca.gov/re/lc/documents/lrngcntntyatndncpln-instructions.docx>.

Local Educational Agency (LEA) Name	Contact Name and Title	Email and Phone
[Insert LEA Name here]	[Insert Contact Name and Title here]	[Insert Email and Phone here]

General Information

[A description of the impact the COVID-19 pandemic has had on the LEA and its community.]

[Respond here]

Stakeholder Engagement

[A description of the efforts made to solicit stakeholder feedback.]

[Respond here]

[A description of the options provided for remote participation in public meetings and public hearings.]

[Respond here]

[A summary of the feedback provided by specific stakeholder groups.]

[Respond here]

[A description of the aspects of the Learning Continuity and Attendance Plan that were influenced by specific stakeholder input.]

[Respond here]

Continuity of Learning

In-Person Instructional Offerings

[A description of the actions the LEA will take to offer classroom-based instruction whenever possible, particularly for students who have experienced significant learning loss due to school closures in the 2019–2020 school year or are at a greater risk of experiencing learning loss due to future school closures.]

[Respond here]

Actions Related to In-Person Instructional Offerings [additional rows and actions may be added as necessary]

Description	Total Funds	Contributing
[A description of what the action is; may include a description of how the action contributes to increasing or improving services]	[\$ 0.00]	[Y/N]
[A description of what the action is; may include a description of how the action contributes to increasing or improving services]	[\$ 0.00]	[Y/N]

Distance Learning Program

Continuity of Instruction

[A description of how the LEA will provide continuity of instruction during the school year to ensure pupils have access to a full curriculum of substantially similar quality regardless of the method of delivery, including the LEA’s plan for curriculum and instructional resources that will ensure instructional continuity for pupils if a transition between in-person instruction and distance learning is necessary.]

[Respond here]

Access to Devices and Connectivity

[A description of how the LEA will ensure access to devices and connectivity for all pupils to support distance learning.]

[Respond here]

Pupil Participation and Progress

[A description of how the LEA will assess pupil progress through live contacts and synchronous instructional minutes, and a description of how the LEA will measure participation and time value of pupil work.]

[Respond here]

Distance Learning Professional Development

[A description of the professional development and resources that will be provided to staff to support the distance learning program, including technological support.]

[Respond here]

Staff Roles and Responsibilities

[A description of the new roles and responsibilities of affected staff as a result of COVID-19.]

[Respond here]

Supports for Pupils with Unique Needs

[A description of the additional supports the LEA will provide during distance learning to assist pupils with unique needs, including English learners, pupils with exceptional needs served across the full continuum of placements, pupils in foster care, and pupils who are experiencing homelessness.]

[Respond here]

Actions Related to the Distance Learning Program [additional rows and actions may be added as necessary]

Description	Total Funds	Contributing
[A description of what the action is; may include a description of how the action contributes to increasing or improving services]	[\$ 0.00]	[Y/N]
[A description of what the action is; may include a description of how the action contributes to increasing or improving services]	[\$ 0.00]	[Y/N]

Pupil Learning Loss

[A description of how the LEA will address pupil learning loss that results from COVID-19 during the 2019–2020 and 2020–21 school years, including how the LEA will assess pupils to measure learning status, particularly in the areas of English language arts, English language development, and mathematics.]

[Respond here]

Pupil Learning Loss Strategies

[A description of the actions and strategies the LEA will use to address learning loss and accelerate learning progress for pupils, as needed, including how these strategies differ for pupils who are English learners; low-income; foster youth; pupils with exceptional needs; and pupils experiencing homelessness.]

[Respond here]

Effectiveness of Implemented Pupil Learning Loss Strategies

[A description of how the effectiveness of the services or supports provided to address learning loss will be measured.]

[Respond here]

Actions to Address Pupil Learning Loss [additional rows and actions may be added as necessary]

Description	Total Funds	Contributing
[A description of what the action is; may include a description of how the action contributes to increasing or improving services]	[\$ 0.00]	[Y/N]
[A description of what the action is; may include a description of how the action contributes to increasing or improving services]	[\$ 0.00]	[Y/N]

Mental Health and Social and Emotional Well-Being

[A description of how the LEA will monitor and support mental health and social and emotional well-being of pupils and staff during the school year, including the professional development and resources that will be provided to pupils and staff to address trauma and other impacts of COVID-19 on the school community.]

[Respond here]

Pupil and Family Engagement and Outreach

[A description of pupil engagement and outreach, including the procedures for tiered reengagement strategies for pupils who are absent from distance learning and how the LEA will provide outreach to pupils and their parents or guardians, including in languages other than English, when pupils are not meeting compulsory education requirements, or if the LEA determines the pupil is not is not engaging in instruction and is at risk of learning loss.]

[Respond here]

School Nutrition

[A description of how the LEA will provide nutritionally adequate meals for all pupils, including those students who are eligible for free or reduced-price meals, when pupils are participating in both in-person instruction and distance learning, as applicable.]

[Respond here]

Additional Actions to Implement the Learning Continuity Plan [additional rows and actions may be added as necessary]

Section	Description	Total Funds	Contributing
[The section of the Learning Continuity Plan related to the action described; may put N/A if the action does not apply to one specific section]	[A description of what the action is; may include a description of how the action contributes to increasing or improving services]	[\$ 0.00]	[Y/N]
[The section of the Learning Continuity Plan related to the action described; may put N/A if the action does not apply to one specific section]	[A description of what the action is; may include a description of how the action contributes to increasing or improving services]	[\$ 0.00]	[Y/N]

EXHIBIT U

8/8/2020

CountyMonitoringData- Step 3

COVID-19

County Data Monitoring

Step 3: Reinstitute Community Measures

County Data Chart

If the county has insufficient progress, on containing their disease transmission and hospitalization rates, a county should consider reinstating sector limitations or more general Stay-at-Home provisions. If the county makes insufficient or no progress, the State Public Health Officer may take action.

Links:

- [County Data Monitoring Overview](#)
- [County Data Chart](#)
- [Step 1: Active Data Monitoring](#)
- [Step 2: Targeted Engagement with CDPH](#)
- [Step 3: Reinstitute Community Measures](#)

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CountyMonitoringData- Step 3

EXHIBIT V

8/8/2020

State Officials Announce Latest COVID-19 Facts

OFFICE OF PUBLIC AFFAIRS

State Officials Announce Latest COVID-19 Facts

Date: July 31, 2020

Number: NR20-179

Contact: CDPHpress@cdph.ca.gov

State confirms first death of a young person related to COVID-19

SACRAMENTO – The California Department of Public Health (CDPH) confirmed today the COVID-related death of a teenager in the Central Valley. This is the first death in California of a teenager, and this young person had underlying health conditions. Due to patient confidentiality, CDPH will not provide any additional information about this death. There have been no reported deaths in younger age categories, including children 5 and under.

"Our hearts go out to the family and loved ones of this young person whose death is a tragic and powerful reminder of how serious COVID-19 can be," said Dr. Sonia Angell, State Public Health Officer and Director of the California Department of Public Health.

The most recent statistics on COVID-19 are as follows:

- The 7-day average number of new cases is 8,322 per day. The 7-day average from the week prior was 9,881. California has 493,588 confirmed cases to date. Numbers may not represent true day-over-day change as reporting of test results can be delayed.
- There have been 7,811,041 tests conducted in California. This represents an increase of 177,201 over the prior 24-hour reporting period. As testing capacity continues to increase across the state, an increase in the number of positive cases has been expected – increasing the importance of positivity rates to find signs of community spread.
- As case numbers continue to rise in California, the total number of individuals who will have serious outcomes will also increase. There have been 9,005 COVID-19 deaths since the start of the pandemic. There have been 9,005 COVID-19 deaths since the start of the pandemic.
- A total of 37 counties are required to close indoor operations for certain sectors based on the July 13

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State Officials Announce Latest COVID-19 Facts

order to slow community transmission.



Note on Hospitalization Numbers

Since July 23, hospitalization numbers reflect a change in reporting requirements that were implemented last week by the U.S. Department of Health and Human Services. The change resulted in historical data from eight non-reporting facilities not being part of recent updates, resulting in lower numbers. This data will be added back in as soon as it is available.

Data and Tools

A wide range of data and analysis guides California's response to COVID-19. The state is making the data and its analytical tools available to researchers, scientists and the public at covid19.ca.gov.

Popular links include:

- [The Statewide COVID-19 Dashboard](#)
- [The California COVID-19 Assessment Tool \(CalCAT\)](#)
- [State Cases and Deaths Associated with COVID-19 by Age Group](#)
- [COVID-19 Race & Ethnicity Data](#)
- [COVID-19 Hospital Data and Case Statistics](#)
- View additional datasets at the [California Open Data Portal](#) (Including: Testing Data, PPE Logistics Data, Hospital Data, Homeless Impact and more)

Multisystem Inflammatory Syndrome in Children (MIS-C)

Each week, the California Department of Public Health updates the number of cases of Multisystem Inflammatory Syndrome in Children (MIS-C) reported in the state. As of July 28, 25 cases of MIS-C have been reported statewide. To protect patient confidentiality in counties with fewer than 11 cases, we are not providing total counts at this time.

MIS-C is a rare inflammatory condition associated with COVID-19 that can damage multiple organ systems. MIS-C can require hospitalization and be life threatening. Parents should be aware of the signs and symptoms of MIS-C including fever that does not go away, abdominal pain,

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vomiting, diarrhea, neck pain, rash, bloodshot eyes or feeling tired. Contact your child's doctor immediately if your child has these symptoms. Early diagnosis and treatment of patients is critical to preventing long-term complications.

Racial Demographics – A More Complete Picture

The California Department of Public Health is committed to health equity and collecting more detailed racial and ethnic data that will provide additional understanding for determining future action. Health outcomes are affected by forces including structural racism, poverty and the disproportionate prevalence of underlying conditions such as asthma and heart disease among Latinos and African American Californians. Only by looking at the full picture can we understand how to ensure the best outcomes for all Californians.

The differences in health outcomes related to COVID-19 are most stark in COVID-19 deaths. We have nearly complete data on race and ethnicity for COVID-19 deaths, and we are seeing the following trends: Latinos, African Americans, Native Hawaiians and Pacific Islanders are dying at disproportionately higher levels. More males are dying from COVID-19 than females, in line with national trends. More information is available at [COVID-19 Race and Ethnicity Data](#).

Health Care Worker Infection Rates

As of July 29, local health departments have reported 23,513 confirmed positive cases in health care workers and 127 deaths statewide.

County Monitoring Data

California is using data and science to respond to COVID-19. Data by county gives Californians insight into how their county is doing and provides an early indication of developing areas of concern. Counties on the [County Monitoring List](#) for three or more consecutive days – currently 37 counties accounting for the majority of the state's population – must [close indoor operations](#) for additional activities.

For more information, visit the [County Data Monitoring webpage](#).

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State Officials Announce Latest COVID-19 Facts



Your Actions Save Lives

Every person has a role to play. Protecting yourself and your family comes down to common sense:

- Staying home except for essential needs/activities following local and state public health guidelines when patronizing approved businesses. To the extent that such sectors are re-opened, Californians may leave their homes to work at, patronize, or otherwise engage with those businesses, establishments or activities.
- Practicing social distancing.
- Wearing a cloth face mask when out in public.
- Washing hands with soap and water for a minimum of 20 seconds.
- Avoiding touching eyes, nose or mouth with unwashed hands.
- Covering a cough or sneeze with your sleeve, or disposable tissue. Wash your hands afterward.
- Avoiding close contact with people who are sick.
- Staying away from work, school or other people if you become sick with respiratory symptoms like fever and cough.
- Answer the call if a contact tracer from the CA COVID Team or your local health department tries to connect. Contact tracers will connect you to free, confidential testing and other resources, if needed.
- Following guidance from public health officials.

What to Do if You Think You're Sick

Call ahead: If you are experiencing symptoms of COVID-19 (fever, cough or shortness of breath), call your health care provider before seeking medical care so that appropriate precautions can be taken. More than 100 community testing sites also offer free, confidential testing: [Find a COVID-19 Testing Site](#).

For more information about what Californians can do to prevent the spread of COVID-19, visit [Coronavirus \(COVID-19\) in California](#).

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California continues to issue guidance on preparing and protecting California from COVID-19. Consolidated guidance is available on the [California Department of Public Health's Guidance web page](#).

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EXHIBIT W



Morbidity and Mortality Weekly Report (MMWR)

Weekly / August 7, 2020 / 69(31);1023–1025

On July 31, 2020, this report was posted online as an MMWR Early Release.

Christine M. Szablewski, DVM^{1,2}; Karen T. Chang, PhD^{2,3}; Marie M. Brown, MPH¹; Victoria T. Chu, MD^{2,3}; Anna R. Yousaf, MD^{2,3}; Ndubuisi Anyalechi, MD¹; Peter A. Aryee, MBA¹; Hannah L. Kirking, MD²; Maranda Lumsden¹; Erin Mayweather¹; Clinton J. McDaniel, MPH²; Robert Montierth, PharmD²; Asfia Mohammed¹; Noah G. Schwartz, MD^{2,3}; Jaina A. Shah¹; Jacqueline E. Tate, PhD²; Emilio Dirlikov, PhD²; Cherie Drenzek, DVM¹; Tatiana M. Lanzieri, MD²; Rebekah J. Stewart, MSN, MPH² ([View author affiliations](#))

[View suggested citation](#)

Limited data are available about transmission of SARS-CoV-2, the virus that causes coronavirus disease 2019 (COVID-19), among youths. During June 17–20, an overnight camp in Georgia (camp A) held orientation for 138 trainees and 120 staff members; staff members remained for the first camp session, scheduled during June 21–27, and were joined by 363 campers and three senior staff members on June 21. Camp A adhered to the measures in Georgia’s Executive Order* that allowed overnight camps to operate beginning on May 31, including requiring all trainees, staff members, and campers to provide documentation of a negative viral SARS-CoV-2 test ≤12 days before arriving. Camp A adopted most† components of CDC’s Suggestions for Youth and Summer Camps⁵ to minimize the risk for SARS-CoV-2 introduction and transmission. Measures not implemented were cloth masks for campers and opening windows and doors for increased ventilation in buildings. Cloth masks were required for staff members. Camp attendees were cohorted by cabin and engaged in a variety of indoor and outdoor activities, including daily vigorous singing and cheering. On June 23, a teenage staff member left camp A after developing chills the previous evening. The staff member was tested and reported a positive test result for SARS-CoV-2 the following day (June 24). Camp A officials began sending campers home on June 24 and closed the camp on June 27. On June 25, the Georgia Department of Public Health (DPH) was notified and initiated an investigation. DPH recommended that all attendees be tested and self-quarantine, and isolate if they had a positive test result.

A line list of all attendees was obtained and matched to laboratory results from the State Electronic Notifiable Disease Surveillance System[¶] and data from DPH case investigations. A COVID-19 case associated with the camp A outbreak was defined as a positive viral SARS-CoV-2 test** in a camp A attendee from a specimen collected or reported to DPH from the first day at camp A (June 17 for staff members and trainees; June 21 for campers) through 14 days after leaving camp A (trainees left on June 21; staff members and campers left during June 24–June 27). Out-of-state attendees (27) were excluded from this preliminary analysis. Attack rates were calculated by dividing the number of persons with positive test results by the total number of Georgia attendees, including those who did not have testing results, because negative test results are not consistently reported in Georgia.

A total of 597 Georgia residents attended camp A. Median camper age was 12 years (range = 6–19 years), and 53% (182 of 346) were female. The median age of staff members and trainees was 17 years (range = 14–59 years), and 59% (148 of 251) were female. Test results were available for 344 (58%) attendees; among these, 260 (76%) were positive. The overall attack rate was 44% (260 of 597), 51% among those aged 6–10 years, 44% among those aged 11–17 years, and 33% among those aged 18–21 years (Table). Attack rates increased with increasing length of time spent at the camp, with staff members having the highest attack rate (56%). During June 21–27, occupancy of the 31 cabins averaged 15 persons per cabin (range = 1–26); median cabin attack rate was 50% (range = 22%–70%) among 28 cabins that had one or more cases. Among 136 cases with available symptom data, 36 (26%) patients reported no symptoms; among 100 (74%) who reported symptoms, those most commonly reported were subjective or documented fever (65%), headache (61%), and sore throat (46%).

The findings in this report are subject to at least three limitations. First, attack rates presented are likely an underestimate because cases might have been missed among persons not tested or whose test results were not reported. Second, given the increasing incidence of COVID-19 in Georgia in June and July, some cases might have resulted from transmission occurring before or after camp attendance.^{††} Finally, it was not possible to assess individual adherence to COVID-19 prevention measures at camp A, including physical distancing between, and within, cabin cohorts and use of cloth masks, which were not required for campers.

These findings demonstrate that SARS-CoV-2 spread efficiently in a youth-centric overnight setting, resulting in high attack rates among persons in all age groups, despite efforts by camp officials to implement most recommended strategies to prevent transmission. Asymptomatic infection was common and potentially contributed to undetected transmission, as has been previously reported (1–4). This investigation adds to the body of evidence demonstrating that children of all ages are susceptible to SARS-CoV-2 infection (1–3) and, contrary to early reports (5,6), might play an important role in transmission (7,8). The multiple measures adopted by the camp were not sufficient to prevent an outbreak in the context of substantial community transmission. Relatively large cohorts sleeping in the same cabin and engaging in regular singing and cheering likely contributed to transmission (9). Use of cloth masks, which has been shown to reduce the risk for infection (10), was not universal. An ongoing investigation will further characterize specific exposures associated with infection, illness course, and any secondary transmission to household members. Physical distancing and consistent and correct use of cloth masks should be emphasized as important strategies for mitigating transmission in congregate settings.

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Corresponding author: Christine M. Szablewski, christine.szablewski@dph.ga.gov.

¹Georgia Department of Public Health; ²CDC COVID-19 Response Team; ³Epidemic Intelligence Service, CDC.

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All authors have completed and submitted the International Committee of Medical Journal Editors form for disclosure of potential conflicts of interest. No potential conflicts of interest were disclosed.

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* <https://gov.georgia.gov/document/2020-executive-order/06112001/download> .

† Notable adopted measures included cohorting of attendees by cabin (≤26 persons), staggering of cohorts for use of communal spaces, physical distancing outside of cabin cohorts, and enhanced cleaning and disinfection, especially of shared equipment and spaces.

§ <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/summer-camps.html>.

¶ <http://sendss.state.ga.us/> .

** CDC defines a viral test as one that detects SARS-CoV-2 nucleic acids (e.g., polymerase chain reaction) or antigens. <https://www.cdc.gov/coronavirus/2019-ncov/hcp/testing-overview.html>.

†† <https://dph.georgia.gov/covid-19-daily-status-report> .

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TABLE. SARS-CoV-2 attack rates*[†] among attendees of an overnight camp, by selected characteristics — Georgia, June 2020



Characteristic	No. [§]	No. positive	Attack rate, %
Total	597	260	44
Sex			
Male	267	123	46
Female	330	137	42
Age group, yrs			
6–10	100	51	51
11–17	409	180	44
18–21	81	27	33
22–59	7	2	29
Type of attendee (dates attended camp)			
Trainee (June 17–21)	134	26	19
Staff member (June 17–27 ^{¶,**})	117	66	56

Characteristic	No. [§]	No. positive	Attack rate, %
Camper (June 21–27 [¶])	346	168	49
Cabin size during camp^{**} (no. of persons/cabin)^{§§}			
Small (1–3)	13	5	38
Medium (7–13)	75	29	39
Large (16–26)	375	200	53

Abbreviation: COVID-19 = coronavirus disease 2019.

* Although positive and negative test results for Georgia residents are reportable in the state of Georgia, negative results are not consistently reported. Attack rates were calculated by dividing the number of persons with a positive test result reported to the Georgia Department of Public Health (DPH) by the total number of Georgia attendees, including those who did not provide testing results.

† A COVID-19 case associated with the camp outbreak was defined as a positive viral SARS-CoV-2 test in an attendee from a specimen collected or reported to DPH from the first day at camp A (June 17 for staff members, including trainees; June 21 for campers) through 14 days after leaving camp A (trainees left on June 21; staff members and campers left during June 24–June 27).

§ Out-of-state attendees' (n = 27; 4%) test results were not reported to DPH and therefore were not included in this analysis.

¶ Camp departures began June 24 and were completed June 27.

** Three staff members arrived June 21.

†† Among camp attendees during June 21–27 (n = 463).

§§ No cabins included 4–6 or 14–15 persons.

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Page last reviewed: August 6, 2020

EXHIBIT X

8/8/2020

All These Schools Reopened and Then Had COVID-19 Outbreaks

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Fatherly

All These Schools Reopened and Then Had COVID-19 Outbreaks

Tara Santora 1 day ago

f t w e

Schools across the country are beginning to reopen for in-person classes, which means students and teachers are starting to get sick with COVID-19 — and it's only August. No one knows how badly opening schools' doors will propel the pandemic, or how many kids and teachers will be infected, hospitalized, and die. But looking at these early openers can give us a sense of what's to come.



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>

Districts are taking different precautions to prevent outbreaks, and some are more effective than others. Kids and teachers at some schools must wear masks at all times, but other schools either don't require everyone to wear a mask or aren't strict about enforcing mask rules. Some have cut class sizes, limited contact between different groups of students, and moved classes outside or to larger classrooms. And some screen students or ask their families' to screen them for symptoms. The problem with screening, of course, is that about 40% of cases are asymptomatic, and people who are infected without symptoms can spread the disease around their school unknowingly.

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Fatherly has collected information about as many COVID-19 cases linked to school reopenings as we could find. Not all of them were *caused* by the schools reopening per se. In fact, cases at this early point have mostly been in teachers and students who were infected before classes started. But the school outbreaks will come, and we'll be updating this list to catch them.

Here are the COVID-19 cases that have impacted schools in the US by state:

Florida

- **School Name: Samoset Elementary**
- COVID-19 Cases: 1 employee during reopening prep

Georgia

- **School Name: Cherokee County School District**
 - COVID-19 Cases: 1 middle school student, 2 elementary school students, and 1 kindergarten teacher
- **School Name: Gwinnett County Public Schools**
 - COVID-19 Cases: 260 teachers positive or potentially exposed

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<https://www.msn.com/en-us/lifestyle/parenting/all-these-schools-reopened-and-then-had-covid-19-outbreaks/ar-BB17BkIq>

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All These Schools Reopened and Then Had COVID-19 Outbreaks

- **School Name: North Paulding High School**
 - COVID-19 Cases: An unspecified number of football players and multiple staff members
- **School Name: Mission Road Elementary School**
 - COVID-19 Cases: 4 staff members during reopening prep
- **School Name: Marietta City Schools**
 - COVID-19 Cases: 5 confirmed and 1 presumptive staff members during reopening prep
- **School Name: Harlem High School**
 - COVID-19 Cases: 1 student
- **School Name: Chattooga High School**
 - COVID-19 Cases: 2 students after reopening

Illinois

- **School Name: Lake Zurich High School**
 - COVID-19 Cases: 36+ students, traced back to the school's summer sports camps and social gatherings

Indiana

- **School Name: Elwood Junior Senior High School**
 - COVID-19 Cases: 1 teacher during school reopening prep
- **School Name: Greenfield Central Junior High School**
 - COVID-19 Cases: 1 student
- **School Name: Brownsburg High School**
 - COVID-19 Cases: 1 student
- **School Name: Avon High School**
 - COVID-19 Cases: 1 student and 1 employee
- **School Name: New Palestine High School**
 - COVID-19 Cases: 1 football player during season and 1 other student during classes
- **School Name: Edinburgh High School**
 - COVID-19 Cases: 1 student
- **School Name: Warren Central High School**
 - COVID-19 Cases: 1 football player during preseason
- **School Name: Indian Creek High School**
 - COVID-19 Cases: 1 football coach during preseason
- **School Name: Beech Grove High School**
 - COVID-19 Cases: 1 person connected to the football and boys' basketball teams during preseason
- **School Name: Fishers High School**
 - COVID-19 Cases: 1 football player during preseason
- **School Name: Lanesville Junior-Senior High School**
 - COVID-19 Cases: 4 students after reopening
- **School Name: Greater Clark County Schools**
 - COVID-19 Cases: 2 students after reopening
- **School Name: Castle High School**
 - COVID-19 Cases: 1 administrator during reopening prep

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<https://www.msn.com/en-us/lifestyle/parenting/all-these-schools-reopened-and-then-had-covid-19-outbreaks/ar-BB17BkIq>

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All These Schools Reopened and Then Had COVID-19 Outbreaks

Louisiana

- **School Name: Jefferson Parish School District**
 - COVID-19 Cases: a "handful" of teachers during reopening prep

Mississippi

- **School Name: Corinth School District**
 - COVID-19 Cases: 5 high school students, 1 middle school student, and 1 elementary school employee

New York

- **School Name: Shaker High School**
 - COVID-19 Cases: 1 employee at the school's Extended School Year program

North Carolina

- **School Name: Thales Academy in Wake Forest**
 - COVID-19 Cases: 1 elementary school student
- **School Name: Asheville City Schools**
 - COVID-19 Cases: 2 middle school and 2 high school athletes during preseason

Pennsylvania

- **School Name: Shippensburg Area Senior High School**
 - COVID-19 Cases: 1 football player during preseason

Tennessee

- **School Name: Alcoa City Schools**
 - COVID-19 Cases: 3 high school students, 1 middle school student, 1 elementary school student

Texas

- **School Name: Mason High School**
 - COVID-19 Cases: 1 football coach during preseason

Virginia

- **School Name: Shirley Heim Middle School**
 - COVID-19 Cases: An unspecified number of staff during reopening prep

This story is developing. We will update it as new information becomes available.

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THE CORONAVIRUS CRISIS

After Reopening Schools, Israel Orders Them To Shut If COVID-19 Cases Are Discovered

June 3, 2020 · 11:32 AM ET



DANIEL ESTRIN



Students wear masks May 17 outside a school in the Israeli city of Modiin. Israeli students in all grades went back to school last month.

Xinhua News Agency/Getty Images

Two weeks after Israel fully reopened schools, a COVID-19 outbreak sweeping through classrooms — including at least 130 cases at a single school — has led officials to close dozens of schools where students and staff were infected. A new policy orders any school where a virus case emerges to close.

The government decision, announced Wednesday evening, comes after more than 200 cases have been confirmed among students and staff at various schools. At least 244 students and school employees have tested positive for the coronavirus, according to the Ministry of Education. At least 42 kindergartens and schools have been shuttered

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indefinitely. More than 6,800 students and teachers are in home quarantine by government order.

It's an abrupt reversal of the post-pandemic spirit in Israel as officials lifted most remaining coronavirus restrictions last week. With fewer than 300 deaths in Israel, Prime Minister Benjamin Netanyahu had declared victory in early May over the pandemic and last week told Israelis to go to restaurants and "enjoy yourselves."

But by the weekend, the spike in cases led him to consider reimposing restrictions, including closing all schools. The education minister, Yoav Gallant, argued that the overall number of virus cases in Israeli schools remains low and closing them all would not be justified.

Article continues below

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Schools first began to reopen in early May, with classes staggered in smaller groups or "capsules" of students to prevent a wide outbreak. By May 17, limitations on class size were lifted.

The most significant outbreak appeared last week in the Gymnasia Rehavia, a historic middle and high school in Jerusalem. There, 116 students and 14 teachers were infected, according to the Ministry of Education, and the school closed. Built in 1928, its graduates include prominent novelists, politicians and Netanyahu's late brother.

Health officials said they're investigating how the virus spread there. A teacher told NPR a seventh-grader was first discovered to be carrying the virus and the entire grade was ordered to quarantine at home. Then a ninth-grader tested positive, and the school was shut down.

"It was a mistake to go back to school in this format," the teacher said. She spoke on condition of anonymity because teachers were ordered not to speak with the press and she feared losing her job if identified.

Across Israel, many parents have yanked their children from schools that remain open. When the Collège des Frères, a French Roman Catholic school in the city of Jaffa, announced that the father of some students had tested positive for the virus, his

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children's classmates were sent home — but other parents pulled their children out, too.

Dr. Arnon Afek, who is helping manage Israel's coronavirus response, played down the outbreak, saying a spike in cases was expected when schools reopened. "It wasn't a surprise," he said. "It happened also in South Korea and Singapore."

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EXHIBIT Z

8/9/2020

When Covid Subsided, Israel Reopened Its Schools. It Didn't Go Well. - The New York Times

The New York Times | <https://nyti.ms/3k7S8eb>

When Covid Subsided, Israel Reopened Its Schools. It Didn't Go Well.

As countries consider back-to-school strategies for the fall, a coronavirus outbreak at a Jerusalem high school offers a cautionary tale.



By Isabel Kershner and Pam Belluck

Aug. 4, 2020

JERUSALEM — As the United States and other countries anxiously consider how to reopen schools, Israel, one of the first countries to do so, illustrates the dangers of moving too precipitously.

Confident it had beaten the coronavirus and desperate to reboot a devastated economy, the Israeli government invited the entire student body back in late May. Within days, infections were reported at a Jerusalem high school, which quickly mushroomed into the largest outbreak in a single school in Israel, possibly the world. The virus rippled out to the students' homes and then to other schools and neighborhoods, ultimately infecting hundreds of students, teachers and relatives. Other outbreaks forced hundreds of schools to close. Across the country, tens of thousands of students and teachers were quarantined.

Israel's advice for other countries?

"They definitely should not do what we have done," said Eli Waxman, a professor at the Weizmann Institute of Science and chairman of the team advising Israel's National Security Council on the pandemic. "It was a major failure."

The lesson, experts say, is that even communities that have gotten the spread of the virus under control need to take strict precautions when reopening schools. Smaller classes, mask wearing, keeping desks six feet apart and providing adequate ventilation, they say, are likely to be crucial until a vaccine is available.

"If there is a low number of cases, there is an illusion that the disease is over," said Dr. Hagai Levine, a professor of epidemiology at Hebrew University-Hadassah School of Public Health. "But it's a complete illusion."

"The mistake in Israel," he said, "is that you can open the education system, but you have to do it gradually, with certain limits, and you have to do it in a very careful way."

The United States is facing similar pressures to fully reopen schools, and President Trump has threatened to withhold funding for districts that don't reopen. But the U.S. is in a far worse position than Israel was in May: Israel had fewer than 100 new infections a day then. The U.S. is now averaging more than 60,000 new cases a day, and some states continue to set alarming records.

Israel's handling of the pandemic was considered successful at first. The country of nine million quickly closed its borders, shuttered schools in mid-March and introduced remote learning for its two million students. In April, Passover and Ramadan were celebrated under lockdown.



The Western Wall in Jerusalem was nearly deserted when Israel was locked down in April. Dan Biality for The New York Times

By early May, infection rates had fallen from more than 750 confirmed cases a day to double digits. The youngest students, grades three and under, and older students taking final exams returned in small groups, splitting the week to take turns using classrooms.

<https://www.nytimes.com/2020/08/04/world/middleeast/coronavirus-israel-schools-reopen.html>

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When Covid Subsided, Israel Reopened Its Schools. It Didn't Go Well. - The New York Times

Then, emboldened by the dropping infection rates, the government completely reopened schools on May 17, the day a new government was sworn in.

In his inaugural speech, Prime Minister Benjamin Netanyahu promised a new budget that would deliver three things: "Jobs, jobs, jobs." His new education minister, Yoav Gallant, said that the school system's "immediate mission" was to allow parents to return to work with peace of mind.

Inna Zaltsman, an Education Ministry official, said administrators also wanted "to return the children to routine as much as possible, for their emotional and pedagogic well-being."

Shopping malls, outdoor markets and gyms had already reopened, and soon houses of worship, restaurants, bars, hotels and wedding halls did too. Mr. Netanyahu told Israelis to grab a beer and, while taking precautions, "Go out and have a good time."

In hindsight, that advice was wildly premature.

That same day, a mother phoned a teacher at Jerusalem's historic Gymnasia Ha'ivrit high school. Her son, a seventh-grade student there, had tested positive for the virus.

By the next day, the school confirmed another case in the ninth grade. Ultimately, Israeli officials said, 154 students and 26 staff members were found to be infected.



As Israel began to relax its restrictions in May, street life returned to Tel Aviv. Dan Bailey for The New York Times

"There was a general euphoria among the public, a sense that we had dealt with the first wave well and that it was behind us," said Danniell Leibovitch, Gymnasia's principal. "Of course, that wasn't true."

The Education Ministry had issued safety instructions: Masks were to be worn by students in fourth grade and higher, windows kept open, hands washed frequently and students kept six feet apart whenever possible.

But in many Israeli schools, where up to 38 children squeeze into classrooms of about 500 square feet, physical distancing proved impossible.

Unable to comply with the rules, some local authorities ignored them or simply decided not to reopen at full capacity.

Then a heat wave hit. Parents complained that it was inhumane to make children wear masks in steaming classrooms where open windows nullified the air conditioning.

In response, the government exempted everyone from wearing masks for four days, and schools shut the windows.

That decision proved disastrous, experts say.

"Instead of canceling school in those days, they just told the kids 'OK, well you have to stay in the class with the air conditioning on and take your masks off,' so you have no ventilation really," said Dr. Ronit Calderon-Margalit, a professor of epidemiology at Hebrew University-Hadassah Braun School of Public Health. "You have the ideal circumstances for an outbreak."

The Gymnasia became a petri dish for Covid-19.

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When Covid Subsided, Israel Reopened Its Schools. It Didn't Go Well. - The New York Times



In Gymnasia's 90-year-old building, an average of 33 to 34 students packed each classroom. Dan Biality for The New York Times

When the first case was discovered, the student's classmates, teachers and other contacts were quarantined. After the second case, which was not directly linked to the first, the school was closed and everyone was instructed to quarantine for two weeks. All students and staff were tested, often waiting in line for hours.

About 60 percent of infected students were asymptomatic. Teachers, some of whom had been teaching multiple classes, suffered the most and a few were hospitalized, the principal said.

Parents were furious. Oz Arbel told Israel's Army Radio that for a school project, his daughter's classmates sat at a table and passed around a cellphone with a teacher who was showing symptoms. His daughter and wife became infected.



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Books wrapped in plastic bags wait in Gymnasia's library for September. Dan Balilty for The New York Times

One Gymnasia student, Ofek Amzaleg, told Kan public radio that a teacher who coughed in class and joked that he didn't have coronavirus was among those who tested positive. Ofek also became infected.

Mr. Leibovitch, the principal, said he had no knowledge of any teacher coming in with symptoms.

Seeking to contain the contagion, the Education Ministry vowed to shut any school with even one Covid-19 case. It ultimately closed more than 240 schools and quarantined more than 22,520 teachers and students.

When the school year ended in late June, the ministry said, 977 pupils and teachers had contracted Covid-19.

But the Health Ministry, lacking the infrastructure and resources, did not make contact tracing a priority. In the Gymnasia case, Professor Waxman said, nobody even identified which buses the students had ridden on to school.

Proms were canceled, but graduating seniors in the central city of Ra'anana held an underground prom party anyway. Dozens contracted the virus.

A nursery school teacher, Shalva Zalfreund, 64, sent a note to parents saying she believed she had been infected in her school, where some parents had sent their children from homes with cases of the virus. She died in July.



Israeli health officials are divided as to whether the outbreak in schools spurred Israel's second wave of infections. Gil Cohen-Magen/Agence France-Presse — Getty Images

Outside school walls, the coronavirus returned with a vengeance. Covid wards that had closed with festive ceremonies in late April began filling again, with confirmed infections spiraling to about 800 a day by late June and more than 2,000 a day by late July.

Some blamed the hasty school reopening as a major factor in the second wave. Siegal Sadetzki, who resigned in frustration last month as Israel's director of public health services, wrote that insufficient safety precautions in schools, as well as large gatherings like weddings, fueled a "significant portion" of second-wave infections.

But others said singling out schools was unfair when the real problem was that everything reopened too quickly.

"The single super-spreader event in the Gymnasia just happened to be in a school," said Dr. Ran Balicer, an Israeli health care official and adviser to the prime minister on the pandemic. "It could have happened in any other setting."

Now Israel is confronting the same questions as other countries, trying to learn from its mistakes in planning for the school year that begins Sept. 1.

Public health experts worldwide have coalesced around a set of guidelines for reopening schools.

A major recommendation is to create groups of 10 to 15 students who stay together in classrooms, at recess and lunchtime, with teachers assigned to only one group. Each group has minimal contact with other groups, limiting any spread of infection. And if a case of Covid-19 emerges, one group can be quarantined at home while others can continue at school.

Other key recommendations include staggering schedules or teaching older students online, keeping desks several feet apart, sanitizing classrooms more frequently, providing ventilation and opening windows if possible, and requiring masks for staff and students old enough to wear them properly.

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When Covid Subsided, Israel Reopened Its Schools. It Didn't Go Well. - The New York Times



Students keep their distance at an elementary school in the central Israeli town of Pardes Hanna-Karkur in May. Jack Guez/Agence France-Presse — Getty Images

Israel has already moved in that direction.

The government recently appointed a coronavirus czar, Dr. Ronni Gamzu, who transferred responsibility for virus testing and investigation from the Health Ministry to the military. "This is an operation, not medicine," he declared.

On Sunday, the government approved plans for returning only grades two and lower to school in full-size classes in the fall. Younger children are less likely to become seriously ill, and some studies have suggested that they are less likely than adults and teenagers to transmit the virus to others.

The plans also call for splitting older students into capsules of 18 and for mostly online instruction for grades five and above. Principals will have flexibility to adjust their school's policies based on local conditions.

Even those measures may not be enough.

Menashe Levy, president of the Israeli High School Principals Association, arranged desks six feet apart in a standard classroom. It could accommodate 14 students, not 18.

But Israel is plunging ahead. Only one option has been ruled out: closing the schools.

"This is a long-term pandemic," said Dr. Nadav Davidovitch, a pandemic policy adviser to the government. "We cannot close schools for a year:"

Isabel Kershner reported from Jerusalem, and Pam Belluck from the United States.

EXHIBIT AA

The Washington Post
Democracy Dies in Darkness

Nine people test positive for the coronavirus at Georgia school where photos of packed hallways went viral

By **Derek Hawkins**

August 9, 2020 at 8:20 a.m. PDT

A cluster of novel coronavirus cases has emerged at the Georgia high school that drew national attention last week after students posted pictures and videos of their peers walking without mask in tightly packed hallways, according to a letter sent to parents over the weekend.

Six students and three staff members at North Paulding High School have reported testing positive for the virus, Principal Gabe Carmona wrote in the letter, which was first reported by the [Atlanta Journal-Constitution](#). He said the infected people were in school “for at least some time” last week.

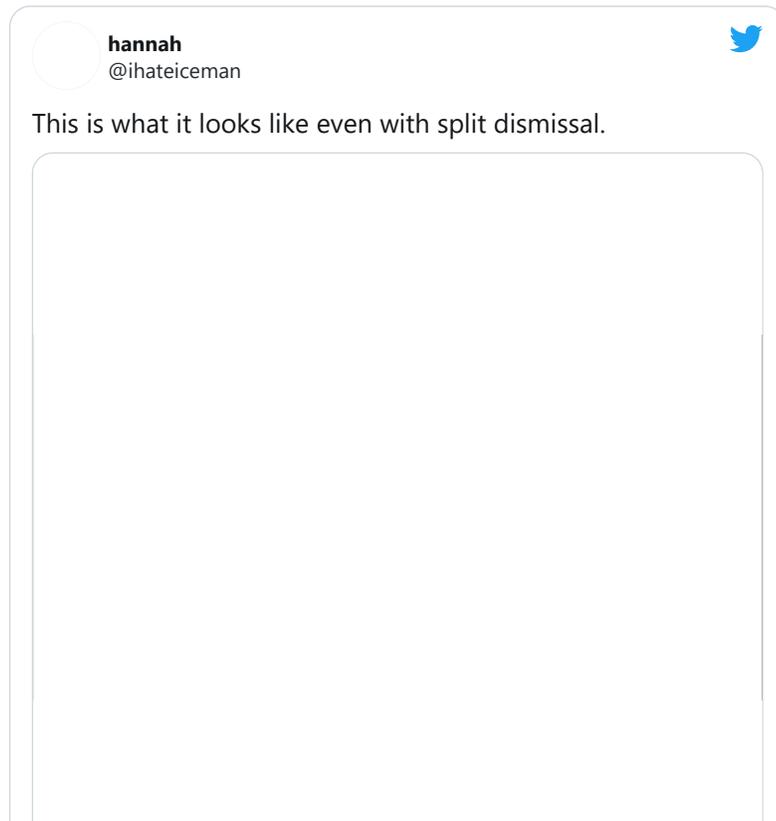
The infections validate concerns in Georgia and around the country that crowded conditions in the nation’s K-12 schools could facilitate virus transmission as the new academic year begins. Young people develop severe infections at far lower rates than adults, but experts warn they could be vectors for infecting more vulnerable populations, such as older relatives in the same household.

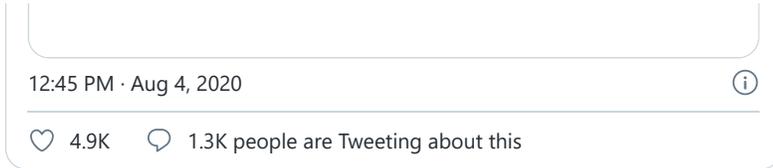
Carmona said custodial workers were cleaning and disinfecting the school building daily — a practice that offers only marginal protections against the virus, which primarily spreads through person-to-person contact, not from contaminated surfaces.

“The health and well-being of our staff and students remains our highest priority,” Carmona said, “and we are continuing to adjust and improve our protocols for in-person instruction to make our school the safest possible learning environment.”

A representative for the Paulding County School District did not immediately respond to a request for comment Sunday.

The school of more than 2,000 in Dallas, Ga., was thrown into the national spotlight last week when students posted images on social media showing seas of students milling through the halls between classes.





The school district suspended two students who shared the images, prompting another wave of negative attention from critics who said administrators were silencing them. Administrators reversed the suspensions on Friday following the backlash.

Lynne Watters, the mother of one of the students, said her daughter would be able to return to school Monday with her disciplinary record unblemished. “The principal just said that they were very sorry for any negative attention that this has brought upon her,” Watters said in a text message, “and that in the future they would like for her to come to the administration with any safety concerns she has.”

Officials have continually sought to downplay concerns generated by images of the crowded corridors.

On Wednesday, Paulding County Schools Superintendent Brian Otott told parents in a letter that while the photo “does not look good,” the conditions were permissible under the Georgia Department of Education’s health recommendations.

The superintendent also misleadingly cited a state health department document listing the different ways people can become infected with the coronavirus. He claimed that exposure occurs after “Being within 6 feet of a sick person with COVID-19 for about 15 minutes” but omitted other factors such as being coughed on that can cause the virus to spread faster and more directly.

Lateshia Beachum contributed to this report.

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EXHIBIT BB

8/9/2020

On the First Day of School, an Indiana Student Tests Positive for Coronavirus - The New York Times

The New York Times | <https://nyti.ms/30jsYkE>

A School Reopens, and the Coronavirus Creeps In

As more schools abandon plans for in-person classes, one that opened in Indiana this week had to quarantine students within hours.

By Eliza Shapiro, Giulia McDonnell Nieto del Rio and Shawn Hubler

Aug. 1, 2020

One of the first school districts in the country to reopen its doors during the coronavirus pandemic did not even make it a day before being forced to grapple with the issue facing every system actively trying to get students into classrooms: What happens when someone comes to school infected?

Just hours into the first day of classes on Thursday, a call from the county health department notified Greenfield Central Junior High School in Indiana that a student who had walked the halls and sat in various classrooms had tested positive for the coronavirus.

Administrators began an emergency protocol, isolating the student and ordering everyone who had come into close contact with the person, including other students, to quarantine for 14 days. It is unclear whether the student infected anyone else.

"We knew it was a when, not if," said Harold E. Olin, superintendent of the Greenfield-Central Community School Corporation, but were "very shocked it was on Day 1."

To avoid the same scenario, hundreds of districts across the country that were once planning to reopen their classrooms, many on a part-time basis, have reversed course in recent weeks as infections have spiked in many states.

Those that do still reopen are having to prepare for the near-certain likelihood of quarantines and abrupt shutdowns when students and staff members test positive.

Of the nation's 25 largest school districts, all but six have announced they will start remotely, although some in places like Florida and Texas are hoping to open classrooms after a few weeks if infection rates go down, over strong objections from teachers' unions.

More than 80 percent of California residents live in counties where test positivity rates and hospitalizations are too high for school buildings to open under state rules issued last month. And schools in Alexandria, Va., said on Friday that they would teach remotely, tipping the entire Washington-Baltimore metro area, with more than one million children, into virtual learning for the fall.

In March, when schools across America abruptly shuttered, it seemed unimaginable that educators and students would not return to school come fall, as they have in many other parts of the world. Now, with the virus continuing to rage, tens of millions of students will start the year remotely, and it has become increasingly clear that only a small percentage of children are likely to see the inside of a school building before the year ends.

"There's no good answer," Mark Henry, superintendent of the Cypress-Fairbanks Independent School District near Houston, told trustees at a recent special meeting in which they voted to postpone the district's hybrid reopening until September. "If there was a good answer, if there were an easy answer," he said, "we would lay it out for you and everybody would be happy."

Anywhere that schools do reopen — outside of a portion of the Northeast where the virus is largely under control — is likely to see positive test results quickly, as in Indiana.

A New York Times analysis found that in many districts in the Sun Belt, at least five people infected with the coronavirus would be expected to arrive at a school of about 500 students and staff members during the first week if it reopened today.

To deal with that likelihood, many schools and some states have enacted contact tracing and quarantine protocols, with differing thresholds at which they would close classrooms or buildings.

Because of the low infection rate locally, New York City, the largest district in the country, plans to reopen schools on a hybrid model on Sept. 10, with students attending in-person classes one to three days a week. Yet even there, the system might have to quickly close if the citywide infection rate ticks up even modestly.

On Friday, Mayor Bill de Blasio laid out a plan for responding to positive cases that would mean many of the city's 1,800 public schools would most likely have individual classrooms or even entire buildings closed at certain points.



Students leaving the middle school on Friday. About 85 percent of the 700 enrolled students opted for in-person learning, the district superintendent said. AJ Mast for The New York Times

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On the First Day of School, an Indiana Student Tests Positive for Coronavirus - The New York Times

One or two confirmed cases in a single classroom would require those classes to close for 14 days, with all students and staff members ordered to quarantine. The rest of the school would continue to operate, but if two or more people in different classrooms in the same school tested positive, the entire building would close for an investigation, and might not reopen for two weeks depending on the results.

In California, where schools in two-thirds of the state have been barred from reopening in person for now, state guidelines call for a school to close for at least 14 days if more than 5 percent of its students, faculty and staff test positive over a two-week period.

Chicago, the nation's third-largest school district, has proposed a hybrid system for reopening that would put students into 15-member pods that can be quarantined if one member tests positive. School buildings should close if the city averages more than 400 new cases a week or 200 cases a day, the plan states, with other worrying factors like low hospital capacity or a sudden spike in cases taken into account.

In Indiana, where the middle school student tested positive on Thursday in Greenfield, an Indianapolis suburb of 23,000 people, the virus began to spike in mid-June, and the caseload has remained relatively high. This week, Indianapolis opted to start the school year online.

The Greenfield-Central Community School Corporation, with eight schools and 4,400 students, gave families the option of in-person or remote learning. At Greenfield Central Junior High School, which the student with the positive test attends, about 15 percent of the 700 enrolled students opted for remote learning, said Mr. Olin, the superintendent.

"It was overwhelming that our families wanted us to return," he said, adding that families needed to be responsible and not send students to school if they were displaying symptoms or awaiting test results. Students are also required to wear masks except when they are eating or for physical education outside, he said — and as far as he knew, the student who tested positive was doing so.

Anyone who was within six feet of the student for more than 15 minutes on Thursday was instructed to isolate themselves for two weeks, Mr. Olin said. He would not give a specific number of people who were affected at the school, but he said no teachers or staff members were identified as close contacts, and therefore none have been told to quarantine.

"It really doesn't change my opinion about whether we should start or not," Mr. Olin said. "If we get down the road and realize that we need to make some adjustments, we're not opposed to that."

He said that the district did not have a specific threshold for when it would close a school, but that it would likely do so if absences reached 20 percent. The state has not provided specific guidance to schools on when they should shut their doors, he said.

Some teachers in the district said the positive case on the first day confirmed their fears about returning.

"I most definitely felt like we were not ready," said Russell Wiley, a history teacher at nearby Greenfield-Central High School. "Really, our whole state's not ready. We don't have the virus under control. It's just kind of like pretending like it's not there."

One father whose daughter goes to the middle school with the positive case said he felt conflicted about his three children attending classes in person. Few people in the community are wearing masks, said the father, who asked not to be named because he worried that his family would face backlash.

"I have all these concerns," the father said. But he has to commute at least an hour to work every day, so remote learning was not a good option for his family.

"It's just a mess," he said. "I don't know what the answers are."

EXHIBIT CC

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Volume 26, Number 10—October 2020

Dispatch

Contact Tracing during Coronavirus Disease Outbreak, South Korea, 2020

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Author affiliations: Korea Centers for Disease Control and Prevention, Cheongju, South Korea (Y.J. Park, O. Park, S.Y. Park, Y.-M. Kim, J. Kim, S. Kweon, Y. Woo, J. Gwack, S.S. Kim, J. Lee, J. Hyun, B. Ryu, Y.S. Jang, H. Kim, S.H. Shin, S. Yi, S. Lee, H.K. Kim, H. Lee, Y. Jin, E. Park, S.W. Choi, M. Kim, J. Song, S.W. Choi, D. Kim, B.-H. Jeon, H. Yoo, E.K. Jeong); Hallym University College of Medicine, Chuncheon, South Korea (Y.J. Choe)

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Abstract

We analyzed reports for 59,073 contacts of 5,706 coronavirus disease (COVID-19) index patients reported in South Korea during January 20–March 27, 2020. Of 10,592 household contacts, 11.8% had COVID-19. Of 48,481 nonhousehold contacts, 1.9% had COVID-19. Use of personal protective measures and social distancing reduces the likelihood of transmission.

Effective contact tracing is critical to controlling the spread of coronavirus disease (COVID-19) (1). South Korea adopted a rigorous contact-tracing program comprising traditional shoe-leather epidemiology and new methods to track contacts by linking large databases (global positioning system, credit card transactions, and closed-circuit television). We describe a nationwide COVID-19 contact tracing program in South Korea to guide evidence-based policy to mitigate the pandemic (2).

The Study

South Korea's public health system comprises a national-level governance (Korea Centers for Disease Control and Prevention), 17 regional governments, and 254 local public health centers. The first case of COVID-19 was identified on January 20, 2020; by May 13, a total of 10,962 cases had been reported. All reported COVID-19 patients were tested using reverse transcription PCR, and case information was sent to Korea Centers for Disease Control and Prevention.

We defined an index case as the first identified laboratory-confirmed case or the first documented case in an epidemiologic investigation within a cluster. Contacts in high-risk groups (household contacts of COVID-19 patients, healthcare personnel) were routinely tested; in non-high-risk groups, only symptomatic persons were tested. Non-high-risk asymptomatic contacts had to self-quarantine for 14 days and were placed under twice-daily active surveillance by public health workers. We defined a household contact as a person who lived in the household of a COVID-19 patient and a nonhousehold contact as a person who did not reside in the same household as a confirmed COVID-19 patient. All index patients were eligible for inclusion in this analysis if we identified ≥ 1 contact. We defined a detected case as a contact with symptom onset after that of a confirmed COVID-19 index patient.

We grouped index patients by age: 0–9, 10–19, 20–29, 30–39, 40–49, 50–59, 60–69, 70–79, and ≥ 80 years. Because we could not determine direction of transmission, we calculated the proportion of detected cases by the equation [number of detected cases/number of contacts traced] \times 100, excluding the index patient; we also calculated 95% CIs. We compared the difference in detected cases between household and nonhousehold contacts across the stratified age groups.

We conducted statistical analyses using RStudio (<https://rstudio.com>). We conducted this study as a legally mandated public health investigation under the authority of the Korean Infectious Diseases Control and Prevention Act (nos. 12444 and 13392).

We monitored 59,073 contacts of 5,706 COVID-19 index patients for an average of 9.9 (range 8.2–12.5) days after severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) infection was detected (Table 1). Of 10,592 household contacts, index patients of 3,417 (32.3%) were 20–29 years of age, followed by those 50–59 (19.3%) and 40–49 (16.5%) years of age (Table 2). A total of 11.8% (95% CI 11.2%–12.4%) household contacts of index patients had COVID-19; in households with an index patient 10–19 years of age, 18.6% (95% CI 14.0%–24.0%) of contacts had COVID-19. For 48,481 nonhousehold contacts, the detection rate was 1.9% (95% CI 1.8%–2.0%) (Table 2). With index patients 30–39 years of age as reference, detection of COVID-19 contacts was significantly higher for index patients >40 years of age in nonhousehold settings. For most age groups, COVID-19 was detected in significantly more household than nonhousehold contacts (Table 2).

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Conclusions

We detected COVID-19 in 11.8% of household contacts; rates were higher for contacts of children than adults. These risks largely reflected transmission in the middle of mitigation and therefore might characterize transmission dynamics during school closure (3). Higher household than nonhousehold detection might partly reflect transmission during social distancing, when family members largely stayed home except to perform essential tasks, possibly creating spread within the household. Clarifying the dynamics of SARS-CoV-2 transmission will help in determining control strategies at the individual and population levels. Studies have increasingly examined transmission within households. Earlier studies on the infection rate for symptomatic household contacts in the United States reported 10.5% (95% CI 2.9%–31.4%), significantly higher than for nonhousehold contacts (4). Recent reports on COVID-19 transmission have estimated higher secondary attack rates among household than nonhousehold contacts. Compiled reports from China, France, and Hong Kong estimated the secondary attack rates for close contacts to be 35% (95% CI 27%–44%) (5). The difference in attack rates for household contacts in different parts of the world may reflect variation in households and country-specific strategies on COVID-19 containment and mitigation. Given the high infection rate within families, personal protective measures should be used at home to reduce the risk for transmission (6). If feasible, cohort isolation outside of hospitals, such as in a Community Treatment Center, might be a viable option for managing household transmission (7).

We also found the highest COVID-19 rate (18.6% [95% CI 14.0%–24.0%]) for household contacts of school-aged children and the lowest (5.3% [95% CI 1.3%–13.7%]) for household contacts of children 0–9 years in the middle of school closure. Despite closure of their schools, these children might have interacted with each other, although we do not have data to support that hypothesis. A contact survey in Wuhan and Shanghai, China, showed that school closure and social distancing significantly reduced the rate of COVID-19 among contacts of school-aged children (8). In the case of seasonal influenza epidemics, the highest secondary attack rate occurs among young children (9). Children who attend day care or school also are at high risk for transmitting respiratory viruses to household members (10). The low detection rate for household contacts of preschool-aged children in South Korea might be attributable to social distancing during these periods. Yet, a recent report from Shenzhen, China, showed that the proportion of infected children increased during the outbreak from 2% to 13%, suggesting the importance of school closure (11). Further evidence, including serologic studies, is needed to evaluate the public health benefit of school closure as part of mitigation strategies.

Our observation has several limitations. First, the number of cases might have been underestimated because all asymptomatic patients might not have been identified. In addition, detected cases could have resulted from exposure outside the household. Second, given the different thresholds for testing policy between households and nonhousehold contacts, we cannot assess the true difference in transmissibility between households and nonhouseholds. Comparing symptomatic COVID-19 patients of both groups would be more accurate. Despite these limitations, the sample size was large and representative of most COVID-19 patients early during the outbreak in South Korea. Our large-scale investigation showed that pattern of transmission was similar to those of other respiratory viruses (12). Although the detection rate for contacts of preschool-aged children was lower, young children may show higher attack rates when the school closure ends, contributing to community transmission of COVID-19.

The role of household transmission of SARS-CoV-2 amid reopening of schools and loosening of social distancing underscores the need for a time-sensitive epidemiologic study to guide public health policy. Contact tracing is especially important in light of upcoming future SARS-CoV-2 waves, for which social distancing and personal hygiene will remain the most viable options for prevention. Understanding the role of hygiene and infection control measures is critical to reducing household spread, and the role of masking within the home, especially if any family members are at high risk, needs to be studied.

We showed that household transmission of SARS-CoV-2 was high if the index patient was 10–19 years of age. In the current mitigation strategy that includes physical distancing, optimizing the likelihood of reducing individual, family, and community disease is important. Implementation of public health recommendations, including hand and respiratory hygiene, should be encouraged to reduce transmission of SARS-CoV-2 within affected households.

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Dr. Young Joon Park is the preventive medicine physician leading the Epidemiology and Case Management Team for the COVID-19 National Emergency Response Center, Korea Centers for Disease Control and Prevention. His primary research interests include epidemiologic investigation of infectious disease outbreaks. Dr. Choe is an assistant professor at Hallym University College of Medicine. Her research focuses on infectious diseases epidemiology.

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Tables

Table 1. Contacts traced by age group of index coronavirus disease patients, South Korea, January 20–March 27, 2020

Table 2. Rates of coronavirus disease among household and nonhousehold contacts, South Korea, January 20–March 27, 2020

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¹These authors contributed equally to this article.

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Comments

Please use the form below to submit correspondence to the authors or contact them at the following address:

Eun Kyeong Jeong, Korea Centers for Disease Control and Prevention, Osong Health Technology Administration Complex, 187, Osongsaengmyeong 2-ro, Osong-eup, Heungdeok-gu, Cheongju, Chungcheongbuk-do, South Korea,

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EXHIBIT DD



Coronavirus Disease 2019 (COVID-19)

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Preparing K-12 School Administrators for a Safe Return to School in Fall 2020

Updated Aug. 1, 2020

[Print](#)

Schools are an important part of the infrastructure of communities and play a critical role in supporting the whole child, not just their academic achievement.

This guidance is intended to aid school administrators as they consider how to protect the health, safety, and wellbeing of students, teachers, other school staff, their families, and communities and prepare for educating students this fall.

This guidance is for K-12 school administrators who are preparing for students, teachers, and staff to return to school in fall 2020. School administrators are individuals who oversee the daily operations of K-12 schools, and may include school district superintendents, school principals, and assistant principals.

It is critical that all administrators:

- Engage and encourage everyone in the school and the community to practice preventive behaviors. These are the most important actions that will support schools' safe reopening and will help them stay open.
- Implement multiple SARS-CoV-2 mitigation strategies (e.g., social distancing, cloth face coverings, hand hygiene, and use of [cohorting](#)).
- **Communicate, educate, and reinforce** appropriate hygiene and social distancing practices in ways that are developmentally appropriate for students, teachers, and staff.
- Integrate SARS-CoV-2 mitigation strategies into co-curricular and extracurricular activities (e.g., limiting or cancelling participation in activities where social distancing is not feasible).
- Maintain healthy environments (e.g., cleaning and disinfecting frequently touched surfaces).
- Make decisions that take into account the level of community transmission.
- Repurpose unused or underutilized school (or community) spaces to increase classroom space and facilitate social distancing, including outside spaces, where feasible.
- Develop a proactive plan for when a student or staff member tests positive for COVID-19.
- Develop a plan with state and local health department to conduct case tracing in the event of a positive case.
- Educate parents and caregivers on the importance of monitoring for and responding to the symptoms of COVID-19 at home.
- Develop ongoing channels of communication with state and local health departments to stay updated on COVID-19 transmission and response in your local area.

The guidance described in this document is based on the best available evidence at this time. This guidance is meant to supplement—not replace—any state, local, territorial, or tribal health and safety laws, rules, and regulations with which schools must comply.

Key considerations for school administrators

- COVID-19 transmission rates in the immediate community and in the communities in which students, teachers, and staff live
- Approaches to cohorting that fit the needs of your school/district and community (e.g., keeping students in class pods, staggering when students return to school facility, having the same teacher stay with the same group of students)
 - Can unused or underutilized school spaces, including outdoor spaces, be repurposed to increase classroom space and facilitate social distancing?
- Concurrently implementing multiple strategies in school to prevent the spread of COVID-19 (e.g., social distancing, cloth face coverings, hand hygiene, and use of cohorting)
- Best practices for your school and community to communicate, educate, and reinforce personal protective behaviors to prevent the spread of COVID-19 in school and in the community
- Integrating strategies to reduce COVID-19 transmission into co-curricular and extracurricular activities (e.g., limiting participation in activities where social distancing is not feasible)
- Planning and preparing for when someone gets sick
- Working with state and local health authorities to develop a plan to conduct contact tracing in the event of a positive case
- Communicating appropriately to families about home-based symptom screening

Critical role of schools

This guidance is intended, first and foremost, to protect the health, safety and wellbeing of students, teachers, other school staff, their families, and communities.

Schools are an important part of the infrastructure of communities, as they provide safe, supportive learning environments for students, employ teachers and other staff, and enable parents, guardians, and caregivers to work. Schools also provide critical services that help to mitigate health disparities, such as school meal programs, and social, physical, behavioral, and mental health services. School closure disrupts the delivery of these critical services to children and families, and places additional economic and psychological stress on families, which can increase the risk for family conflict and violence.^{[1], [2]}

The unique and critical role that schools play makes them a priority for opening and remaining open, enabling students to receive both academic instruction and support as well as critical services. In order to prioritize opening schools safely and helping them to remain open, communities should consider adopting actions to mitigate community transmission. CDC's [Implementation of Mitigation Strategies for Communities with Local COVID-19 Transmission](#) has strategies for community mitigation to reduce or prevent the spread of COVID-19, which in turn will help schools to open and stay open safely. Recognizing the importance of providing safe, in-person learning, communities may also wish to help schools by examining whether additional public or private space, including outdoor spaces, that is currently underutilized might be safely repurposed for school and instructional purposes.

Returning to school in fall 2020 poses new challenges for schools, including implementing mitigation measures (e.g., social distancing, cleaning and disinfection, hand hygiene, use of cloth face coverings), addressing social, emotional, and mental health needs of students, addressing potential learning loss, and preparing for the probability of COVID-19 cases within the broader school community.

This guidance provides information about:

- What is currently known about COVID-19 among school-aged children
- The importance of going back to school safely
- What is currently known about SARS-CoV-2 (the virus that causes COVID-19) transmission in schools and its impact on community transmission
- The ways administrators for kindergarten through grade 12 (K-12) schools can plan and prepare for in-person instruction and minimize the impact of potential closures

What is known about the signs and symptoms, burden, and transmission of SARS-CoV-2 among children?

Signs and symptoms

Common COVID-19 symptoms [among children](#) include fever, headache, sore throat, cough, fatigue, nausea/vomiting, and diarrhea.^[3] However, many children and adults infected with the virus that causes COVID-19 are asymptomatic (meaning they have no signs or symptoms of illness).

Impact of COVID-19 on children

Collecting and sharing data, including how it affects different places and populations, is important for understanding the context and burden of the COVID-19 pandemic. School officials should make decisions about school reopening based on available data including levels of community transmission and their capacity to implement appropriate mitigation measures in schools. Children appear to be at lower risk for contracting COVID-19 compared to adults. While some children have been sick with COVID-19, adults make up nearly 95% of reported COVID-19 cases.^[4] Early reports suggest children are less likely to get COVID-19 than adults, and when they do get COVID-19, they generally have a less serious illness.^[5] As of July 21, 2020, 6.6% of reported COVID-19 cases and less than 0.1% of COVID-19-related deaths are among children and adolescents less than 18 years of age in the United States.^[6]

Early reports suggest the number of COVID-19 cases among children may vary by age and other factors. Adolescents aged 10-17 may be more likely to become infected with SARS-CoV-2 than children younger than age 10,^{[7], [8]} but adolescents do not appear to be at higher risk of developing severe illness.^[9] There are currently a higher proportion of COVID-19 cases among Hispanic/Latino children as compared to non-Hispanic white children. Children and adults with certain [underlying medical conditions](#) are at [increased risk of severe illness](#) from COVID-19.^[10] Severe illness means that they may require hospitalization, intensive care, or a ventilator to help them breathe, or may even die. Children with intellectual and developmental disabilities are more likely to have [comorbid medical conditions](#) (e.g., diseases of the respiratory system; endocrine, nutritional and metabolic diseases; and diseases of the circulatory system) that may put them at increased risk for severe illness from COVID-19.^[11] Although rare, some children have developed multisystem inflammatory syndrome (MIS-C) after exposure to SARS-CoV-2. As of May 20, 2020, the majority of children hospitalized with MIS-C had recovered.^[12]

Data on SARS-CoV-2 transmission among children are limited. Evidence from other countries suggests that the majority of children with COVID-19 were infected by a family member.^[13] For example, the first pediatric patients in South Korea and Vietnam were most likely from contact with an adult family member.^{[14], [15]} Published reports from contact tracing of students with COVID-19 in schools from France, Australia, and Ireland suggest that students are not as likely to transmit the virus to other students compared to household contacts.^{[16], [17], [18]} However, more research is needed on SARS-CoV-2 transmission between children and household members.

What is known about how schools have reopened and the impact on SARS-CoV-2 transmission?

Internationally, schools have responded to COVID-19 using a variety of approaches.^{[19],[20]} For example, China, Denmark, Norway, Singapore, and Taiwan all required temperature checks at school entry.^[21] Most countries have changed the way they operate to reduce class sizes, increase physical distance between students, and keeping students in defined groups to reduce contacts (i.e., **cohorting**).^[22] Furthermore, many countries have staggered attendance, start and stop times, and created alternating shifts to enable social distancing. In some places this means that only certain students have returned to schools, either by grade range or need. For example, Denmark was the first European country to reopen schools. Denmark staggered students' reentry in waves (e.g., one group started school first, followed by another group at a later date), with limited class sizes and using other social distancing measures.^[23] Younger students (under age 12) returned first based on their lower health risk and need for more supervision than older students. Class sizes were reduced to allow physical distancing. In Taiwan, students returned to school with mandatory temperature checks and use of face masks. Rather than national school closures, Taiwan relied on local decision-making to determine if classroom or school closures were needed, based on infection rates.^[24]

There is mixed evidence about whether returning to school results in increased transmission or outbreaks. For example, Denmark initially reported a slight increase in cases in the community after reopening schools and child care centers for students aged 2-12 years, followed by steady declines in cases among children between ages 1 and 19 years.^[25] In contrast, Israel experienced a surge of new cases and outbreaks in schools after reopening and relaxing social distancing measures; it is unclear what caused the increase in cases and what other mitigation measures the schools had implemented.^[26] In summer 2020, Texas reported more than 1,300 COVID-19 cases in childcare centers; however, twice as many staff members had been diagnosed as children, suggesting that children may be at lower risk of getting COVID-19 than adults.^[27]

It is important to consider community transmission risk as schools reopen. Evidence from schools internationally suggests that school re-openings are safe in communities with **low SARS-CoV-2 transmission** rates.^[28] Computer simulations from Europe have suggested that school re-openings may further increase transmission risk in communities where transmission is already high.^[29] More research and evaluation is needed on the implementation of mitigation strategies (e.g., social distancing, cloth face coverings, hand hygiene, and use of **cohorting**) used in schools to determine which strategies are the most effective. Such research would improve understanding of the impact of mitigation strategies on the risk of SARS-CoV-2 transmission in schools, and ongoing monitoring and surveillance of transmission in schools could help with timely outbreak detection and prevent wider spread.

Why is it important to open schools for in-person instruction?

While opening schools – like opening any building or facility—does pose a risk for the spread of COVID-19, there are many reasons why opening schools in the fall of 2020 for in-person instruction is important.

Schools play a critical role in the wellbeing of communities

Schools are a fundamental part of the infrastructure of communities. Schools provide safe and supportive environments, structure, and routines for children, as well as other needed support services to children and families. Schools play a vital role in the economic health of communities by employing teachers and other staff and helping parents, guardians, and caregivers work.

Schools provide critical instruction and academic support

Schools provide critical instruction and academic support that benefit students and communities in both the short- and long-term. The main role and priorities of K-12 educational institutions are to provide age-appropriate instruction and support students' academic development. Reopening schools will provide in-person instruction for students, facilitate increased communication between teachers and students, and provide students with critical academic services, including school-based tutoring, special education, and other specialized learning supports.

Studies show that students have experienced learning loss during the period of school closure and summer months.^[30] In-person instruction for students has advantages over virtual learning, particularly when virtual learning was not the planned format for instruction, and schools may not have the resources or capability to transition fully to virtual learning. In-person classroom instruction has the added benefit for many students of interpersonal interaction between the student and the teacher and the student and peers.^[31] Teachers are able to more actively participate in student learning, provide feedback as students encounter challenges, and promote active learning among students.^[32]

In-person instruction may be particularly beneficial for students with additional learning needs. Children with disabilities may not have access through virtual means to the specialized instruction, related services or additional supports required by their Individualized Education Programs (IEPs) or 504 Plans.^[33] Students may also not have access through virtual means to quality English Language Learning (ELL).^[34]

When schools are closed to in-person instruction, disparities in educational outcomes could become wider, as some families may not have capacity to fully participate in distance learning (e.g., computer and internet access issues, lack of parent, guardian, or caregiver support because of work schedules) and may rely on school-based services that support their child's academic success. The persistent achievement gaps that already existed prior to COVID-19 closures, such as disparities across income levels and racial and ethnic groups, could worsen and cause long-term effects on children's educational outcomes, health, and the economic wellbeing of families and communities.^[35]^[35] While concern over higher rates of COVID-19 among certain racial/ethnic groups may amplify consideration of closing a school that educates primarily racial minority students, there should also be consideration that these may also be the schools most heavily relied upon for students to receive other services and support, like nutrition and support services.

Schools play a critical role in supporting the whole child, not just the academic achievement of students

Social and emotional health of students can be enhanced through schools

Social interaction among children in grades K-12 is important not only for emotional wellbeing, but also for children's language, communication, social, and interpersonal skills.^[37] Some students may have experienced social isolation and increased anxiety while not physically being in school due to COVID-19. Resuming in-person instruction can support students' social and emotional wellbeing.^[38] Schools can provide a foundation for socialization among children. When children are out of school, they may be separated from their social network and peer-to-peer social support. Schools can facilitate the social and emotional health of children through curricular lessons that develop students' skills to recognize and manage emotions, set and achieve positive goals, appreciate others' perspectives, establish and maintain positive relationships, and make responsible decisions.^[39]

Mental health of students can be fostered through school supports and services

Schools are an important venue for students to receive **emotional and psychological support** from friends, teachers, and other staff members. Lengthy school building closures can leave some students feeling isolated from important friendships and support from other caring adults.^[40] Schools also provide critical psychological, mental and behavioral health (e.g., psychological counselling, mental and behavioral assessment) services to children who may not have access to these services outside of school. School closures have limited the availability of these services. Furthermore, isolation and uncertainty about the COVID-19 pandemic can create feelings of **hopelessness and anxiety** while removing important

sources of social support. Some students may have experienced trauma through the loss of a loved one from COVID-19. Increases in anxiety and depression may occur when students do not have the structure and routine that being in school brings to their daily lives. Finally, having opportunities to be physically active through recess and physical education can help improve students' feelings of anxiety and sadness. These physical activities should be provided regularly to students in a safe and supportive environment that includes physical distancing and strategies to reduce close contact between students.

Continuity of other special services is important for student success

Students who rely on key services, such as school food programs, special education and related services (e.g., speech and social work services, occupational therapy), and after school programs are put at greater risk for poor health and educational outcomes when school buildings are closed and they are unable to access such school health programs and services.^[41] During periods of school building closures, students had limited access to many of these critical services, potentially widening educational and health disparities and inequities.

How can K-12 schools prepare for going back to in-person instruction?

Expect cases of COVID-19 in communities

International experiences have demonstrated that even when a school carefully coordinates, plans, and prepares, cases may still occur within the community and schools. Expecting and planning for the occurrence of cases of COVID-19 in communities can help everyone be prepared for when a case or multiple cases are identified.

Coordinate, plan, and prepare

Administrators should coordinate with local public health officials to stay informed about the status of COVID-19 transmission in their community. Additionally, planning and preparing are essential steps administrators can take to safely reopen schools:

- CDC's [Considerations for Schools](#) provides detailed recommendations for schools to plan and prepare to reduce the spread of COVID-19, establish healthy environments and maintain healthy operations. This guidance includes information about implementation of mitigation strategies, such as physical distancing within buses, classrooms and other areas of the school, healthy hygiene habits, cleaning and disinfection, use of cloth face coverings, staggering student schedules, and planning for staff and teacher absences (e.g., back-up staffing plans).
- One important strategy that administrators can consider is [cohorting](#) (or "pods"), where a group of students (and sometimes teachers) stay together throughout the school day to minimize exposure for students, teachers, and staff across the school environment. At the elementary school level, it may be easier to keep the same class together for most of the school day. In middle and high school settings, cohorting of students and teachers may be more challenging. However, strategies such as creating block schedules or keeping students separated by grade can help to keep smaller groups of students together and limit mixing. Strategies that keep smaller groups of students together can also help limit the impact of COVID-19 cases when they do occur in a school. If a student, teacher, or staff member tests positive for SARS-CoV-2, those in the same cohort/group should also be tested and remain at home until receiving a negative test result or [quarantine](#). This helps prevent a disruption to the rest of the school and community by limiting the exposure. Schools should have systems in place to support continuity or learning for students who need to stay home for either isolation or quarantine. This includes access to online learning, school meals, and other services. The same holds for students with additional needs, including children with a disability, that makes it difficult to adhere to mitigation strategies.

[Operating Schools During COVID-19: Guiding principles and mitigation strategies to use when school is open](#)

Prepare for potential COVID-19 cases and increased school community transmission

Schools should be prepared for COVID-19 cases and exposure to occur in their facilities. Collaborating with [local health officials](#) will continue to be important once students are back to school, as they can provide regular updates about the status of COVID-19 in the community and help support and maintain the health and wellbeing of students, teachers, and staff. Having a plan in place for maintaining academic instruction and ensuring students have access to special services is also critical.

Making decisions about school operations

Administrators should make decisions in collaboration with local health officials based on a number of factors, including the [level of community transmission](#), whether cases are identified among students, teachers, or staff, what other indicators local public health officials are using to assess the status of COVID-19, and whether student, teacher, and staff cohorts are being implemented within the school.

What is the level of community transmission?

There are specific strategies schools can implement based on the [level of community transmission](#) reported by local health officials:

- If there is [no to minimal community transmission](#), reinforcing everyday preventive actions, ensuring [proper ventilation](#) within school facilities, including buses, and maintaining cleaning and disinfection practices remain important. These actions can help minimize potential exposure. Schools should also monitor absenteeism among teachers, staff, and students to identify trends and determine if absences are due to COVID-19, symptoms that led to quarantine, concerns about being in the school environment and personal health and safety, or positive test results. Anyone who tests positive for COVID-19 should [stay home and self-isolate](#) for the timeframe recommended by public health officials. Anyone who has had [close contact](#) with someone who has tested positive or is symptomatic for COVID-19 should be tested and stay home until receiving a negative result, or [stay home and monitor for symptoms](#).
- If there is [minimal to moderate](#) community transmission, schools should follow the actions listed above, and continue implementing mitigation strategies such as [social distancing](#), use of [cloth faced coverings](#), reinforcing everyday preventive actions, and maintaining cleaning and disinfection. This also can include ensuring that student and staff groupings/cohorts are as static as possible and that mixing groups of students and staff is limited.
- If there is [substantial, controlled](#) transmission, significant mitigation strategies are necessary. These include following all the actions listed above and also ensuring that student and staff groupings/cohorts are as static as possible with limited mixing of student and staff groups, field trips and large gatherings and events are canceled, and communal spaces (e.g., cafeterias, media centers) are closed.
- If there is [substantial, uncontrolled](#) transmission, schools should work closely with local health officials to make decisions on whether to maintain school operations. The health, safety, and wellbeing of students, teachers, staff and their families is the most important consideration in determining whether school closure is a necessary step. Communities can support schools staying open by implementing strategies that decrease a community's level of transmission. However, if community transmission levels cannot be decreased, school closure is an important consideration. Plans for virtual learning should be in place in the event of a school closure.

Did a student or staff member test positive for SARS-CoV-2?

If someone within the school community (e.g., student, teacher, staff) tested positive for SARS-CoV-2, assessing the level of risk is important to determine if, when, and for how long part or all of a school should be closed. K-12 administrators can also refer to CDC's [Interim Considerations for K-12 for School Administrators for SARS-CoV-2 Testing](#), which provides

additional information about [viral diagnostic testing](#). A single case of COVID-19 in a school would not likely warrant closing the entire school, especially if levels of community transmission are not high. The levels of community transmission described above and the extent of [close contacts](#) of the individual who tested positive for SARS-CoV-2 should all be considered before closing. These variables should also be considered when determining how long a school, or part of the school, stays closed. If the transmission of the virus within a school is higher than that of the community, or if the school is the source of an outbreak, administrators should work collaboratively with local health officials to determine if temporary school closure is necessary. Students, teachers, and staff who test positive or had close contact of the individual who tested positive should be provided with guidance for when it is safe to [discontinue self-isolation](#) or end [quarantine](#).

- **What other indicators are local public health officials using to assess the status of COVID-19?** Local health officials can help inform decisions related to school operations by examining public health [indicators](#) that are used to determine level of community transmission and disease severity levels. For example, indicators such as healthcare capacity (e.g., staffing, ICU bed occupancy), changes in newly identified COVID-19 cases, and percentage of people testing positive for SARS-CoV-2 infections in the community might be useful to determine whether to maintain or modify school operations. These indicators are set by state, local, tribal, and territorial health and healthcare officials, and should be shared with schools for decision making.
- **Is a cohort approach used within the school?** The level of student and staff mixing within the school should also be considered. If students are kept in cohorts to minimize mixing of students, exposure to an individual with COVID-19 may be limited to one particular cohort and not pose a broad risk to the rest of the school. Cohorts that have been in close contact with someone with COVID-19 can switch to virtual learning and stay home in accordance with CDC's guidelines for [quarantine](#) and [self-isolation](#), and the school may remain open.

Communicate with families, staff, and other partners

When preparing to go back to school, regular communication should be used to update students, families, teachers, and staff about academic standards, meal program services, and access to other school-based essential services that students and families rely on.

Regular communication with families, staff, and other partners should include:

- Updates about the status of COVID-19 in the school and community
- Notification when there are COVID-19 cases in the school (when communicating about the health status of students, schools should take care to avoid disclosing personally identifiable information and should follow all applicable privacy requirements, including those of the Family Educational Rights and Privacy Act)
- Explanation of what parents, students, teachers, and staff can expect when returning to school; in particular, communicating about:
 - The importance of staying home when sick and [staying home to monitor symptoms if close contact occurred with a person who tested positive for SARS-CoV-2](#)
 - Considerations for COVID-19 symptom screenings
 - Types of social distancing measures being implemented
 - When students, teachers, staff and/or visitors will be expected to wear cloth face coverings and whether cloth face coverings will be available from the school.
 - Everyday [healthy hygiene practices](#) that will be implemented upon reopening (e.g., students, teachers, staff staying home when sick, hand hygiene, cleaning frequently touched surfaces)
- Actions being taken to prevent SARS-Cov-2 transmission in buses, school buildings and facilities
- [Actions that families and households can take to help prevent the spread](#) of COVID-19
- Actions families can take to [manage anxiety about COVID-19](#)

- Decisions about operational status, potential use of virtual learning if COVID-19 cases are identified among students, teachers, or staff, and
- Guidance on [caring for someone who is sick](#) and for parents, guardians, and caregivers who are sick
- Guidance on how to [reduce stigma](#). Fear and anxiety about a disease can lead to social stigma, which is negative attitudes and beliefs toward people, places, or things

Families and students who had to make alternative arrangements with community providers to receive services (e.g., physical or occupational therapy, speech therapy, mental health services) during periods of school closures may need additional support and communication to establish a transition plan upon returning to school. Additionally, some families may have experienced significant hardship that now increases the number of students who need or qualify for some services, such as school meal programs. Schools can take actions to identify, support, and communicate with families who need to initiate new services as schools prepare to open. Administrators can work with community partners to plan for additional school-based services and programs during the transition back to normal schedules in anticipation of an increased need for mental health services.

What is cohorting?

Cohorting (sometimes called podding) is a new term for a strategy that schools may use to limit contact between students and staff as part of their efforts to limit transmission of SARS-CoV-2 (the virus that causes COVID-19). These strategies work by keeping groups of students – and sometimes staff – together over the course of a pre-determined period of time. Ideally, the students and staff within a cohort will only have physical proximity with others in the same cohort. This practice may help prevent the spread of COVID-19 by limiting cross-over of students and teachers to the extent possible, thus:

- Decreasing opportunities for exposure or transmission of SARS-CoV-2
- Reducing contact with shared surfaces
- Facilitating more efficient contact tracing in the event of a positive case
- Allowing for targeted testing, quarantine, and/or isolation of a single cohort instead of school-wide measures in the event of a positive case or cluster of cases

Cohorting strategies are common practice in many elementary schools across the United States. Many elementary school students have the same teacher and classmates during the entire school year. Implementation of this strategy varies, depending on setting and resources. For example:

- Schools may keep cohorts together in one classroom, and have teachers rotate between rooms.
- Schools may alternate cohorts by days or weeks, with cohorts assigned to specific days or weeks.
- Schools may adopt a hybrid approach, with some cohorts assigned to in-person learning and others assigned to online learning.

Evidence of the impact of cohorting on spread of COVID-19 is limited. Some evidence from other viral disease outbreaks and school reopenings in international settings suggests that cohorting may be an important tool for mitigating COVID-19 spread. However, it is essential to note that those studies were conducted in very different contexts, in communities with lower transmission levels.

Additional resources for K-12 administrators

Considerations for Schools	COVID-19 Frequently Asked Questions
Latest COVID-19 Information	People at Higher Risk
Cleaning and Disinfection	Managing Stress and Coping
Guidance for Businesses and Employers	HIPAA and COVID-19
Guidance for Schools and Childcare Centers	CDC Communication Resources
COVID-19 Prevention	Community Mitigation
Handwashing Information	Approach for Monitoring and Evaluating Community Mitigation Strategies
Face Coverings	OSHA Guidance on Preparing Workplaces for COVID-19
Social Distancing	FERPA & Coronavirus Disease 2019

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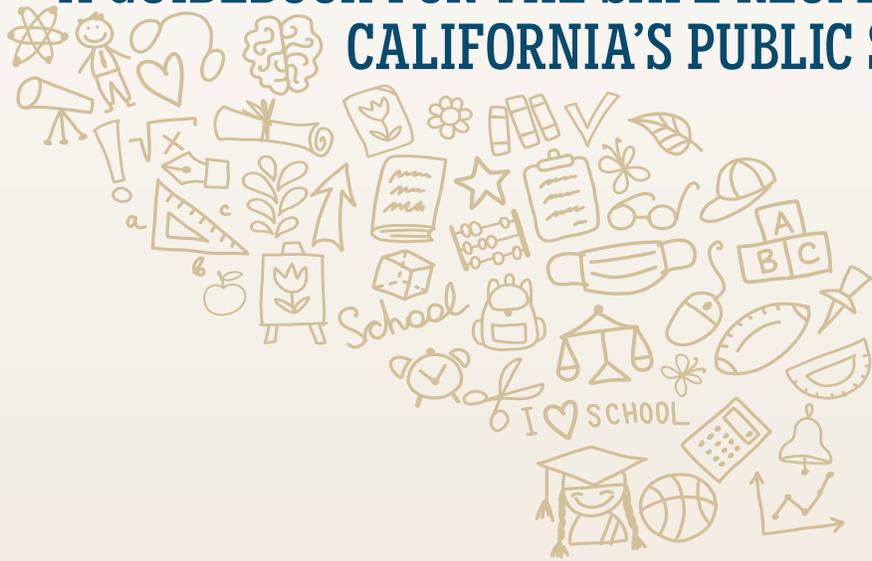
Content source: National Center for Immunization and Respiratory Diseases (NCIRD), Division of Viral Diseases

EXHIBIT EE



STRONGER TOGETHER

A GUIDEBOOK FOR THE SAFE REOPENING OF CALIFORNIA'S PUBLIC SCHOOLS



California Department of Education
June 2020





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STRONGER TOGETHER:

FOREWORD BY THE STATE SUPERINTENDENT OF PUBLIC INSTRUCTION

Greetings educational leaders, teachers, classified staff, parents, students, and all Californians:

The effects felt by COVID-19 have been widespread and created impacts unlike anything that we've ever seen. I want to commend the people of California for your resilience and the quick manner in which you moved into distance learning. Thank you for all that you've done to help keep California's students safe and able to continue learning.

As we prepare to move into the likely reopening of our schools, we provide this guidance as a "how to" for safely reopening our schools. In it you will find answers to many questions, including the need for physical distancing and types of recommended personal protective equipment. You'll also learn ways that we will have to rearrange our staff and students in order to ensure that those who are opting for in-person instruction can do so safely.

It has been my honor to lead a statewide reopening schools task force that created a participatory process for our educators and stakeholders to lend their voices. This guidance is also informed by the technical assistance and advice of many health and safety organizations including the Centers for Disease Control, California Department of Public Health, California Division of Occupational Safety and Health, and the many health officers from counties around our state. I want to thank the Governor's Office and our partners in the Legislature for their support in this endeavor, and all the staff at the California Department of Education (CDE) who have written and contributed their expertise throughout this document. I especially want to thank Dr. Stephanie Gregson, the Chief Deputy Superintendent at CDE, who served as its chief writer and editor.

We gathered additional input from focus group conversations with teachers, classified staff, child care providers, superintendents, and public health officials. Important voices were heard during virtual support circles with educators, parents, and students. And additional insight came from consultation with state superintendents, researchers, and experts from throughout the nation. Thank you to all those who took time to help review this document, and I look forward to the next steps of our work together to implement this guidance safely.

We know that guidance is only as good as its implementation, so think of this as the beginning of the conversation—not the end. We know that for many of us, this is the toughest challenge that we'll ever face, perhaps in our lifetime. But when it comes to ensuring that California students continue receiving a high-quality education—and doing so safely—we must rise to meet the challenge. Californians, I'm inspired by how you have come together to make it this far.



I couldn't be prouder to be your state superintendent. We are stronger together, we can do more together, and I thank you for all you are doing together to support our 6.2 million students.


Tony Thurmond

State Superintendent of Public Instruction



INTRODUCTION

The COVID-19 pandemic affected entire communities, states, and the world and led us on a journey none of us thought we would experience in our lifetime. Our communities and families have experienced physical, emotional, health, and financial strains. The high levels of stress and trauma experienced during this time have highlighted the resiliency, strength, and power of ourselves and the importance of our school communities.

We know our local educational agencies (LEAs) are all working collaboratively with their local county health officials and community partners to plan on how to safely reopen schools. **The intent of this document is to be a guide for local discussion on reopening schools.** It is not a “one-size-fits-all” document; rather, it is a document that honors the varied local contexts of each of our LEAs.



This guidance document was developed with the most current information known at the time and may be updated as new data becomes relevant. This guide will provide checklists, essential questions for consideration, and examples of best practices. Guidance on standards for quality distance learning is currently being developed by the CDE and will be available on our website. While the guidance by its nature is not a mandate, this guidance serves as a “how to” for LEAs as they plan to safely reopen. LEAs need to work with their local health departments and local stakeholders to ensure that their protocols align with the most current scientific knowledge and community expectations. It is also reasonable to expect that the protocols schools implement will change as the local conditions change.

What has been highlighted during this pandemic is the importance of paying attention to the social–emotional well-being of our students, families, and staff. We encourage all LEAs to keep the emotional well-being of all at the forefront of their decision making. This is also a time to reflect on systems that may not have worked for every child, and we encourage you to please continue to eliminate the barriers to student success that existed before the closure. All of this is difficult work and each LEA should work to be inclusive and collaborative from the start of their planning with community stakeholders (i.e., students, families, teachers, staff, local bargaining representatives, school advisory councils, and other partners). LEAs have an opportunity to align and connect their reopening plans with tools such as the Local Control Accountability Plan (LCAP) and safety plans while utilizing inclusive, distributive, and collaborative leadership grounded in continuous improvement. We have an unprecedented opportunity to improve how we care for and educate each child. Let’s work to enhance the public good of our public schools as we implement new, more student-centered designs.

TIMELINE OF THE CDE COVID-19 RESPONSE AND ACTIVITIES

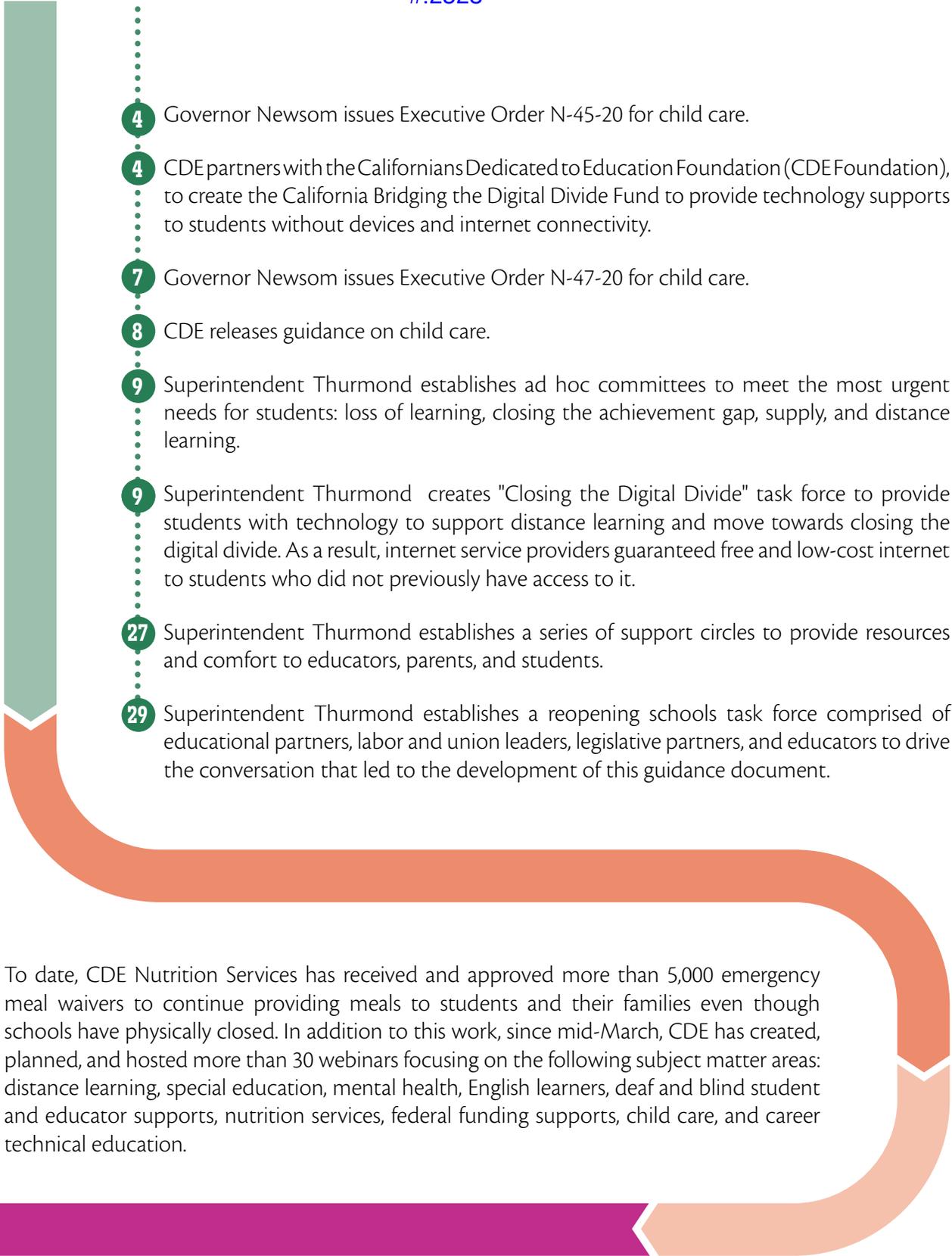
This is a brief overview of key dates and the response efforts of the California Department of Education (CDE).

MARCH 2020

- 13 Governor Gavin Newsom issues Executive Order N-26-20, ensuring state funding for schools even in event of physical closure.
- 17 In coordination with the Department of Health and Human Services, CDE releases guidance on distance learning, child nutrition, and child care.
- 18 Governor Newsom issues Executive Order N-30-20, suspending standardized testing for local educational agencies to take appropriate actions to mitigate the effects of the COVID-19 pandemic while California pursued a federal waiver of testing requirements.
- 19 Governor Newsom issues a stay at home order for the entire state.
- 20 CDE releases special education guidance to support students with disabilities.
- 26 The US Department of Education issues informal approval of Assessment Waiver; joint request from CDE and the California State Board of Education.
- 31 State Superintendent of Public Instruction Tony Thurmond releases a recommendation letter to all schools in the state to consider closing physical campuses to ensure the safety of students and staff through the end of the 2019–20 school year.

APRIL 2020

- 1 CDE releases guidance on graduation and grading requirements.
- 1 CDE releases Labor Management Framework established by the Labor Management Task Force facilitated by SSPI Thurmond.
- 1 Superintendent Thurmond announces Senate Bill (SB) 117 funding is available to school districts.
- 2 The California State Board of Education, CDE, California State University, University of California, California Community Colleges, and the Association of Independent California Colleges and Universities issue a joint statement to waive entrance requirements for college-bound seniors and juniors.

- 
- 4 Governor Newsom issues Executive Order N-45-20 for child care.
 - 4 CDE partners with the Californians Dedicated to Education Foundation (CDE Foundation), to create the California Bridging the Digital Divide Fund to provide technology supports to students without devices and internet connectivity.
 - 7 Governor Newsom issues Executive Order N-47-20 for child care.
 - 8 CDE releases guidance on child care.
 - 9 Superintendent Thurmond establishes ad hoc committees to meet the most urgent needs for students: loss of learning, closing the achievement gap, supply, and distance learning.
 - 9 Superintendent Thurmond creates "Closing the Digital Divide" task force to provide students with technology to support distance learning and move towards closing the digital divide. As a result, internet service providers guaranteed free and low-cost internet to students who did not previously have access to it.
 - 27 Superintendent Thurmond establishes a series of support circles to provide resources and comfort to educators, parents, and students.
 - 29 Superintendent Thurmond establishes a reopening schools task force comprised of educational partners, labor and union leaders, legislative partners, and educators to drive the conversation that led to the development of this guidance document.

To date, CDE Nutrition Services has received and approved more than 5,000 emergency meal waivers to continue providing meals to students and their families even though schools have physically closed. In addition to this work, since mid-March, CDE has created, planned, and hosted more than 30 webinars focusing on the following subject matter areas: distance learning, special education, mental health, English learners, deaf and blind student and educator supports, nutrition services, federal funding supports, child care, and career technical education.



CDE HEALTH AND SAFETY CHECKLIST

LEA Checklist for Physically Reopening Campuses for Students



Local Conditions. Ensure that the following local conditions are in place:

- a. Flexibility or Lifting of State Stay-Home Order
 - i. The state has lifted or relaxed the stay-home order to allow schools to physically reopen.
- b. Flexibility or Lifting of County Stay-Home Order
 - i. The county has lifted or relaxed the stay-home or shelter-in-place order to allow schools to physically reopen.
- c. Local Public Health Clearance. Local public health officials have made determinations, including, but not limited to, the following:
 - i. Testing Availability. Consult with local public health officials to ensure adequate tests and tracking/tracing resources are available for schools to reopen. Employees have access to COVID-19 testing at regular and ongoing intervals.
 - ii. Sufficient duration of decline or stability of confirmed cases, hospitalizations, and deaths.
 - iii. Sufficient surge capacity exists in local hospitals.
- d. Equipment Availability
 - i. Have sufficient protective equipment to comply with California Department of Public Health (CDPH) guidance for students and staff appropriate for each classification or duty, as well as relevant California Division of Occupational Safety and Health Administration (Cal/OSHA) requirements.
 - ii. Have a plan for an ongoing supply of protective equipment.
 - iii. Purchase a sufficient number of no-touch thermal scan thermometers for symptom screenings.
 - iv. Consider the differing requirements of PPE/EPG for the differing populations of students with disabilities (i.e., for those requiring medical procedures, toileting, lifting and mobility assistance).
- e. Cleaning Supply Availability
 - i. Have enough school-appropriate cleaning supplies to continuously disinfect the school site in accordance with CDPH guidance.
 - ii. Ensure sufficient supplies of hand sanitizers, soap, handwashing stations, tissues, no-touch trash cans, and paper towels.



Plan to Address Positive COVID-19 Cases or Community Surges

- a. Establish a plan to close schools again for physical attendance of students, if necessary, based on public health guidance and in coordination with local public health officials.
- b. In accordance with CDPH guidance, when a student, teacher, or staff member or a member of their household tests positive for COVID-19 and has exposed others at the school implement the following steps:
 - i. In consultation with the local public health officials, the appropriate school official may consider whether school closure is warranted and length of time based on the risk level within the specific community as determined by the local public health officer.



- ii. In accordance with standard guidance for isolation at home after close contact, the classroom or office where the COVID-19-positive individual was based will typically need to close temporarily as students or staff isolate.
- iii. Additional close contacts at school outside of a classroom should also isolate at home.
- iv. Additional areas of the school visited by the COVID-19-positive individual may also need to be closed temporarily for cleaning and disinfection.
- v. Develop a plan for continuity of education, medical and social services, and meal programs and establish alternate mechanisms for these to continue.

Injury and Illness Prevention Program (IIPP)

- a. Update the [IIPP](#) to address unique circumstances during the COVID-19 crisis and make updates accessible to employees and parents.

Campus Access. Develop a plan to minimize access to campus, and limit nonessential visitors, facility use permits, and volunteers.

- a. Exclude any student, parent, caregiver, visitor, or staff showing symptoms of COVID-19 (reference CDC and CDPH guidelines for COVID-19 symptoms). Staff should discuss with the parent or caregiver and refer to the student's health history form or emergency card to identify whether the student has a history of allergies, which would not be a reason to exclude.
- b. Monitor staff and students throughout the day for signs of illness. Determine any special or unique needs for students with disabilities related to planned district or schoolwide procedures.
- c. Students—Entering Campuses
 - i. Passive Screening. Instruct parents to screen students before leaving for school (check temperature to ensure temperatures below 100.4 degrees Fahrenheit, observe for symptoms outlined by public health officials) and to keep students at home if they have symptoms consistent with COVID-19 or if they have had close contact with a person diagnosed with COVID-19.
 - ii. Active Screening. Engage in symptom screening as students enter campus and buses, consistent with public health guidance, which includes visual wellness checks and temperature checks with no-touch thermometers (check temperature to ensure temperatures below 100.4 degrees Fahrenheit), and ask all students about COVID-19 symptoms within the last 24 hours and whether anyone in their home has had COVID-19 symptoms or a positive test.
 - 1. If a thermometer requiring a touch method (under the tongue or arm, forehead, etc.) is the only type available, it should only be used when a fever is suspected and caution is taken by temperature screeners, such as by wearing gloves, eye protection, and a mask.
 - 2. Thermometers must be properly cleaned and disinfected after each use.
 - iii. All students must wash or sanitize hands as they enter campuses and buses.
 - iv. Provide supervised, sufficient points of access to avoid larger gatherings.
 - v. Use privacy boards or clear screens when practicable.
 - vi. If a student is symptomatic while entering campus or during the school day:
 - 1. Students who develop symptoms of illness while at school should be separated from others right away, preferably isolated in an area through which others do not enter or pass. If more than one student is in an isolation area, ensure physical distancing.



2. Any students or staff exhibiting symptoms should be required to immediately wear a face covering and wait in an isolation area until they can be transported home or to a health care facility.
 3. Students should remain in isolation with continued supervision and care until picked up by an authorized adult.
 4. Follow established guidelines for triaging students in the health office, recognizing not all symptoms are COVID-19 related.
 5. Advise parents of sick students that students are not to return until they have met [CDC criteria to discontinue home isolation](#).
- vii. Develop a plan for if students are symptomatic when boarding the bus.
- viii. Protect and support students who are at higher risk for severe illness ([medical conditions that the CDC says may have increased risks](#)) or who cannot safely distance from household contacts at higher risk by providing options such as virtual learning or independent study.
- d. Staff—Entering Campuses
- i. Passive Screening. Instruct staff to self-screen before leaving for work (check temperature to ensure temperatures below 100.4 degrees Fahrenheit, check for symptoms outlined by public health officials) and to stay home if they have symptoms consistent with COVID-19 or if they have had close contact with a person diagnosed with COVID-19.
 - ii. Active Screening. Engage in symptom screening as staff enter worksites, consistent with public health guidance, which includes visual wellness checks and temperature checks with no-touch thermometers (check temperature to ensure temperatures below 100.4 degrees Fahrenheit), and ask all staff about COVID-19 symptoms within the last 24 hours and whether anyone in their home has had COVID-19 symptoms or a positive test.
 1. If a thermometer requiring a touch method (under the tongue or arm, forehead, etc.) is the only type available, it should only be used when a fever is suspected.
 2. Thermometers must be properly cleaned and disinfected after each use.
 - iii. All staff must wash or sanitize hands as they enter worksites.
 - iv. Exclude employees who are exhibiting symptoms from the workplace.
 1. Staff members who develop symptoms of illness should be sent to medical care. Have emergency substitute plans in place.
 2. Create a procedure for reporting the reasons for the exclusions.
 3. Advise sick staff members not to return until they have met [CDC criteria to discontinue home isolation](#).
- e. Outside Visitors and Groups
- i. Limit access to campus for parents and other visitors.
 - ii. Evaluate whether and to what extent external community organizations can safely utilize the site and campus resources. Ensure external community organizations that use the facilities also follow the school's health and safety plans and CDPH guidance.
 - iii. Review facility use agreements and establish common facility protocols for all users of the facility.
 - iv. Establish protocol for accepting deliveries safely.



- v. Charter School Co-locations
 - 1. Update facility use agreements to address unique circumstances during the COVID-19 crisis, ensuring that organizations that are using the same facility have agreed to the same understandings about how to reopen in a healthy and safe way. Establish a protocol for responding to site concerns regarding health and safety issues that arise during the pandemic that is collaborative and meets the needs of all stakeholders.

✓ **Hygiene.** Plan to address [hygiene practices](#) to ensure personal health and safety in school facilities and vehicles.

- a. Handwashing. In accordance with CDPH and Cal/OSHA guidance and in consultation with local public health officials, develop a plan for handwashing that includes:
 - i. Providing opportunities for students and staff to meet handwashing frequency guidance.
 - ii. Ensuring sufficient access to handwashing and sanitizer stations. Consider portable handwashing stations throughout a site and near classrooms to minimize movement and congregations in bathrooms to the extent possible.
 - iii. Ensuring fragrance-free hand sanitizer (with a minimum of 60 percent alcohol) is available and supervised at or near all workstations and on buses. Children under age nine should use hand sanitizer under adult supervision. Call Poison Control if consumed: 1-800-222-1222. Note: frequent handwashing is more effective than the use of hand sanitizers.
- b. Train staff and students on proper handwashing techniques and PPE/EPG use, including the following:
 - i. Scrub with soap for at least 20 seconds or use hand sanitizer if soap and water are not accessible. Staff and students should use paper towels (or single use cloth towels) to dry hands thoroughly.
 - ii. Wash hands when: arriving and leaving home; arriving at and leaving school; after playing outside; after having close contact with others; after using shared surfaces or tools; before and after using restroom; after blowing nose, coughing, and sneezing; and before and after eating and preparing foods.
 - iii. [CDC guidance](#) on proper PPE use.
- c. Teach staff and students to:
 - i. Use tissue to wipe the nose and cough and sneeze inside the tissue.
 - ii. Not touch the face or face covering.

✓ **Protective Equipment.** Plan to address protective equipment needs to ensure personal health and safety in school facilities and vehicles.

- a. According to CDC guidance:
 - i. [Training and information](#) should be provided to staff and students on proper use, removal, and washing of cloth face coverings.
 - ii. Face coverings are not recommended for anyone who has trouble breathing or is unconscious, incapacitated, or otherwise unable to remove the covering without assistance. LEAs should make reasonable accommodations such as a face shield with a cloth drape for those who are unable to wear face coverings for medical reasons. Per Cal/OSHA, considerations for face shields should include a cloth drape attached across the bottom and tucked into shirt.



- iii. Cloth face coverings are meant to protect other people in case the wearer is unknowingly infected (many people carry COVID-19 but do not have symptoms). Cloth face coverings are not surgical masks, respirators, or personal protective equipment.
- b. Staff Protective Equipment
 - i. As recommended by the CDC, all staff should wear face coverings. Per CDPH guidance, teachers could use face shields, which enable students to see their faces and to avoid potential barriers to phonological instruction.
 - ii. Provide masks if the employee does not have a clean face covering.
 - iii. Provide other protective equipment, as appropriate for work assignments.
 - 1. For employees engaging in symptom screening, provide surgical masks, face shields, and disposable gloves.
 - 2. For front office and food service employees, provide face coverings and disposable gloves.
 - 3. For custodial staff, provide equipment and PPE for cleaning and disinfecting, including:
 - A. For regular surface cleaning, provide gloves appropriate for all cleaning and disinfecting.
 - B. Classified staff engaged in deep cleaning and disinfecting should be equipped with proper PPE for COVID-19 disinfection (disposable gown, gloves, eye protection, and mask or respirator) in addition to PPE as required by product instructions. All products must be kept out of children's reach and stored in a space with restricted access.
 - C. Cal/OSHA requires that PPE be provided and worn to effectively protect employees from the hazards of the cleaning products used and training be provided to staff on the hazards of chemicals.
- c. Student Protective Equipment
 - i. Students should use cloth face coverings, especially in circumstances when physical distancing cannot be maintained. If an LEA requires students to wear face coverings, then the LEA must provide face coverings to be used. Consider how the LEA will address students with disabilities who refuse or are not able to wear masks. At a minimum, face coverings should be worn:
 - 1. While waiting to enter the school campus.
 - 2. While on school grounds (except when eating or drinking).
 - 3. While leaving school.
 - 4. While on a school bus.
 - A. Driver has access to surplus masks to provide to students who are symptomatic on the bus.



Physical Distancing. Plan to meet physical distancing standards in school facilities and vehicles. Clearly define how staff can honor physical distancing recommendations, yet meet student medical, personal, or support needs. Determine how adequate space and facilities will be utilized to maintain health and safety of students and staff, especially when tending to individual student medical or personal needs.

- a. Plan to limit the number of people in all campus spaces to the number that can be reasonably accommodated while maintaining a minimum of 6 feet of distance between individuals. (6 feet is the current minimum recommendation for physical distancing from the CDC, but it is important to pay attention to future modifications in public health recommendations.)



- b. To the extent possible, and as recommended by the CDC, attempt to create smaller student/ educator cohorts to minimize the mixing of student groups throughout the day. Minimize movement of students, educators, and staff as much as possible.
- c. In a circumstance where sufficient physical distancing is difficult or impossible, such as when students enter or exit a school bus in proximity to the bus driver, all individuals, including staff and students, should wear face coverings that cover the mouth and nose consistent with public health guidance. To be clear, face coverings are not a replacement for physical distancing, but they should be used to mitigate virus spread when physical distancing is not feasible.
- d. Student Physical Distancing. LEAs should plan to:
 - i. Limit number of students physically reporting to school, if needed to maintain physical distancing.
 - 1. Determine student and staff capacity of each school meeting 6-foot physical distancing objectives.
 - 2. Consider various strategies outlined in the Instructional Program Models in the guidance document, such as early/late start times and blended learning models.
 - ii. The CDC recommends virtual activities in lieu of field trips and intergroup events.
 - iii. Post signage and install barriers to direct traffic around campus.
 - iv. Buses
 - 1. Determine maximum capacity for students of each vehicle while meeting 6-foot physical distancing objectives.
 - 2. Create a plan for seating based on maximum capacity determined above, and develop a plan for bus routes that accommodates the capacity limitations. Mark or block seats that must be left vacant. Sample seating options:
 - A. Option 1: Seat one student to a bench on both sides of the bus, skipping every other row.
 - B. Option 2: Seat one student to a bench, alternating rows on each side to create a zigzag pattern on the bus.
 - 3. Instruct students and parents to maintain 6-foot distancing at bus stops and while loading and unloading.
 - 4. Seat students from the rear of the bus forward to prevent students from walking past each other. To prevent students from walking past one another, afternoon runs should be boarded based on the order in which students will be dropped off. (Students who get off first should board last and sit in the front.)
 - 5. Students and staff should wear face coverings at bus stops and on buses.
 - v. Playgrounds/Outside Spaces/Athletics
 - 1. Increase supervision to ensure physical distancing.
 - 2. Physical education (PE) and intramural/interscholastic athletics should be limited to activities that do not involve physical contact with other students or equipment until advised otherwise by state/local public health officials.
 - vi. Classrooms
 - 1. Determine maximum capacity for students of each classroom while meeting 6-foot physical distancing objectives.



2. In accordance with CDC and CDPH guidance, ensure desks are a minimum of 6 feet apart and arrange desks in a way that minimizes face-to-face contact.
 3. If necessary, utilize other campus spaces for instructional activities (e.g., lecture halls, gyms, auditoriums, cafeterias, outdoors).
 4. If necessary, broadcast to other classrooms and students distance learning at home.
 5. Increase staffing to ensure physical distancing for younger students and students with special needs.
 6. Arrange developmentally appropriate activities for smaller group activities and rearrange furniture and play spaces to maintain separation, when possible.
 7. Address physical distancing objectives as students move between classrooms.
 8. Address potential issues from physical distancing rules that could result in unintended segregation of students with disabilities on campuses away from peers without disabilities.
- vii. Food Service
1. Consider strategies to limit physical interaction during meal preparation and meal service (e.g., serving meals in classrooms, increasing meal service access points, staggering cafeteria use).
 2. Suspend use of share tables and self-service buffets for food and condiments.
 3. Install physical barriers, such as sneeze guards and partitions, at point of sale and other areas where maintaining physical distance of 6 feet is difficult.
 4. With an approved National School Lunch Program waiver, offer meal delivery for students quarantined or in a home-based cohort.
 5. If providing meal service in classrooms, plan for cleaning and trash removal.
- e. Staff
- i. Develop a plan that ensures physical distancing among staff in their work environment to reduce spread of the virus that includes:
 1. Avoiding staff congregation in work environments, break rooms, staff rooms, and bathrooms.
 2. Avoiding grouping staff together for training or staff development. Consider conducting the training virtually or, if in-person, ensure distancing is maintained.
 - ii. Adjust staff schedules (through negotiations) to accommodate new student schedules and physical distancing strategies.
 - iii. In accordance with Cal/OSHA regulations and guidance, evaluate all workspaces to ensure that employees can maintain physical distancing to the extent possible.
 1. Where possible, rearrange workspaces to incorporate a minimum of 6 feet between employees and students.
 2. If physical distancing between workspaces or between employees and students and visitors is not possible, add physical barriers that cannot be moved to separate workspaces.
-  **Cleaning and Disinfecting.** Plan to meet cleanliness and disinfecting standards in school facilities and vehicles.
- a. Overall Cleanliness Standards. Schools must meet high cleanliness standards prior to reopening and maintain a high level during the school year.

Increased or Improved Services for Foster Youth, English Learners, and Low-Income Students

Percentage to Increase or Improve Services	Increased Apportionment Based on the Enrollment of Foster Youth, English Learners, and Low-Income students
[Insert percentage here]%	[Insert dollar amount here]

Required Descriptions

[For the actions being provided to an entire school, or across the entire school district or county office of education (COE), an explanation of (1) how the needs of foster youth, English learners, and low-income students were considered first, and (2) how these actions are effective in meeting the needs of these students.]

[Provide description here]

[A description of how services for foster youth, English learners, and low-income students are being increased or improved by the percentage required.]

[Provide description here]

EXHIBIT II

8/9/2020

2020 Budget Act and Special Education - Laws, Regulations, & Policies (CA Dept of Education)



Home / Specialized Programs / Special Education / Laws, Regulations, & Policies

**California Department of Education
Official Letter**

July 15, 2020

Dear County and District Superintendents, Special Education Local Plan Area Directors, Special Education Administrators at County Offices, Special Education Program Directors, Charter School Administrators, Principals, and Nonpublic School Directors:

2020 Budget Act and Special Education

On June 29, 2020, Governor Newsom signed the 2020 Budget Act and accompanying budget-implementing legislation, including Senate Bill (SB) 98 (Chapter 24, Statutes of 2020), the education omnibus trailer bill. The purpose of this notice is to outline some notable changes related to special education and distance learning enacted with the 2020 Budget Act.

Individualized Education Program Requirements

SB 98, Section 66, amends Section 56345 of the California *Education Code* (EC) to require that individualized education programs (IEPs) include a description of the means by which the IEP will be provided under emergency conditions, as described in EC 46392, in which instruction or services, or both, cannot be provided to the pupil either at the school or in person for more than 10 school days. Specifically, SB 98 adds EC 56345(a)(9)(A-C), which states:

(9)(A) A description of the means by which the individualized education program (IEP) will be provided under emergency conditions, as described in Section 46392, in which instruction or services, or both, cannot be provided to the pupil either at the school or in person for more than 10 school days. The description shall include all of the following:

- (i) Special education and related services.
- (ii) Supplementary aids and services.
- (iii) Transition services, as defined in Section 56345.1.
- (iv) Extended school year services pursuant to Section 300.106 of Title 34 of the *Code of Federal Regulations*.

(B) Subparagraph (A) shall apply, on or after the operative date of this paragraph, to the development of an initial individualized education program or the next regularly scheduled revision of an individualized education program that has not already met the requirements of subparagraph (A).

(C) Public health orders shall be taken into account in implementing subparagraph (A).

The description required by EC 56345(a)(9)(A) must be included in the development of each student's initial IEP or addressed during the next regularly scheduled revision of students' IEPs (i.e. annual IEP).

Distance Learning

SB 98, Section 34, includes new requirements for distance learning services in the 2020-21 school year, including defining "distance learning" in EC 43500(a) as:

. . . instruction in which the pupil and instructor are in different locations and pupils are under the general supervision of a certificated employee of the local educational agency. Distance learning may include, but is not limited to, all of the following:

- (1) Interaction, instruction, and check-ins between teachers and pupils through the use of a computer or communications technology.
- (2) Video or audio instruction in which the primary mode of communication between the pupil and certificated employee is online interaction, instructional television, video, telecourses, or other instruction that relies on computer or communications technology.
- (3) The use of print materials incorporating assignments that are the subject of written or oral feedback.

8/9/2020

2020 Budget Act and Special Education - Laws, Regulations, & Policies (CA Dept of Education)

In contrast, *EC 43500(b)* defines “in-person instruction” as “instruction under the immediate physical supervision and control of a certificated employee of the local educational agency (LEA) while engaged in educational activities required of the pupil.”

EC 43503(b) requires that distance learning shall include several components, including:

- (4) Special education, related services, and any other services required by a pupil’s individualized education program pursuant to Section 56341, including the requirements of subparagraph (A) of paragraph (9) of subdivision (a) of Section 56345, with accommodations necessary to ensure that individualized education program can be executed in a distance learning environment.

Learning Continuity and Attendance Plan

SB 98, Section 34, in *EC 43509(a)(1)(A)*, requires the governing board of a school district, a county board of education, and the governing body of a charter school to adopt, by September 30, 2020, a learning continuity and attendance plan for the 2020-21 school year. *EC 43509(f)* requires the California Department of Education (CDE) to develop a template for the learning continuity and attendance plan on or before August 1, 2020.

The learning continuity and attendance plan must include what additional supports will be provided for pupils with exceptional needs served across the full continuum of placements during the period in which distance learning is provided (*EC 43509(f)(1)(B)(vi)*). Additionally, *EC 43509(f)(1)* specifies that the learning continuity and attendance plan shall include:

- (C) How the school district, county office of education, or charter school will address pupil learning loss that results from COVID-19 during the 2019–20 and 2020–21 school years, including all of the following:
 - (i) How the school district, county office of education, or charter school will assess pupils to measure pupil learning status, particularly in the areas of English language arts, English language development, and mathematics.
 - (ii) What actions and strategies the school district, county office of education, or charter school will use to address learning loss and accelerate learning progress for pupils, as needed, and how these strategies differ for pupils who are classified as English learners, are eligible for a free or reduced-price meal, or are foster youth, as those terms are defined in Section 42238.01, individuals with exceptional needs, pupils in foster care, and pupils who are experiencing homelessness.
 - (iii) How the effectiveness of the services or supports provided to address learning loss will be measured, actions and strategies the school district, county office of education, or charter school will use to address learning loss and accelerate learning progress for pupils, as needed, and how these strategies differ for individuals with exceptional needs.

Funding to Mitigate Learning Loss

SB 98 appropriates funding to support pupil achievement and mitigate learning loss. *EC 43509(f)(2)* specifies that the learning continuity and attendance plan shall describe how federal and state funding will be used to support the efforts described in the learning continuity and attendance plan, including federal and state funds provided for learning loss mitigation pursuant to Section 110 of SB 98. Subsection 110(d) specifies that certain funds shall be used for activities that directly support pupil academic achievement and mitigate learning loss related to COVID-19 school closures, and shall be expended for any of the following purposes:

- (1) Addressing learning loss or accelerating progress to close learning gaps through the implementation, expansion, or enhancement of learning supports that begin before the start of the school year and the continuation of intensive instruction and supports into the school year.
- (2) Extending the instructional school year by making adjustments to the academic calendar, increasing the number of instructional minutes provided during each week or school day, or taking any other action that increases the amount of instructional time or services provided to pupils based on their learning needs.
- (3) Providing additional academic services for pupils, such as diagnostic assessments of pupil learning needs, intensive instruction for addressing gaps in core academic skills, additional instructional materials or supports, or devices or connectivity for the provision of in-classroom and distance learning.
- (4) Providing integrated pupil supports to address other barriers to learning, such as the provision of health, counseling, or mental health services, professional development opportunities to help teachers and parents support pupils in distance-learning contexts, access to school breakfast and lunch programs, or programs to address pupil trauma and social-emotional learning.

LEAs are encouraged to carefully review the 2020 Budget Act and implementing legislation, including the required components of the IEP, distance learning, and learning and continuity plans outlined in SB 98, in order to plan for services to students with disabilities in the upcoming school year.

8/9/2020

2020 Budget Act and Special Education - Laws, Regulations, & Policies (CA Dept of Education)

Should there be any questions related to the above information, please contact the Special Education Division via email at SEDinfo@cde.ca.gov or the appropriate Focused Monitoring and Technical Assistance (FMTA) Consultant using the contact information provided on the CDE FMTA Consultant Assignments by Region web page at <https://www.cde.ca.gov/sp/se/qa/fmtacncnt.asp>.

Sincerely,

Original signed by Sarah Neville-Morgan. A hard copy of the signed document is available by contacting the Special Education Division's Director's Office by phone at 916-445-4602.

Sarah Neville-Morgan, Deputy Superintendent
Opportunities for All Branch

SNM:sw

Last Reviewed: Monday, July 27, 2020

EXHIBIT JJ

K-12 EDUCATION

California provides instruction and support services to roughly six million students in grades kindergarten through twelve in more than 10,000 schools throughout the state. A system of 58 county offices of education, 1,000 local school districts, and more than 1,200 charter schools provides students with instruction in English, mathematics, history, science, and other core competencies to enable them to develop the skills they will need upon graduation for either entry into the workforce or higher education.

The Budget includes total funding of \$98.8 billion (\$48.1 billion General Fund and \$50.7 billion other funds) for all K-12 education programs.

PROPOSITION 98

Proposition 98 is a voter-approved constitutional amendment that guarantees minimum funding levels for K-12 schools and community colleges. The Guarantee, which went into effect in the 1988-89 fiscal year, determines funding levels according to multiple factors including the level of funding in 1986-87, General Fund revenues, per capita personal income, and school attendance growth or decline. The Local Control Funding Formula is the primary mechanism for distributing these funds to support all students attending K-12 public schools in California.

The COVID-19 Recession has heavily impacted the economy and the state's General Fund revenues, creating a parallel negative impact on the state's K-14 Proposition 98 Guarantee. The Budget estimates Proposition 98 levels of \$78.5 billion, \$77.7 billion, and

\$70.9 billion in 2018-19, 2019-20, and 2020-21. For K-12 schools, this results in Proposition 98 per pupil spending of \$10,654 in 2020-21—a \$1,339 decrease over the 2019-20 per pupil spending levels. Additionally, in the same period, per pupil spending from all state, federal, and local sources decreased by approximately \$542 per pupil to \$16,881.

ADDRESSING IMMEDIATE NEEDS AND AVOIDING PERMANENT DECLINE

To help mitigate the negative impacts of the state's revenue decline on funding for K-12 schools and California Community Colleges, the Budget includes the following:

DEFERRALS

The COVID-19 Recession requires \$1.9 billion of Local Control Funding Formula (LCFF) apportionment deferrals in 2019-20, growing to \$11 billion LCFF apportionment deferrals in 2020-21. These deferrals will allow LCFF funding to remain at 2019-20 levels in both fiscal years; the Budget suspends the statutory LCFF cost-of-living adjustment in 2020-21. Of the total deferrals, \$5.8 billion will be triggered off in 2020-21 if the federal government provides sufficient funding that can be used for this purpose.

LEARNING LOSS MITIGATION

The Budget includes a one-time investment of \$5.3 billion (\$4.4 billion federal Coronavirus Relief Fund, \$539.9 million Proposition 98 General Fund, and \$355.2 million federal Governor's Emergency Education Relief Fund) to local educational agencies to address learning loss related to COVID-19 school closures, especially for students most heavily impacted by those closures.

Funds will be allocated to local educational agencies on an equity basis, with an emphasis on ensuring the greatest resources are available to local educational agencies serving students with the greatest needs. The funds are intended to track and mitigate the inequitable impact that the COVID-19 pandemic has had on different student populations, including low-income students and students with disabilities. Specifically, funds will be allocated in the following manner:

- \$2.9 billion based on the LCFF supplemental and concentration grant allocation.
- \$1.5 billion based on number of students with exceptional needs.

- \$979.8 million based on total LCFF allocation.

Funds may be used for:

- Learning supports that begin prior to the start of the school year, and the continuing intensive instruction and supports into the school year.
- Extending the instructional school year, including an earlier start date, by increasing the number of instructional minutes or days.
- Providing additional academic services for pupils, including diagnostic assessments of student learning needs, intensive instruction for addressing gaps in core academic skills, additional instructional materials or supports, or devices and connectivity for the provision of in-classroom and distance learning.
- Providing integrated student supports to address other barriers to learning, such as the provision of health, counseling or mental health services; professional development opportunities to help teachers and parents support pupils in distance-learning contexts; access to school breakfast and lunch programs; or programs to address student trauma and social-emotional learning.

SUPPLEMENTAL APPROPRIATIONS

In 2019-20 and 2020-21, the Proposition 98 funding level drops below the target funding level (Test 2), by a total of approximately \$12.4 billion. To accelerate the recovery from this funding reduction, the Budget provides supplemental appropriations above the constitutionally-required Proposition 98 funding level, beginning in 2021-22, and in each of the next several fiscal years, in an amount equal to 1.5 percent of General Fund revenues per year, up to a cumulative total of \$12.4 billion. This appropriation will accelerate growth in the Guarantee, which the Administration proposes to increase as a share of the General Fund. Currently, Proposition 98 guarantees that K-14 schools receive approximately 38 percent of the General Fund in Test 1 years. The Budget increases this share of funding to 40 percent by 2023-24.

REVISED CALPERS AND CALSTRS CONTRIBUTIONS

To provide local educational agencies with increased fiscal relief, the Budget redirects \$2.3 billion appropriated in the 2019 Budget Act to CalSTRS and CalPERS for long-term unfunded liabilities to reduce employer contribution rates in 2020-21 and 2021-22. This reallocation will further reduce the CalSTRS employer rate from 18.41 percent to

approximately 16.15 percent in 2020-21 and from 17.9 percent to 16.02 percent in 2021-22. The CalPERS Schools Pool employer contribution rate will be further reduced from 22.67 percent to 20.7 percent in 2020-21 and from 24.6 percent to 22.84 percent in 2021-22.

FEDERAL FUNDS

In addition to the federal Coronavirus Relief Fund and Governor's Emergency Education Relief Fund allocated to K-12 education above, the Budget appropriates \$1.6 billion in federal Elementary and Secondary School Emergency Relief funds that California was recently awarded. Of this amount, 90 percent (\$1.5 billion) will be allocated to local educational agencies in proportion to the amount of Title I-A funding they receive to be used for COVID-19 related costs. The remaining 10 percent (\$164.7 million) is available for COVID-19 related state-level activities, as follows:

- \$112.2 million to provide up to \$0.75 per meal for local educational agencies participating in the National School Lunch Program, School Breakfast Program, Seamless Summer Option, or Summer Food Service Program and serving meals between March 2020 and August 2020 due to physical school closures caused by the COVID-19 pandemic. These funds will enable local educational agencies to address food insecurity in their communities, especially for students and families who rely on school meals.
- \$45 million for grants to local educational agencies, including county offices of education, to coordinate or expand community schools to increase access to health, mental health, and social service supports for high-needs students. These funds will enable improved delivery of mental health and social-emotionally supportive services for students experiencing the stress, anxiety, and trauma caused by the COVID-19 pandemic.
- \$6 million for the University of California Subject Matter Projects to provide educator professional development for providing high-quality distance learning and addressing learning loss in mathematics, science, and English language arts due to the COVID-19 pandemic.
- \$1.5 million for the Department of Education for state operations costs associated with the COVID-19 pandemic.

TEMPORARY REVENUE INCREASES

The Budget proposes the temporary three-year suspension of net operating losses and limitation on business incentive tax credits to offset no more than \$5 million of tax liability per year. This, along with other tax changes, generates a net \$4.3 billion in General Fund revenues and approximately \$1.6 billion in benefit to the Proposition 98 Guarantee.

SPECIAL EDUCATION

The Budget increases special education resources and creates new mechanisms to improve special education financing, programs, and student outcomes. Specifically, the Budget increases special education base rates to \$625 per pupil pursuant to a new funding formula, apportioned using the existing hold harmless methodology, and provides \$100 million to increase funding for students with low-incidence disabilities.

The Budget also includes: (1) \$15 million federal Individuals with Disabilities Education Act (IDEA) funds for the Golden State Teacher Scholarship Program to increase the special education teacher pipeline, (2) \$8.6 million federal IDEA funds to assist local educational agencies with developing regional alternative dispute resolution services and statewide mediation services, and (3) \$1.1 million federal IDEA funds for a study of the current special education governance and accountability structure, as well as three workgroups to create a statewide Individualized Education Program template, provide recommendations on alternative pathways to a diploma for students with disabilities, and study the costs of out-of-home care.

AVERAGE DAILY ATTENDANCE

Since the beginning of the COVID-19 pandemic in early March, local educational agencies across the state closed for classroom instruction, transitioning students and teachers to distance learning models. The loss of classroom-based instruction has had unprecedented impacts on students and families, especially the most vulnerable students.

To help minimize additional learning loss related to COVID-19, the budget presumes that local educational agencies should transition back to providing in-classroom instruction in the 2020-21 school year. However, if local or state public health official orders necessitate a school closure, local educational agencies will need flexibility to

provide distance learning. To ensure funding stability regardless of the instructional model, the Budget includes a hold harmless for the average daily attendance used to calculate school funding for all local educational agencies. Additionally, the Budget includes requirements for distance learning to ensure that, when in-person instruction is not possible, students continue to receive access to a quality education via distance learning.

Specifically, the Budget includes:

- A hold-harmless for the purpose of calculating apportionment in the 2020-21 fiscal year; average daily attendance shall be based on the 2019-20 year, except for new charter schools commencing instruction in 2020-21.
- An exemption for local educational agencies from the annual minimum instructional minutes requirement. The minimum daily instructional minutes and minimum instructional day requirements are maintained, but may be met through a combination of in-person and distance learning instruction.
- Requirements for distance learning services, including the provision of devices and connectivity and supports for students with exceptional needs, English language learner students, youth in foster care, and youth experiencing homelessness, as well as students in need of mental health supports. Daily interaction with students in distance learning is required and local educational agencies are required to provide access to nutrition programs.
- Distance learning attendance requirements, including documentation of daily student participation, weekly engagement records, and attendance reporting for purposes of chronic absenteeism tracking. The Budget also requires local educational agencies offering distance learning to develop tiered re-engagement strategies for students who do not participate and to regularly engage with parents or guardians regarding academic progress.
- Fiscal penalties for local educational agencies offering distance learning that do not meet instructional day requirements or the attendance-related requirements.
- A material revision exemption for site-based charter schools offering distance learning.

Additionally, the Budget provides \$750,000 one-time Proposition 98 General Fund for the Sacramento County Office of Education to develop distance learning curriculum and instructional guidance for mathematics, English language arts, and English language development, for adoption by the State Board of Education by May 31, 2021.

2020-21 LEARNING CONTINUITY AND ATTENDANCE PLAN

In April, the Governor issued Executive Order N-56-20, which allowed local educational agencies to submit local control and accountability plans, normally due July 1, 2020, by December 15, 2020, in recognition of the challenges that local educational agencies would have faced in completing the plans during the COVID-19 pandemic this spring. Federal funds provided to schools for COVID-19 must be expended by local educational agencies on an accelerated timeline. In order to ensure transparency around the expenditures of these new federal funds, and in alignment with new flexibilities related to distance learning, the Budget replaces the December local control and accountability plan with a Learning Continuity and Attendance Plan, to be completed by September 30, 2020.

The Budget requires the Superintendent of Public Instruction, in consultation with the executive director of the State Board of Education, to develop the template for the Learning Continuity and Attendance Plan by August 1, 2020, and requires the template to include all of the following:

- A description of how the local educational agency will provide continuity of learning during the COVID-19 pandemic and address all of the following:
 - Distance learning
 - Learning loss
 - Mental health and social-emotional well-being
 - Professional development
 - Pupil engagement and outreach
 - School nutrition
- Local educational agency expenditures related to addressing the impacts of the COVID-19 pandemic.
- How local educational agencies are increasing or improving services in proportion to funds generated on the basis of the number and concentration of English learners, youth in foster care, and low-income students pursuant to the local control funding formula.

In adopting the Learning Continuity and Attendance Plan, local educational agencies must consult with stakeholders, solicit stakeholder input, and hold public hearings on the plan.

SCHOOL POLICING

Schools serve a foundational role in the social development of students. This development can be advanced or hindered by the presence of police officers on school campuses. To better promote student mental health, restorative justice, and social-emotional well-being, state and local leaders must evaluate opportunities for improvement in school safety infrastructure.

To this end, the Budget includes \$200,000 one-time non-Proposition 98 General Fund for the creation of a Young People's Task Force, whose members can speak to the lived reality of school policing and will inform changes in policy, contingent on the enactment of future legislation. The Budget also includes intent language for the Legislature to evaluate the presence of law enforcement on school campuses and consider reforms informed by local needs to improve student safety.

EMPLOYEE PROTECTIONS

To ensure the continuity of employment for essential school staff during the COVID-19 pandemic, the Budget includes the following:

- Suspension of the August 15, 2020, layoff window for teachers and other non-administrative certificated staff.
- Suspension of layoffs for classified staff working in transportation, nutrition, and custodial services from July 1, 2020 through June 30, 2021.

The Budget also includes the intent of the Legislature that school districts, community college districts, joint powers authorities, and county offices of education retain all classified employees in the 2020-21 fiscal year.

Other Significant Adjustments

- **Classified School Employees Summer Assistance Program**—An increase of \$60 million Proposition 98 General Fund to provide a match of state funds for participating classified employees to be paid during the summer recess period.

- **Department of Education State Operations**—A total increase of \$436,000 non-Proposition 98 General Fund for the following:
 - \$336,000 ongoing non-Proposition 98 General Fund for the School Fiscal Services Division for workload associated with deferrals and average daily attendance changes.
 - \$100,000 one-time non-Proposition 98 General Fund for the Department of Education to develop a template for the Learning Continuity and Attendance Plan in consultation with the executive director of the State Board of Education.

EARLY LEARNING AND CARE PROGRAMS

Investing in early learning and care supports the success of children and families of color, the majority of people served by these programs. The Budget preserves funding for early learning and care programs to the greatest extent possible, given the constraints of the COVID-19 Recession. Access, reimbursement rate levels, and quality investments are all maintained or grown, with a specific focus on serving the children of income-eligible workers essential to the fight against COVID-19.

PROTECTING ESSENTIAL SERVICES

To support access for families and provide stable funding for early learning and care programs and providers, the Budget:

- Maintains early learning and care provider reimbursement rates at 2019-20 levels.
- Eliminates the application of negative statutory growth adjustments for early learning and care programs.
- Provides a hold harmless provision in 2020-21 for providers that contract directly with the Department of Education.
- In 2020-21, provides reimbursement at a child's maximum certified level of need for all providers accepting vouchers.

CARES ACT FUNDING FOR CHILD CARE

California received \$350.3 million through the federal CARES Act for COVID-19 related child care activities. To maximize the benefits of these funds to providers and families, the Budget includes the following expenditure plan:

- \$144.3 million for state costs associated with SB 89 expenditures, family fee waivers, and provider payment protection.
- \$125 million for voucher provider hold harmless and stipends.
 - Up to \$62.5 million to fund providers accepting vouchers at the maximum certified level of need.
 - At least \$62.5 million for one-time stipends for providers accepting vouchers that offer care during the COVID-19 pandemic.
- \$73 million to continue care for at-risk children and essential workers.
- \$8 million to extend family fee waivers until June 30, 2020.

FUTURE FEDERAL COVID-19 FUNDS FOR CHILD CARE

To allow for the quick deployment of potential future federal COVID-19 funds for child care, the Budget includes language allowing up to \$300 million of such funds to be allocated by the following schedule:

- \$150 million to extend access for families being served through limited-term subsidies and expand access for unserved, eligible families.
- \$125 million to provide limited-term stipends for state-subsidized child care providers offering care during the COVID-19 pandemic.
- \$25 million to assist licensed child care providers with costs to re-open child care facilities closed due to the COVID-19 pandemic, and to supplement unfunded costs caused by low attendance or temporary closures due to the COVID-19 pandemic.

SHIFT OF CHILD CARE PROGRAMS TO THE DEPARTMENT OF SOCIAL SERVICES

To promote a high-quality, affordable, and unified early childhood system, the Budget includes \$2.3 million General Fund in 2020-21 to transition the existing child care and child development programs from the Department of Education to the Department of

Social Services. This will align all child care programs within a single department in state government and will ease the administration of collective bargaining commencing later this year.

Other Significant Adjustments

- \$9.3 million one-time federal funds to develop and implement an early learning and care data system.
- A decrease in new federal Child Care and Development Block Grant funding available for child care vouchers of \$6 million, bringing the total allocation for increased access in the Alternative Payment Program from \$53.3 million to \$47.2 million. Additionally, the Budget specifies that first priority for these funds will be to extend subsidized care for income-eligible essential worker families and at-risk children from a limited-term to an ongoing basis.

EXHIBIT KK

8/9/2020

SSPI Outlines Support for Distance Learning - Year 2020 (CA Dept of Education)



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California Department of Education
News Release

Release: #20-63
July 29, 2020

Contact: Daniel Thigpen
E-mail: communications@cde.ca.gov
Phone: 916-319-0818

State Superintendent Tony Thurmond Outlines Ongoing Supports to Strengthen Distance Learning and Announces Timeline for Ethnic Studies Model Curriculum during Virtual Media Check-in

SACRAMENTO—State Superintendent of Public Instruction Tony Thurmond on Wednesday outlined ways in which the California Department of Education (CDE) is helping schools implement and strengthen distance learning in the weeks leading up to the new school year, including guidance updates and virtual professional development, and ongoing efforts to connect school districts to resources that can close the digital divide.

“With school starting in a matter of weeks for many districts—and with as many as 97 percent of students expected to begin in distance learning—CDE is leaning into this moment to help make sure our educators are ready,” said Thurmond. “Whether we are helping schools close the digital divide, or providing guidance and webinars to understand new requirements, I am proud of the work our team is leading to help educators have the resources and responsiveness they need to make critical decisions in real time.”

With most of the state’s students beginning the next academic year in distance learning, Thurmond said during Wednesday’s virtual media briefing, the need to ensure all of them have the basic technology to access their learning grows increasingly urgent. More than 700,000 students still lack computing devices and another 300,000 lack hotspots to connect to the internet. The CDE has begun reaching out to school districts across California to ensure they are aware that California schools are receiving \$5.3 billion to acquire devices, strengthen distance learning and address learning gaps. This funding makes it possible for most school districts to immediately close the digital divide and remove inequitable barriers to remote learning.

Schools can apply now for their share of the [Learning Loss Mitigation Funds](#), authorized by the 2020–21 state budget. The CDE has posted online [each school district’s initial allocation](#) (XLS) of Learning Loss Mitigation Funds and [answers to Frequently Asked Questions](#).

In the meantime, the CDE has released its first set of answers to [Frequently Asked Questions regarding distance learning](#), which are designed to help school districts better understand new state requirements for live instruction, daily participation, and steps for re-engagement when students have not connected with their schools.

During today’s media briefing, the State Superintendent also provided an update on CDE’s timelines and planned recommendations for a revised Ethnic Studies Model Curriculum. The CDE will post its recommendations for a revised [Ethnic Studies Model Curriculum](#) on Friday, July 31.

The CDE’s recommendations will be made after reviewing thousands of comments, consulting with ethnic studies subject matter experts and thought leaders, working closely with educators and state leaders, and engaging with students in a series of virtual classroom webinars focused on ethnic studies.

Thurmond said the recommendations will focus on the four foundational disciplines of ethnic studies: African American Studies, Asian American Studies, Chicano Latino Studies, and Native American and Indigenous Studies. He said the recommendations will also include educator resources for engaging in expanded, critical conversations that combat hate, prejudice, and bias by utilizing the History-Social Science Framework to make connections to ethnic studies and broader social justice issues.

“Our recommendations will come at a time when communities across the nation are demanding recognition for the roles and contributions of people of color from the institutions that have been historically designed to minimize them,” said Thurmond. “This has been the central focus of the ethnic studies movement for decades. And the diverse cross-section of students we have engaged in recent weeks through our virtual classroom series have been clear about their expectations for ethnic studies: that racial justice is overdue and should begin in the classroom.”

California is required by law to develop a model curriculum in ethnic studies that can be used as a guide for districts or schools that want to develop their own curriculum. The recommendations will be submitted to the Instructional Quality Commission (IQC) for discussion at its next meeting on August 13, 2020, kicking off a new process for public input and recommendations to the State Board of Education, which must take final action on the curriculum guidance by March 31, 2021.

8/9/2020

SSPI Outlines Support for Distance Learning - Year 2020 (CA Dept of Education)

An archived broadcast of the full media check-in can be viewed on the [CDE's Facebook page](#).

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Tony Thurmond — State Superintendent of Public Instruction
Communications Division, Room 5602, 916-319-0818, Fax 916-319-0100

Last Reviewed: Wednesday, July 29, 2020

EXHIBIT LL

8/9/2020

SPI Announces Collaboration with Apple & T-Mobile - Year 2020 (CA Dept of Education)



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California Department of Education
News Release

Release: #20-65
August 5, 2020

Contact: Communications
E-mail: communications@cde.ca.gov
Phone: 916-319-0818

State Superintendent Tony Thurmond Announces Major Collaboration with Apple and T-Mobile to Connect Students in Need

Districts can acquire discounted, internet-enabled devices as distance learning resumes

SACRAMENTO—State Superintendent of Public Instruction Tony Thurmond announced today that the California Department of Education (CDE) is collaborating closely with Apple and T-Mobile to connect up to 1 million students in need as most schools across California expect to begin the next school year in distance learning.

At a time when schools have experienced a shortage of available computing devices, the two companies are teaming up with the state to facilitate technological access that currently prevents hundreds of thousands of students from connecting with their teachers, peers, and school communities. Apple and T-Mobile will fulfill orders from districts—which could reach up to 1 million students—with discounted iPads already equipped with high-speed internet connectivity.

The COVID-19 pandemic forced an estimated 97 percent of California's 6.2 million students to resume their school year in distance learning. Since April, the State Superintendent and his Closing the Digital Divide Task Force—in collaboration with the Governor's Office, state lawmakers, and nonprofits such as the Californians Dedicated to Education Foundation—have been working to remove inequitable barriers to student access by working with internet service providers, tech companies, device manufacturers, and others to increase access to devices and internet connections.

"As schools are working around the clock to prepare students and families for virtual learning, I want to commend Apple and T-Mobile for stepping up in a monumental way to support California's neediest students," said Thurmond. "As Californians, we have a shared commitment to ensure every student has access to the basic tools needed to connect to their learning, succeed in today's world, and pursue their dreams. This commitment provides schools across the state a unique chance to put devices in the hands of students now, while potentially making longer-term investments that can help us remove these inequities once and for all."

iPad with cellular offers a powerful and portable solution for schools that will keep students engaged in learning from anywhere. Apple's Professional Learning team is dedicated to supporting educators and will be providing weekly virtual training sessions for California teachers, offering creative strategies for learning remotely. Apple also offers one-to-one virtual coaching sessions and teachers can gain foundational technology skills through the Apple Teacher Learning Center, available at no cost. Since March, Apple has led more than 150 thousand educator coaching sessions worldwide.

"At Apple, we believe technology has the power to transform the learning experience for students at all levels," said Susan Prescott, Apple's vice president of Markets, Apps, and Services. "We are proud the State of California has chosen iPad to facilitate remote learning, and during these challenging times we look forward to working with administrators and school districts across the state to help make learning more accessible for their students."

In response to the pandemic, T-Mobile has accelerated its efforts to help close the digital divide and enable families and schools to embrace remote learning, connecting hundreds of thousands of kids for virtual learning in over 300 school districts nationwide, even before this landmark collaboration with the State of California.

"Education is the great leveler in our society but only if everyone can access it. The pandemic has exposed just how widespread and detrimental the digital divide really is for millions of children in this country. At T-Mobile, we're committed to doing something about it, and we're incredibly proud to partner with Apple to help the State of California connect up to a million students when they need it most," said Mike Katz, EVP of T-Mobile for Business.

CDE's commitment to working with Apple and T-Mobile comes at the same time the Governor's Office and lawmakers included \$5.3 billion in one-time funding in the state budget for schools to strengthen distance learning heading into the same year. These funds can be used immediately for purchasing needed technology. Under the arrangement, T-Mobile will provide discounted service and Apple is offering special pricing for iPad + cellular, which has been available to schools on top of its [education volume pricing](#), to enable all learners during this time.

8/9/2020

SPI Announces Collaboration with Apple & T-Mobile - Year 2020 (CA Dept of Education)

The CDE will provide instructions to school districts to submit orders to Apple and T-Mobile. At least 100,000 devices can be ready to arrive through the back to school time frame, according to Apple and T-Mobile. The companies expect to be able to fulfill school district demand through the end of 2020.

School district leaders will have the opportunity to learn more about pricing options, ordering procedures, and timelines for deliveries during a special webinar of the Closing the Digital Divide Task Force at 11 a.m. today. The webinar will be broadcast live on [CDE's Facebook page](#) and school district leadership teams can register on Zoom at https://us02web.zoom.us/webinar/register/WN_Ojom6-BXS2idutF2RKC8Ug.

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Tony Thurmond — State Superintendent of Public Instruction
Communications Division, Room 5602, 916-319-0818, Fax 916-319-0100

Last Reviewed: Wednesday, August 05, 2020

EXHIBIT MM

8/9/2020

Connecting School Leaders to Available Devices - Year 2020 (CA Dept of Education)



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**California Department of Education
News Release**

Release: #20-66
August 5, 2020

Contact: Cynthia Butler
E-mail: communications@cde.ca.gov
Phone: 916-319-0818

State Superintendent Tony Thurmond and Digital Divide Task Force Connect School Leaders to Available Devices as Learning Resumes

SACRAMENTO—State Superintendent of Public Instruction Tony Thurmond and the Closing the Digital Divide Task Force held a special webinar today to connect school districts to available technology during a time when most schools are starting the school year in distance learning and many are experiencing a shortage of computing devices.

The task force, co-chaired by Senator Connie Leyva (D-Chino), also provided an update on one-time funding available immediately to school districts to purchase devices. State law requires that schools have a plan for ensuring access to devices and connectivity for all students whenever distance learning occurs.

“We know that up to 1 million students still need devices for distance learning, and we’re in a race against the clock as most schools plan to begin the next school year virtually,” Thurmond said. “We are proud to have provided this opportunity for all school districts in California to learn about the public-private partnerships available that can help us accelerate our efforts to meet the urgent needs of our most vulnerable students.”

During today’s webinar, panelists provided more details [about a landmark collaboration with Apple and T-Mobile](#) to fulfill orders from districts—which could reach 100,000 students during the back to school period and up to 1 million students by the end of 2020—with discounted iPads already equipped with high-speed internet connectivity.

The Governor’s Office also offered additional guidance for school districts regarding the [\\$5.3 billion in one-time funding in the state budget](#) for schools to strengthen distance learning heading into the same year. These funds—a rare opportunity for districts to make short and long-term investments in student technology—can be used immediately for purchasing needed devices.

An archived broadcast of today’s task force meeting can be found on the [California Department of Education \(CDE\) Facebook page](#).

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Tony Thurmond — State Superintendent of Public Instruction
Communications Division, Room 5602, 916-319-0818, Fax 916-319-0100

Last Reviewed: Thursday, August 06, 2020

EXHIBIT NN

Senate Bill No. 98

CHAPTER 24

An act to amend Sections 313.3, 2572, 8209, 8227.7, 8280, 8280.1, 14002, 14041, 14041.5, 14041.6, 17375, 17524, 35710.5, 38000, 41203.1, 41327.1, 41341, 41370, 42127, 42127.6, 42127.8, 42131, 42238.02, 42238.025, 42238.03, 42238.15, 44955.5, 46200.5, 46201.5, 47604.1, 47605, 47607, 47607.2, 47607.5, 47612.5, 47612.7, 47632, 47635, 47644, 48000, 51461, 52064, 52074, 52202, 54444.2, 54444.3, 56122, 56195.1, 56345, 56477, 56836.06, 56836.07, 56836.08, 56836.10, 56836.11, 56836.159, 56836.165, 56836.21, 56836.22, 56836.24, and 56836.31 of, to amend and renumber Sections 56836.145 and 56836.15 of, to amend and repeal Section 56213 of, to add Sections 8227.8, 14041.8, 41020.9, 41204.2, 42238.021, 44225.4, 44235.4, 44266.5, 45227, 47653, 47654, 47655, and 56214 to, to add Article 2.2 (commencing with Section 56836.14) to Chapter 7.2 of Part 30 of Division 4 of Title 2 of, to add and repeal Sections 17463.7 and 42603.1 of, to add and repeal Part 24.5 (commencing with Section 43500) to Division 3 of Title 2 of, and to repeal Section 56836.045 of, the Education Code, to amend Section 17581.6 of the Government Code, to amend Sections 97.2 and 97.3 of the Revenue and Taxation Code, to add Chapter 5.4 (commencing with Section 13265) to Part 3 of Division 9 of, and to add Part 1.7 (commencing with Section 10200) to Division 9 of, the Welfare and Institutions Code, to amend the Budget Act of 2019 (Chapters 23 and 55 of the Statutes of 2019) by amending Items 6100-158-0001, 6100-194-0001, and 6100-196-0001 of Section 2.00 of that act, and to amend Sections 1, 4, and 9 of Chapter 3 of the Statutes of 2020, relating to education finance, and making an appropriation therefor, to take effect immediately, bill related to the budget.

[Approved by Governor June 29, 2020. Filed with Secretary of State June 29, 2020.]

I am signing Senate Bill 98, which provides schools with the resources and flexibilities necessary to provide quality public education during the COVID-19 pandemic. Among other things, this bill protects school funding from uncertainties caused by COVID-19, including for schools that offer distance learning to accommodate public health and safety conditions.

The fiscal protections offered to schools by this measure are predicated on new standards for distance learning that prioritize quality instruction for all students. The preferred method of instruction will always be in-person; students gain the most from the relationships developed through in-person interactions. However, it is the expectation of the state that if a school offers hybrid or mixed-delivery instructional models, it will do so through a framework of maximum teacher student engagement, with plans in place to ensure that no child falls through the cracks. This balance of flexibility for schools and instructional accountability is essential to navigate the COVID-19 pandemic while minimizing the impact of, educational disruption on student learning.

Ch. 24

— 2 —

While maintaining school funding at current levels allows for stability in the public education system, it does not take into account schools that had planned expansions. By not funding those expansions, families enrolled in those schools may be displaced, with impacts exacerbated by the uncertainties caused by COVID-19. I urge members of the Legislature to pursue targeted solutions to

these potential disruptions, and will work with you in the coming weeks to enact them.

GAVIN NEWSOM, Governor

LEGISLATIVE COUNSEL'S DIGEST

SB 98, Committee on Budget and Fiscal Review. Education finance: education omnibus budget trailer bill.

(1) Existing law requires the State Department of Education to develop, on or before June 30, 2020, a standardized English language teacher observation protocol for use by teachers in evaluating a pupil's English language proficiency.

This bill would extend the date for completion of that protocol until December 31, 2021.

(2) The Child Care and Development Services Act, administered by the State Department of Education, requires the Superintendent of Public Instruction to administer childcare and development programs that offer a full range of services to eligible children from infancy to 13 years of age. The act requires the department to contract with local contracting agencies to provide for alternative payment programs, and authorizes alternative payments to be made for childcare services, as provided. The act requires that families meet specified requirements to be eligible for federal- and state-subsidized childcare and development services.

This bill would require the Superintendent to reimburse contracting agencies for certain state-subsidized childcare programs from July 1, 2020, to June 30, 2021, inclusive, due to the ongoing impacts of childcare and development facility closures and low child attendance due to the COVID-19 pandemic and related public health directives, if the contracting agency meets one of 2 specified conditions. The bill would require a childcare program that receives that reimbursement and that is physically closed due to the COVID-19 pandemic, but funded to be operational, to submit a distance learning plan to the department pursuant to guidance from the Superintendent and to provide those distance learning services.

The bill would require the Controller, on July 1, 2020, to transfer \$152,314,000 from the Federal Trust Fund, consistent with specified federal requirements, to the General Fund to offset the state costs of providing assistance to childcare providers during the COVID-19 pandemic from March 4, 2020, to August 28, 2020, as provided. The bill would appropriate \$198,000,000 from the Federal Trust Fund, consistent with those same federal requirements, to the Superintendent for COVID-19 pandemic-related relief and assistance for childcare providers, the families those childcare providers serve, and essential workers, as provided. The bill would require that all children who meet specified childcare need and eligibility

account to be temporarily transferred to another fund or account of the school district for payment of obligations. The transfer shall be accounted for as temporary borrowing between funds or accounts and shall not be available for appropriation or be considered income to the borrowing fund or account. Amounts transferred shall be repaid either in the same fiscal year, or in the following fiscal year if the transfer takes place within the final 120 calendar days of a fiscal year. Borrowing shall occur only if the fund or account receiving the money will earn sufficient income, during the current fiscal year, to repay the amount transferred. No more than 85 percent of the maximum of moneys held in any fund or account during a current fiscal year may be transferred.

(b) If a school district elects to exercise the authority described in subdivision (a), the governing board of the school district shall hold a public hearing to take testimony from the public before adopting the required resolution.

(c) This section shall become inoperative on July 1, 2023, and, as of January 1, 2024, is repealed.

SEC. 34. Part 24.5 (commencing with Section 43500) is added to Division 3 of Title 2 of the Education Code, to read:

PART 24.5. SCHOOL FINANCE, INSTRUCTION, AND ACCOUNTABILITY IN THE 2020–21 SCHOOL YEAR

43500. For purposes of this part, the following definitions apply:

(a) “Distance learning” means instruction in which the pupil and instructor are in different locations and pupils are under the general supervision of a certificated employee of the local educational agency. Distance learning may include, but is not limited to, all of the following:

(1) Interaction, instruction, and check-ins between teachers and pupils through the use of a computer or communications technology.

(2) Video or audio instruction in which the primary mode of communication between the pupil and certificated employee is online interaction, instructional television, video, telecourses, or other instruction that relies on computer or communications technology.

(3) The use of print materials incorporating assignments that are the subject of written or oral feedback.

(b) “In-person instruction” means instruction under the immediate physical supervision and control of a certificated employee of the local educational agency while engaged in educational activities required of the pupil.

(c) “Local educational agency” means a school district, county office of education, or charter school, excluding a charter school classified as a nonclassroom-based charter school pursuant to Sections 47612.5 and 47634.2 as of the 2019–20 fiscal year.

43501. For the 2020–21 school year, the minimum schoolday for a local educational agency is as follows:

- (a) 180 instructional minutes in kindergarten.
- (b) 230 instructional minutes in grades 1 to 3, inclusive.
- (c) 240 instructional minutes in grades 4 to 12, inclusive.
- (d) 180 instructional minutes for pupils in grades 11 and 12 that are also enrolled part time in classes of the California State University or the University of California for which academic credit will be provided upon satisfactory completion of enrolled courses.
- (e) 180 instructional minutes for any pupil who is also a special part-time student enrolled in a community college under Article 1 (commencing with Section 48800) of Chapter 5 of Part 27 of Division 4 and who will receive academic credit upon satisfactory completion of enrolled courses.
- (f) 180 instructional minutes for pupils enrolled in a continuation high school.

43502. (a) For purposes of calculating apportionments for the 2020–21 fiscal year, a local educational agency shall offer in-person instruction, and may offer distance learning, pursuant to the requirements of this part.

(b) Notwithstanding Sections 41601, 42238.05 to 42238.053, inclusive, and 46010, for purposes of calculating apportionments for the 2020–21 fiscal year for a local educational agency, except for a new charter school that is authorized by the governing board of a school district or county board of education on or before June 1, 2020, or approved by the state board at its July 8 and 9, 2020, meeting and that is beginning instruction in the 2020–21 school year, the department shall use the average daily attendance in the 2019–20 fiscal year reported for both the second period and the annual period apportionment that included all full school months from July 1, 2019, to February 29, 2020, inclusive, and extended year average daily attendance attributed to the 2019–20 school year reported pursuant to Section 96 of the act adding this part. Any positive adjustment to average daily attendance for the 2019–20 fiscal year in the second or annual period attendance report submitted to the Superintendent after August 17, 2020, shall be substantiated by concurrence from an independent auditor.

(c) For the 2020–21 fiscal year, a local educational agency shall satisfy the annual instructional day requirements described in Sections 41420, 46200.5, and 46208, and in Section 11960 of Title 5 of the California Code of Regulations through in-person instruction or a combination of in-person instruction and distance learning pursuant to this part.

(d) (1) For the 2020–21 fiscal year, a local educational agency shall not be required to offer the annual instructional minutes that it would otherwise have offered pupils to meet the requirements of Sections 46207 and 47612.5, or the implementing regulations for those sections.

(2) For the 2020–21 fiscal year, a local educational agency shall not be required to offer the minimum instructional minutes in physical education required pursuant to Sections 51210, 51220, 51222, and 51223.

(e) For the 2020–21 school year, instructional minutes shall be determined as follows:

(1) For in-person instruction, instructional minutes shall be based on time scheduled under the immediate physical supervision and control of an

employee of the local educational agency who possesses a valid certification document, registered as required by law.

(2) For distance learning, instructional time shall be based on the time value of assignments as determined, and certified to, by an employee of the local educational agency who possesses a valid certification document, registered as required by law.

(3) For a combined day of instruction delivered through both in-person instruction and distance learning, time scheduled under the immediate supervision of an employee of the local educational agency who possesses a valid certification document can be combined with assignments made under the general supervision of an employee of the local educational agency who possesses a valid certification document as registered by law to meet the equivalent of a minimum day of instruction.

(f) For the 2020–21 school year, the process by which a local educational agency receives credit for a material decrease in average daily attendance for apportionment pursuant to Section 46392 due to an event described in Section 46392 that occurs during the 2020–21 fiscal year is suspended for all local educational agencies.

(g) Except for a new charter school that is authorized by the governing board of a school district or county board of education on or before June 1, 2020, or approved by the state board at its July 8 and 9, 2020, meeting, and that is beginning instruction in the 2020–21 school year, for purposes of any calculations that would use average daily attendance, the Superintendent, consistent with subdivision (b), shall use the local educational agency's average daily attendance in the 2019–20 school year in place of its average daily attendance in the 2020–21 school year.

43503. (a) (1) For the 2020–21 school year, a local educational agency that offers distance learning shall comply with the requirements of subdivision (b).

(2) Distance learning may be offered under either of the following circumstances:

(A) On a local educational agency or schoolwide level as a result of an order or guidance from a state public health officer or a local public health officer.

(B) For pupils who are medically fragile or would be put at risk by in-person instruction, or who are self-quarantining because of exposure to COVID-19.

(b) Distance learning shall include all of the following:

(1) Confirmation or provision of access for all pupils to connectivity and devices adequate to participate in the educational program and complete assigned work.

(2) Content aligned to grade level standards that is provided at a level of quality and intellectual challenge substantially equivalent to in-person instruction.

(3) Academic and other supports designed to address the needs of pupils who are not performing at grade level, or need support in other areas, such

as English learners, pupils with exceptional needs, pupils in foster care or experiencing homelessness, and pupils requiring mental health supports.

(4) Special education, related services, and any other services required by a pupil's individualized education program pursuant to Section 56341, including the requirements of subparagraph (A) of paragraph (9) of subdivision (a) of Section 56345, with accommodations necessary to ensure that individualized education program can be executed in a distance learning environment.

(5) Designated and integrated instruction in English language development pursuant to Section 11300 of Title 5 of the California Code of Regulations for English learners, including assessment of English language proficiency, support to access curriculum, the ability to reclassify as fully English proficient, and, as applicable, support for dual language learning.

(6) Daily live interaction with certificated employees and peers for purposes of instruction, progress monitoring, and maintaining school connectedness. This interaction may take the form of internet or telephonic communication, or by other means permissible under public health orders. If daily live interaction is not feasible as part of regular instruction, the governing board or body of the local educational agency shall develop, with parent and stakeholder input, an alternative plan for frequent live interaction that provides a comparable level of service and school connectedness.

(c) Pursuant to Sections 49550 and 47613.5, school districts, county offices of education, and charter schools shall provide nutritionally adequate meals for pupils who are eligible for free and reduced-price meals, whether engaged in in-person instruction or distance learning, contingent upon the department receiving an approved waiver from the United States Department of Agriculture, for each day of the scheduled school year.

43504. (a) The compulsory education requirements described in Section 48200 continue to apply for the 2020–21 school year.

(b) A local educational agency shall offer in-person instruction to the greatest extent possible.

(c) For the 2020–21 school year, for purposes of the requirement on school districts to offer 180 instructional days per school year pursuant to Section 46208 and the requirement on charter schools to offer 175 instructional days per school year pursuant to Section 11960 of Title 5 of the California Code of Regulations, an instructional day is a day in which all pupils are scheduled for the length of the day established by the governing board or body of the local educational agency in a classroom under the immediate supervision of a certificated employee or in distance learning that meets the minimum requirements described in this part.

(d) (1) Each local educational agency shall document daily participation for each pupil on each schoolday, in whole or in part, for which distance learning is provided. A pupil who does not participate in distance learning on a schoolday shall be documented as absent for that schoolday.

(2) For purposes of this section, daily participation may include, but is not limited to, evidence of participation in online activities, completion of

regular assignments, completion of assessments, and contacts between employees of the local educational agency and pupils or parents or guardians.

(e) Each local educational agency shall ensure that a weekly engagement record is completed for each pupil documenting synchronous or asynchronous instruction for each whole or partial day of distance learning, verifying daily participation, and tracking assignments.

(f) (1) A pupil who does not participate daily in either in-person instruction pursuant to subdivision (b) or distance learning pursuant to subdivision (d) shall be deemed absent by the local educational agency. A local educational agency shall use documentation of the absence for purposes of reporting its chronic absenteeism rates in its local control and accountability plan.

(2) Each local educational agency shall develop written procedures for tiered reengagement strategies for all pupils who are absent from distance learning for more than three schooldays or 60 percent of the instructional days in a school week. These procedures shall include, but are not limited to, verification of current contact information for each enrolled pupil, daily notification to parents or guardians of absences, a plan for outreach from the school to determine pupil needs including connection with health and social services as necessary and, when feasible, transitioning the pupil to full-time in-person instruction.

(g) Each school shall regularly communicate with parents and guardians regarding a pupil's academic progress.

(h) The Controller shall include instructions necessary to enforce the requirements of this part in the 2020–21 audit guide required by Section 14502.1.

(i) (1) For a school district or charter school that offers fewer than the instructional days required in subdivision (c), the Superintendent shall withhold from the local educational agency's local control funding formula grant apportionment for the prior year average daily attendance of each affected grade level, the sum of .0056 multiplied by that apportionment for each day less than what was required pursuant to this section.

(2) For a local educational agency that does not meet the requirements in subdivision (d), (e), or (f), the Superintendent shall withhold from the local educational agency's local control funding formula grant apportionment the percentage of days out of compliance multiplied by the derived value of average daily attendance, all multiplied by the average daily attendance of each affected grade level. For purposes of this paragraph, the percentage of days out of compliance is equivalent to the number of days out of compliance divided by the total number of instructional days required to be offered.

(3) A local educational agency that provides distance learning shall not be penalized for instruction provided before September 1, 2020, that fails to meet the requirements of this section.

43505. (a) For purposes of calculating apportionments for the 2020–21 fiscal year and for any other calculations that would be based on average daily attendance in the 2020–21 school year, for all newly operational charter

schools that are authorized by the governing board of a school district or county board of education on or before June 1, 2020, or approved by the state board at its July 8 and 9, 2020, meeting and that are beginning instruction in the 2020–21 school year, the department shall use the enrollment of that charter school as of Information Day, October 7, 2020, based on data reported in the California Longitudinal Pupil Achievement Data System pursuant to Chapter 10 (commencing with Section 60900) of Part 33 of Division 4, reduced by either the statewide average rate of absence for elementary school districts for kindergarten and grades 1 to 8, inclusive, or the statewide average rate of absence for high school districts for grades 9 to 12, inclusive, as applicable, as calculated by the department for the prior fiscal year with the resultant figures and rates rounded to the nearest tenth.

(b) (1) For purposes of calculating apportionments for the 2020–21 fiscal year and for any other calculations that would be based on average daily attendance in the 2020–21 school year, for a nonclassroom-based charter school described in Section 47612.5 as of the 2019–20 fiscal year, the department shall use the nonclassroom-based charter school’s average daily attendance in the 2019–20 fiscal year pursuant to subdivision (b) of Section 43502.

(2) For the 2020–21 school year, a nonclassroom-based charter school described in Section 47612.5 as of the 2019–20 fiscal year shall adopt a learning continuity and attendance plan pursuant to Section 43509, and shall not be required to adopt a local control and accountability plan pursuant to Section 47606.5.

(3) A nonclassroom-based charter school described in Section 47612.5 as of the 2019–20 fiscal year shall continue to comply with all of the statutory requirements in Article 5.5 (commencing with Section 51745) of Chapter 5 of Part 28 of Division 4 and the implementing regulations for that article.

43506. (a) A charter school that offers distance learning pursuant to this part is not required to submit a request to its chartering authority for a material revision to its charter pursuant to Section 47607 in order to offer distance learning.

(b) Notwithstanding Section 47612.5, an existing classroom-based charter school that offers distance learning pursuant to this part and did not receive a nonclassroom-based funding determination in the 2019–20 fiscal year pursuant to Section 47612.5 shall not be considered a nonclassroom-based charter school in the 2020–21 fiscal year because it provides distance learning and shall not be required to submit a request for a funding determination.

43507. Notwithstanding Sections 15948.1 and 15103 of Title 5 of the California Code of Regulations, for purposes of calculating the local control funding formula grade span adjustment pursuant to Section 42238.02 or the class size penalty pursuant to Sections 41376 and 41378, “class” may include instruction offered through distance learning or in-person instruction pursuant to this part.

43508. Notwithstanding Sections 14022, 14022.3, and 14022.5, for purposes of computing the minimum funding obligation for school districts and community colleges pursuant to Sections 8 and 8.5 of Article XVI of the California Constitution for the 2020–21 fiscal year, both of the following definitions apply:

(a) “Change in enrollment” means the most recent available count of average daily attendance for the 2019–20 school year, adjusted for the change in enrollment between the most recent available count of average daily attendance for the 2018–19 school year and the most recent available count of average daily attendance for the 2019–20 school year.

(b) “Enrollment” means the most recent available count of average daily attendance for the 2019–20 school year.

43509. (a) (1) For the 2020–21 school year, the governing board of a school district, a county board of education, and the governing body of a charter school shall adopt both of the following:

(A) By September 30, 2020, a learning continuity and attendance plan pursuant to this section.

(B) By December 15, 2020, with the first interim report required pursuant to Sections 1240, 42131, and 47604.33, the local control funding formula budget overview for parents required pursuant to Section 52064.1.

(2) (A) The governing board of a school district, a county board of education, and the governing body of a charter school shall not be required to adopt a local control and accountability plan or an annual update to a local control and accountability plan pursuant to Article 4.5 (commencing with Section 52059.5) of Chapter 6.1 of Part 28 of Division 4 or Section 47606.5 for the 2020–21 school year.

(B) The governing board of a school district, a county board of education, and the governing body of a charter school shall not be required to comply with paragraph (2) of Executive Order No. N-56-20.

(b) The governing board of a school district, a county board of education, and the governing body of a charter school shall consult with teachers, principals, administrators, other school personnel, local bargaining units of the school district, county office of education, or charter school, parents, and pupils in developing a learning continuity and attendance plan pursuant to this section. Specifically, engagement under this section shall include all of the following:

(1) The superintendent of a school district, a county superintendent of schools, and a charter school administrator shall solicit recommendations and comments of members of the public regarding the specific actions and expenditures proposed to be included in the learning continuity and attendance plan.

(2) The superintendent of a school district, a county superintendent of schools, and a charter school administrator shall notify members of the public of the opportunity to submit written comments regarding the specific actions and expenditures proposed to be included in the learning continuity and attendance plan, using the most efficient method of notification possible. This paragraph does not require a school district, county board of education,

or charter school to produce printed notices or to send notices by mail. The superintendent of a school district, a county superintendent of schools, and a charter school shall ensure that all written notifications related to the learning continuity and attendance plan are provided consistent with Section 48985.

(3) The superintendent of a school district and a county superintendent of schools shall present the learning continuity and attendance plan to the parent advisory committee and the English learner parent advisory committee established pursuant to Section 52063 separately for review and comment. The superintendent of a school district and a county superintendent of schools shall respond, in writing, to comments received from the parent advisory committee and the English learner parent advisory committee.

(4) The superintendent of a school district, a county superintendent of schools, and a charter school administrator shall present the learning continuity and attendance plan at a public hearing of the governing board of the school district, the county board of education, or the governing body of the charter school for review and comment by members of the public. The agenda for the public hearing shall be posted at least 72 hours before the public hearing and shall include the location where the learning continuity and attendance plan will be available for public inspection.

(5) (A) The governing board of a school district, a county board of education, and the governing body of a charter school shall adopt the learning continuity and attendance plan in a public meeting. This meeting shall be held after, but not on the same day as, the public hearing held pursuant to paragraph (4).

(B) The governing board of a school district, a county board of education, and the governing body of a charter school shall provide options for remote participation in the public hearings required by paragraph (4) and subparagraph (A) and include efforts to solicit feedback pursuant to paragraphs (1), (2), and (3) to reach pupils, families, educators, and other stakeholders who do not have internet access, or who speak languages other than English.

(c) (1) Not later than five days after adoption of a learning continuity and attendance plan, the governing board of a school district shall file the learning continuity and attendance plan with the county superintendent of schools. The county superintendent of schools may submit recommendations, in writing, for amendments to the learning continuity and attendance plan by October 30, 2020. The governing board of a school district shall consider the recommendations submitted by the county superintendent of schools in a public meeting within 15 days of receiving the recommendations. If a county superintendent of schools has jurisdiction over a single school district, the Superintendent shall perform the duties specified in this paragraph.

(2) Not later than five days after adoption of a learning continuity and attendance plan, the county board of education shall file the learning continuity and attendance plan with the Superintendent. The Superintendent may submit recommendations, in writing, for amendments to the learning continuity and attendance plan by October 30, 2020. The county board of

education shall consider the recommendations submitted by the Superintendent in a public meeting within 15 days of receiving the recommendations.

(3) Not later than five days after adoption of a learning continuity and attendance plan, the governing body of a charter school shall file the learning continuity and attendance plan with its chartering authority and the county superintendent of schools, or only to the county superintendent of schools if the county board of education is the chartering authority.

(d) A learning continuity and attendance plan adopted pursuant to this section shall be posted consistent with the requirements of Sections 52065 and 47606.5.

(e) A learning continuity and attendance plan adopted by the governing board of a school district, a county board of education, or the governing body of a charter school shall address continuity of learning and include, for the school district, county office of education, or charter school and each school within the school district, county office of education, or charter school, all of the information specified in the template developed by the Superintendent pursuant to subdivision (f).

(f) On or before August 1, 2020, the Superintendent, in consultation with the executive director of the state board, shall develop a template for the learning continuity and attendance plan that includes, but is not limited to, all of the following:

(1) A description of how the school district, county office of education, or charter school will provide continuity of learning and address the impact of COVID-19 on pupils, staff, and the community in the following areas, and the specific actions and expenditures the school district, county office of education, or charter school anticipates taking to support its ability to address the impacts of COVID-19:

(A) In-person instructional offerings, and specifically, the actions the school district, county office of education, or charter school will take to offer classroom-based instruction whenever possible, particularly for pupils who have experienced significant learning loss due to school closures in the 2019–20 school year or are at greater risk of experiencing learning loss due to future school closures.

(B) Plans for a distance learning program, including all of the following:

(i) How the school district, county office of education, or charter school will provide continuity of instruction during the school year to ensure pupils have access to a full curriculum of substantially similar quality regardless of the method of delivery. This shall include a plan for curriculum and instructional resources that will ensure instructional continuity for pupils if a transition between in-person instruction and distance learning is necessary.

(ii) A plan for ensuring access to devices and connectivity for all pupils to support distance learning whenever it occurs.

(iii) How the school district, county office of education, or charter school will measure participation and assess pupil progress through live contacts and synchronous instructional minutes, as well as how the time value of pupil work will be measured.

(iv) What professional development and resources will be provided to staff to support the provision of distance learning, including technological support.

(v) To the extent that staff roles and responsibilities change because of COVID-19, what the new roles and responsibilities of affected staff will be.

(vi) What additional supports for pupils with unique needs will be provided, including for English learners, pupils with exceptional needs served across the full continuum of placements, pupils in foster care, and pupils who are experiencing homelessness during the period in which distance learning is provided.

(C) How the school district, county office of education, or charter school will address pupil learning loss that results from COVID-19 during the 2019–20 and 2020–21 school years, including all of the following:

(i) How the school district, county office of education, or charter school will assess pupils to measure pupil learning status, particularly in the areas of English language arts, English language development, and mathematics.

(ii) What actions and strategies the school district, county office of education, or charter school will use to address learning loss and accelerate learning progress for pupils, as needed, and how these strategies differ for pupils who are classified as English learners, are eligible for a free or reduced-price meal, or are foster youth, as those terms are defined in Section 42238.01, individuals with exceptional needs, pupils in foster care, and pupils who are experiencing homelessness.

(iii) How the effectiveness of the services or supports provided to address learning loss will be measured.

(D) How the school district, county office of education, or charter school will monitor and support the mental health and social and emotional well-being of pupils and staff during the school year.

(E) What professional development will be provided to staff, and what resources will be provided to pupils and staff to address trauma and other impacts of COVID-19 on the school community.

(F) Pupil engagement and outreach, including the procedures of the school district, county office of education, or charter school for tiered reengagement strategies for pupils who are absent from distance learning, and how the school district, county office of education, or charter school will provide outreach to pupils and their parents or guardians, including in languages other than English, when pupils are not meeting compulsory education requirements, or the school district, county office of education, or charter school determines the pupil is not engaging in instruction and is at risk of learning loss.

(G) School nutrition, including how the school district, county office of education, or charter school will provide meals for pupils who are eligible for free or reduced-price meals, as defined in Section 42238.01, for pupils participating in both in-person instruction and distance learning, as applicable and contingent upon the department receiving an approved waiver from the

United States Department of Agriculture, for each day of the scheduled school year.

(2) For each of the areas described in paragraph (1), the learning continuity and attendance plan shall describe how federal and state funding included in the original or revised budget adopted by the governing board of a school district, a county board of education, or the governing body of a charter school is used to support the efforts described in the learning continuity and attendance plan, including federal and state funds provided for learning loss mitigation pursuant to Section 110 of the act adding this part. If the actions and expenditures described in paragraph (1) are not included in the budget, the learning continuity and attendance plan shall reference how these expenditures will be included in the first interim report of the school district, county office of education, or charter school pursuant to Section 1240, 42131, or 47604.33.

(3) The learning continuity and attendance plan shall include a description of how the school district, county office of education, or charter school is increasing or improving services in proportion to funds generated on the basis of the number and concentration of unduplicated pupils under the local control funding formula pursuant to Sections 2574, 2575, 42238.02, and 42238.03 in the 2020–21 fiscal year pursuant to the regulations adopted by the state board pursuant to Section 42238.07. The description shall include the portion of any federal funds provided to backfill reductions to the local control funding formula on a dollar-for-dollar basis generated on the basis of the number and concentration of unduplicated pupils pursuant to Sections 2574, 2575, 42238.02, and 42238.03.

43510. If any activities authorized pursuant to this part and implementing regulations are found to be a state reimbursable mandate pursuant to Section 6 of Article XIII B of the California Constitution, funding provided for school districts, county offices of education, and charter schools pursuant to Sections 2574, 2575, 42238.02, and 42238.03 shall be used to directly offset any mandated costs.

43511. (a) The requirements of this part shall not be waived by the state board pursuant to Section 33050 or any other law.

(b) This part shall become inoperative on June 30, 2021, and, as of January 1, 2022, is repealed.

SEC. 35. Section 44225.4 is added to the Education Code, to read:

44225.4. The time of validity of examination scores used to satisfy a requirement for the issuance of a credential, certificate, permit, or waiver pursuant to subdivision (b) of Section 80071 of Title 5 of the California Code of Regulations is extended to 11 years for any score used to satisfy a requirement from March 19, 2020, to June 30, 2021, inclusive.

SEC. 36. Section 44235.4 is added to the Education Code, to read:

44235.4. The time of validity of fees submitted with paper applications for credentials not available for online renewal or recommendation pursuant to subdivision (f) of Section 80002 of, and subdivision (e) of Section 80487 of, Title 5 of the California Code of Regulations, is extended to 120 days

the Budget Act of 2018 shall be available for encumbrance until November 30, 2021.

SEC. 109. (a) Consistent with the intent expressed in subdivision (c) of Section 76 of Chapter 15 of the Statutes of 2017, the sum of one million dollars (\$1,000,000) is hereby appropriated from the General Fund to the Superintendent of Public Instruction for allocation to the Southern California Regional Occupational Center for instructional and operating costs in the 2020–21 fiscal year. It is the intent of the Legislature that this allocation assist the Southern California Regional Occupational Center to transition to a fully fee-supported funding model.

(b) As a condition of receiving funding appropriated pursuant to subdivision (a), the Southern California Regional Occupational Center shall submit an updated operational plan to the Department of Finance and the Legislative Analyst's Office on or before September 1, 2020.

(c) For purposes of making the computations required by Section 8 of Article XVI of the California Constitution, the amount appropriated in subdivision (a) shall be deemed to be "General Fund revenues appropriated for school districts," as defined in subdivision (c) of Section 41202 of the Education Code, for the 2020–21 fiscal year, and included within the "total allocations to school districts and community college districts from General Fund proceeds of taxes appropriated pursuant to Article XIII B," as defined in subdivision (e) of Section 41202 of the Education Code, for the 2020–21 fiscal year.

SEC. 110. (a) The sum of three hundred fifty-five million two hundred twenty-seven thousand dollars (\$355,227,000) from the Federal Trust Fund and the sum of one billion one hundred forty-four million seven hundred seventy-three thousand dollars (\$1,144,773,000) from the Coronavirus Relief Fund are hereby appropriated to the Superintendent of Public Instruction for allocation in the 2020–21 fiscal year to eligible local educational agencies in an equal amount per pupil using the following methodology:

(1) For each eligible local educational agency, determine the total number of pupils 3 to 22 years of age, inclusive, with exceptional needs enrolled in that local educational agency using Fall 1 Census special education data for the 2019–20 fiscal year.

(2) The sum of the totals determined pursuant to paragraph (1) is the total statewide number of pupils with exceptional needs for the applicable year.

(3) Calculate a per pupil amount by dividing the amount specified in subdivision (a) for purposes of this section by the total statewide number of pupils with exceptional needs calculated in paragraph (2).

(4) Calculate a grant for each eligible local educational agency by multiplying the per pupil amount calculated in paragraph (3) by the total amount of pupils with exceptional needs for the eligible local educational agency determined in paragraph (1).

(5) The Superintendent shall allocate the applicable amount of funds calculated in paragraph (4) to eligible local educational agencies.

(b) (1) In addition to the amounts specified in subdivisions (a) and (c), the sum of two billion eight hundred fifty-five million two hundred twenty-seven dollars (\$2,855,227,000) from the Coronavirus Relief Fund is hereby appropriated to the Superintendent for allocation in the 2020–21 fiscal year to eligible local educational agencies. For purposes of making this allocation, funds shall be apportioned proportionally on the basis of the eligible local educational agency’s supplemental and concentration grant funding determined as of the 2019–20 second principal apportionment certification, pursuant to subdivisions (e) and (f) of Section 42238.02 of the Education Code or paragraphs (2) and (3) of subdivision (c) of Section 2574 of the Education Code, as applicable.

(2) Consistent with Section 2576 of the Education Code, a county office of education’s supplemental and concentration grant funding for purposes of paragraph (1) shall include funding that the Superintendent transferred to the county, wherein a pupil is enrolled, equal to the amount calculated for the school district of residence pursuant to subdivisions (e) and (f) of Section 42238.02 of the Education Code for each unit of average daily attendance credited to the school district of residence as of the 2019–20 second principal apportionment certification.

(c) In addition to the amounts specified in subdivisions (a) and (b), the sum of five hundred thirty-nine million nine hundred twenty-six thousand dollars (\$539,926,000) from the General Fund and the sum of four hundred thirty-nine million eight hundred forty-four thousand dollars (\$439,844,000) from the Coronavirus Relief Fund are hereby appropriated to the Superintendent for allocation in the 2020–21 fiscal year to eligible local educational agencies. For purposes of making this allocation, funds shall be apportioned proportionally on the basis of the eligible local educational agency’s local control funding formula entitlement determined as of the 2019–20 second principal apportionment certification.

(d) Funds apportioned to eligible local educational agencies from the Federal Trust Fund pursuant to subdivision (a) shall be used from March 13, 2020, to September 30, 2021, inclusive, and all other funds apportioned pursuant to this section shall be used from March 1, 2020, to December 30, 2020, inclusive, for activities that directly support pupil academic achievement and mitigate learning loss related to COVID-19 school closures, and shall be expended for any of the following purposes:

(1) Addressing learning loss or accelerating progress to close learning gaps through the implementation, expansion, or enhancement of learning supports that begin before the start of the school year and the continuation of intensive instruction and supports into the school year.

(2) Extending the instructional school year by making adjustments to the academic calendar, increasing the number of instructional minutes provided during each week or schoolday, or taking any other action that increases the amount of instructional time or services provided to pupils based on their learning needs.

(3) Providing additional academic services for pupils, such as diagnostic assessments of pupil learning needs, intensive instruction for addressing

gaps in core academic skills, additional instructional materials or supports, or devices or connectivity for the provision of in-classroom and distance learning.

(4) Providing integrated pupil supports to address other barriers to learning, such as the provision of health, counseling, or mental health services, professional development opportunities to help teachers and parents support pupils in distance-learning contexts, access to school breakfast and lunch programs, or programs to address pupil trauma and social-emotional learning.

(e) As a condition of receipt of the funds pursuant to this section, an eligible local educational agency shall certify that funding received pursuant to this section will be used in full compliance with federal law, and shall adopt, on or before September 30, 2020, at a regularly scheduled meeting of the governing board or body of the local educational agency, a learning continuity and attendance plan pursuant to Section 43509 of the Education Code.

(f) This section does not preclude an eligible local educational agency from receiving or expending funds pursuant to subdivisions (a) and (b) before the adoption of its learning continuity and attendance plan for the 2020–21 school year.

(g) As a condition of receipt of the funds pursuant to this section, each eligible local educational agency shall maintain a file of all receipts and records of expenditures made pursuant to this section for a period of no less than three years, or, where an audit has been requested, until the audit is resolved, whichever is longer. Receipts and records that are required to be retained by each eligible local educational agency shall be made available to the Superintendent, upon request. The Superintendent shall take action to recoup any federal disallowances of funds allocated to eligible local educational agencies, as applicable.

(h) (1) As a condition of receipt of the funds pursuant to this section, an eligible local educational agency shall report, on or before August 31, 2020, the balance of any unexpended funds received from the Coronavirus Relief Fund to the Superintendent. Funds that are not expended by December 30, 2020, shall be reported to the Superintendent within 30 days, and the Superintendent shall initiate collection proceedings.

(2) As a condition of receipt of the funds pursuant to this section, an eligible local educational agency shall report, on or before August 31, 2021, the balance of any unexpended funds received from the Federal Trust Fund to the Superintendent. Funds that are not expended by September 30, 2021, shall be reported to the Superintendent within 30 days, and the Superintendent shall initiate collection proceedings.

(i) (1) For purposes of subdivisions (a) and (b), “eligible local educational agency” means a school district, county office of education, or a classroom-based direct-funded charter school as determined pursuant to Sections 47612.5 and 47634.2 of the Education Code as of the 2019–20 second principal apportionment certification.

(2) For purposes of subdivision (c), “eligible local educational agency” means a school district, county office of education, or a charter school.

(j) (1) For purposes of the calculations pursuant to subdivisions (a) and (b), data for a classroom-based locally funded charter school shall be included in the determination of the chartering authority’s funding.

(2) For purposes of the calculations pursuant to subdivision (c), data for a locally funded charter school shall be included in the determination of the chartering authority’s funding.

SEC. 111. (a) The Legislature finds and declares all of the following:

(1) The federal Coronavirus Aid, Relief, and Economic Security (CARES) Act Child Care and Development Block Grant supplemental payment awarded three hundred fifty million three hundred fourteen thousand dollars (\$350,314,000) to California to address the impact of the COVID-19 pandemic on childcare providers and the families they serve. These funds were awarded to prevent, prepare for, and respond to the COVID-19 pandemic emergency, to provide assistance to childcare providers in the case of decreased enrollment or closures, and to provide childcare assistance to essential workers during the response to the COVID-19 pandemic.

(2) In response to the COVID-19 pandemic, the state appropriated the sum of one hundred fifty-two million three hundred fourteen thousand dollars (\$152,314,000) from the General Fund to childcare providers for COVID-19 pandemic-related assistance between March 4, 2020, and August 28, 2020, inclusive, as follows:

(A) Fifty million dollars (\$50,000,000) was allocated to non-local educational agency childcare providers, which remained open or intend to reopen during the COVID-19 pandemic emergency, for health, safety, and cleaning supplies related to federal, state, and local COVID-19 pandemic emergency public health and safety guidance, pursuant to Senate Bill 89 (Chapter 2 of the Statutes of 2020).

(B) Fifty million dollars (\$50,000,000) was allocated to existing state-subsidized childcare providers to support additional access to early learning and care for essential workers, at-risk children, and children with disabilities or special health care needs whose individualized education programs or individualized family service plans include early learning and care services, pursuant to Senate Bill 89 (Chapter 2 of the Statutes of 2020), for a minimum of 60 days of care for each eligible worker and at-risk child.

(C) Forty-one million three hundred fourteen thousand dollars (\$41,314,000) was allocated for the estimated cost of provider closures, waived family fees, and other assistance, consistent with Executive Order No. N-66-20.

(D) Three million three hundred thousand dollars (\$3,300,000) was allocated to CalWORKs Stage 1 childcare for the estimated cost of waived family fees, consistent with Executive Order No. N-66-20.

(E) Six million dollars (\$6,000,000) was allocated for the estimated costs of extending the family fee waivers through June 30, 2020, consistent with Executive Order No. N-66-20.

EXHIBIT OO

8/9/2020

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about specifically today. Our students, our teachers, staff, and certainly parents we all prefer in classroom instructions for all the obvious reasons social and emotional foundationally but only, only if it can be done safely.

Gavin Newsom: (05:02 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=302.66)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=302.66))

As a parent, I believe that as someone that has a responsibility to help support the education of six plus million kids in the state of California, have the backs of our staff, our teachers, our school nurses, our counselors, our guidance staff, principals, bus drivers, janitors, all the folks that are responsible for the caretaking, the safety and the health of our children. We have to have their backs as well including obviously the preciousness that is our children and the kids in our education system. But safety is foundational and safety will ultimately make the determination of how we go about educating our kids as we move into the fall and we work our way through this pandemic.

Gavin Newsom: (05:51 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=351.81)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=351.81))

Here is the five principles that we are laying out in terms of our expectations, here is our pandemic plan for schools in the state of California. Number one, safe in-person school based again if you're going to be in person in the school based upon local health data and I'll walk through that bullet point in more detail in a moment. We have new mask requirements that we are putting forth today, some clarification and some constructive guidance on physical distancing and other adaptations that we expect to see within the school setting. We're putting out specific guidance as it relates to testing and contact tracing in our school system and what we mean by distance learning and the word rigorous is foundational. If we're going to have distance learning and we will to make sure that it's real, that we address equity, we address the divide and it's quality, it's a rigorous distance learning.

Gavin Newsom: (06:49 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=409.94)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=409.94))

Let's talk about number one. Using data, using the foundational data that we have laid out county by county all throughout the state of California we are now putting forth guidelines that say, "Schools can physically open for in-person education when the county that they're operating in has been off our monitoring list for 14 consecutive days." If you've tuned into these daily briefings you're very familiar with our monitoring list. I'll be updating that list later in the presentation today but we are now putting forth guidelines that say, "Based on the data, based upon the background spread, the community spread of the virus, that if you are not on that monitoring list you can move forward as a county if you choose to physically open your campus, physically open your schools." However, schools that don't meet this requirement they must begin the school year this fall through distance learning.

Gavin Newsom: (07:56 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=409.94)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-

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1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=476.73))

Number two, and I'm going to get to that in a moment. Number two, we're putting forth a new mask requirement in the state. All school staff and students, all staff and students in third grade and above must wear masks. Students in the second grade or below we strongly encourage wearing masks and face shields. I have a very young son Dutch and caregivers when he first saw masks he naturally recoiled. A lot of caregivers now have face shields and he can see their expressions, their humanity, and that's why we put specifically guidance out as it relates to not just masks but face shields as well.

Gavin Newsom: (08:40 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=520.13)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-

1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=520.13))

Our third frame of guidance that we're putting forth today is around physical distancing and as I mentioned other adaptations. So, on the physical distancing side we believe that it's incumbent upon staff to maintain at least a six distance between each other and a six foot distance between themselves and the students. We believe that a school day should start with symptom checks meaning temperature checks. We have robust expectations around hand washing stations, sanitation, deep sanitation, deep disinfection efforts, and that these schools have along the lines of the adaptations have quarantine protocols. And we'll talk a little bit more in a moment about these continuity and attendance plans that each school site is now responsible for putting forth.

Gavin Newsom: (09:35 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=575.92)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-

1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=575.92))

As it relates to the issue of testing there's a requirement that we test on a rotating basis a cohort of staff on a consistent basis. Dr. Galli will talk a little bit more about that. And in turn, we are bringing to the school system the benefit and support of the 10 plus thousand contact tracers that we have trained here in the state of California in partnership with UCSF and UCLA with a backbone and a database that now has organized a collective. We want to turn our contact tracing where we think it became very effective in the school environments. It could be very effective in mitigating the spread and trying to understand exactly where and how the spread had advanced and allow us obviously to isolate and quarantine cohorts of not only children but staff as it relates to mitigating that spread further.

Gavin Newsom: (10:39 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=639.52)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-

1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=639.52))

As it relates to distance learning as I said rigorous access to devices is one thing and connectivity it's foundational. And in a moment I'll talk about the money we have put up to allow for districts to purchase new devices to get the kind of connectivity that our students need and deserve to address this yawning gap as it relates to the digital divide. We want daily live interaction with teachers and other students, students connecting peer-to-peer with other students, teachers connecting daily on an interactive frame to advance our distance learning efforts. Remember we had a lot of experience that came through the spring this year.

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Gavin Newsom: (11:22 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=682.97)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=682.97))

We reviewed a lot of the fits and starts related to quality, access issues, points of consideration and concern. We shared a lot of those best practices. No one is going to deny that based upon the early orders to start to close schools at the local level that some of it worked more effectively in certain parts of the state than others. Clearly we have work to do to make sure that we are doing rigorous distance learning but this is the predicate, the foundation. These are the expectations that we have, minimum expectations in terms of quality, engagement, connectivity, and access to the devices that are foundational in terms of providing for quality distance learning.

Gavin Newsom: (12:08 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=728.44)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=728.44))

We also want to create a challenging environment where assignments are equivalent and in terms of what you would otherwise get in an in person class setting. I'm not naive and again we stipulate that second slide I showed that staff, that teachers, that parents prefer the social emotional learning of in class education. That is a default, that's our bias, but under the circumstances with the spread of this virus and I'll get to that spread in a moment as an explanation again as to why at this point we're putting out this recommendation that we want to do our best to create some sense of equivalency with the obvious constraints that is distance learning. We also want to make sure that we're always mindful of our students that are homeless, our students that are foster care kids that are in the system, kids with English as a second language and those with learning disabilities, those that have special needs and the like.

Gavin Newsom: (13:17 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=797.63)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=797.63))

Look that right foundation is laid, it was laid rather with the legislature and the strong support we received from the legislature when we put forth the package on equity that was approved. That package includes \$5.3 billion to deal with learning loss that was associated with some of the closers last year in a very, very focused and intentional effort to meet the needs of those again that fall into those categories of special needs in our system. So \$5.3 billion was put in additional funding to prioritize the issue of equity. So it's not just a throwaway line, it's not just a catch phrase, it's not just something we put out to promote a point of view but we're substantively putting real resources and heft into advancing that point of view as well.

Gavin Newsom: (14:12 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=852.61)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=852.61))

So, the question a lot of people are asked or rather begin to ask is, "All right, once our school is open what happens if the spread goes in to the classroom setting or in a district setting or if the spread continues in the county unabated?" And so, this slide puts forth some criteria that we are setting forth. Again, these are brackets and within these brackets we'll work through with the county and all the local conditions and

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recognizing the nuances and the gray areas that are part of a system as large as ours. Over a thousand

school districts here in the state of California in addition to all of these county superintendents and all of these local districts and cities and counties and all the jurisdictional criteria it makes this unlike any other state in terms of size and scope challenging.

Gavin Newsom: (15:05 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=905.24)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=905.24))

But nonetheless, here's the minimum expectation in terms of expectation to consult with public health officers first if a classroom cohort has to go home because there's a confirmed case. If a school goes home with multiple cohorts that have cases or we stipulate 5% of the school, local school, not district local school is positive then it would trigger criteria to consider closing or mandate rather the closure of that school's site. However, one school does not make a district and depending on the size and scale of your district this could be multiple schools or just a few schools. If they have similar cohort caseload's we then have a stipulation here, a mandate that if 25% of the schools that compose of a district have positive cases that reach that threshold that they need to be closed within a 14 day period.

Gavin Newsom: (16:08 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=968.88)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=968.88))

So, that's the foundation that we're laying out today on public education guidance. As many of you know we put out guidance, the Department of Public Health, California Department of Public Health some time ago. There's a lot of local guidance, you have CDE, which is the California Department of Education that put out guidance as well. The purpose of today is to try to lean in from a health and data perspective in terms of our expectations, public and private schools in the state of California expectations, mandates with the flexibility that recognizes each part of this state is unique, each part of this state is distinctive. Some counties are on the monitoring list for a good reason others are not for an equally good reason because they're not seeing the outbreak and as a consequence are able to do the in-person education. But even those that are currently on the monitoring list we hope and expect...

Gavin Newsom: (17:03 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=1023.351)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=1023.351))

But even those that are currently on the monitoring list, we hope and expect as we mitigate the spread of this disease, they'll fall off that monitoring list. And we've created the parameters and guidelines over a 14 day stabilization period to then reopen those schools and allow that as an option to local education entities in partnership and counsel with public health officials to make that determination as to what is best for their children and those that support our children. Remember public education, education broadly is absolutely about our kids, but we cannot deny the fact that we have hundreds of thousands of adults that are responsible to taking care and educating our kids as well. And their health has to be considered as well. And I just offer that as a parent, but as someone who has reverence for our principals, for our teachers, for our janitors, for our bus drivers and others. And I am entrusted to be accountable and responsible to their health, as well as the health of my children and your children and our children, our future.

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Gavin Newsom: (18:12 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=1092.9)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=1092.9))

So that's the framework that we're putting out today on education. Of course, I'll happily answer any questions and we have the head of the California Board of Education, Linda Darlene Hammond, also available on the line for those of you wish to ask her any questions. And our not only head of Health and Human Services, Dr. Galley, but pediatrician himself is available for questions. I could talk a little bit more about his own personal experience with four young children he has as well and his expectations moving forward.

Gavin Newsom: (18:46 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=1126.08)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=1126.08))

But first I want to just quickly run through what I began with or end with what I began with. Again, that learning remains nonnegotiable, but neither is the safety of all of our cohorts of support staff, as well as our children. Here are today's numbers. You become familiar with the seven day average, which to me is even more important than the episodic rise and fall of a single day number of case counts as it relates to total number of cases that are positive. Oh by the way we tested 129,000 people on July 16th. You'll see the number 9,986 individuals tested positive for COVID-19. That seven day average at 8,838.

Gavin Newsom: (19:39 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=1179.36)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=1179.36))

You'll see the positivity rate has gone actually down modestly to 7.4%. The seven day positivity rate actually is lower than the 14 day positivity rate. Our current California positivity rate over a seven day period is 7.1%. The slide you see here represents a 14 day period at 7.4%. We're averaging now 124,000 tests on a daily basis. We have blown past that goal of 80,000. We've reconstituted, earlier this week you heard from Dr. Galley reconstituted our testing task force. I want to make this crystal clear. Our goal is to increase testing in the State of California, but do so with a different intensity of focus, which Dr. Galley laid out on Tuesday. But I want to see those numbers, those average daily test numbers continue to climb. They are continuing to climb. This is the largest seven day average number of daily tests that we've ever put forth. And I'll just remind you, it wasn't that long ago, a hundred or so days ago, we're averaging 2000 tests a day, now over 124,000 tests a day, and we'll continue to fight to see those numbers increase.

Gavin Newsom: (20:55 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=1255.61)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=1255.61))

Despite all of the external challenges, we'll just have to be more resourceful. And we, as a state are more than capable of figuring out how we can navigate some of those supply chain shortages and some of the other constraints that have been highlighted over the course of the last few weeks and understandably so. So positivity rate 7.4% over 14 day period that represents about a 7.3% increase over the 14 day period. As you can see from this slide it relates to hospitalizations. We continue to see hospitalization numbers

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increase in the State of California, about a 20% increase over... Excuse me, I'm looking now more like 22%

increase over the 14 day period. 6,808 individuals now are currently COVID-19 positive patients in our current healthcare system represents about 9.2% of the total number of hospital beds now have an identified COVID-19 positive patient. That was about 9% when I shared this slide with you on Monday.

Gavin Newsom: (22:08 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=1328.42)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=1328.42))

So it's increasing, but again at a rate that this current system in the aggregate and the aggregate can absorb. And in a moment, talk again a little bit more about what we're seeing at the county level. But what we're seeing in the aggregate at a state level related to hospitalizations, not surprisingly extends to the issue of ICU, is up about 15% over this two week period. Now 1,941 individuals that have been admitted into our ICUs about 16.6% of the total number of patients and our total population, or rather our total asset base of ICUs and NICU beds of 11,711. So that's holding is about 16% when I presented these slides to you on Monday, still north of 10,000 ventilators available. But again, this is in the aggregate statewide, doesn't represent what's happening at the local level and what's happening at the ground level. That's the purpose of this slide to talk about the counties on our monitoring list, now 32 counties, likely 33, we're monitoring one or two others.

Gavin Newsom: (23:24 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=1404.83)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=1404.83))

I expect and anticipate a county or two that's sort of two days likely to be on a third day again, though people fall off, they come back on, but 32 counties currently on the monitoring list. 58 counties in the state of California, 32 counties represented on this monitoring list. That number's held fairly steady, 29 or so last week, the end of the week, now 32. Has started the week around 32 people coming on, people coming off, but these are the counties of most concern. Now, if I broke this down in Stanislaus County and broke it down in Imperial County, what's happening into Tulare County, you'll see a higher utilization in those three counties, specifically of ventilators. You'll see other parts of the state like Napa and others that don't necessarily have a lot of remaining ICU capacity within their counties. That's a cause of concern, but please consider that the concern is not unnoticed in terms of our pandemic planning, in terms of our strategy to engage at a regional basis, our healthcare delivery system, our hospital system, that absorbs patients from outside of counties into other counties.

Gavin Newsom: (24:34 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=1474.57)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=1474.57))

So while it's understandable that some of these things generate screaming headlines, it also, I think, should be contextualized that there are smaller jurisdictions that don't have a lot of capacity. Just a few patients in the ICU will fill up their ICU capacity, but that doesn't mean we're not attending to the needs of those patients. Quite the contrary, that's part of a larger regional approach. So the counties matter, regions, multiple counties also are points of consideration. The Central Valley, we're starting to see an increase in the spread. Southern California continues to remain stubborn in terms of the spread, but you'll see counties on

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that list increasingly going further and further North of the Bay area. And you'll see a number of those represented on this slide that came on over the course of the last week or two reinforcing that no part of our state is immune from the transmission of this virus.

Gavin Newsom: (25:37 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=1537.7)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-

1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=1537.7))

And that's why it remains incumbent upon all of us to wear a mask, the most significant non-pharmaceutical intervention that you have at your disposal. And to the extent you don't, please go to our covid19.ca.gov website, covid19.ca.gov website to avail yourselves of all the resources, not just knowledge on that site. But to have the opportunity to look at support, if you need the support to get masks or you're in an industry where you feel that you need the support in terms of PPE, broadly defined, even beyond masks. I'd encourage you to take a look at that site. There's a number of things in that site that lay a specific focus on some partnerships we formed and some strategies we have advanced to provide and procure PPE and the like. By the way, we have done that in our public school system, we have provided millions and millions of masks, face shields, hand sanitizer, over well 50,000+ temperature devices. Over two months of PPE has been provided to our public education system, we'll provide more as needed. Yes, we considered the size of face masks recognizing that my four or five year old, six years old, [inaudible 00:27:08] year olds have different sized spaces, then dad and mom. And so we are also considering that in terms of the next tranch of not only procurement, though we've been in the process of procuring different size masks, but in terms of the distribution of the same. And so I just also want to make that point, that \$5.3 billion you saw on the equity slide was focusing on equity broadly, but it's money that is available for additional purchases of PPE. Money that is available for additional purchases of connected devices. Money that's available to address the digital divide, again it's why we call it learning loss. And within that lots of flexibility with an equity lens to provide real resources to the school districts to allow them to make the kind of bulk purchases that are necessary at this moment to close those divides.

Gavin Newsom: (28:08 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=1688.53)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-

1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=1688.53))

I remind you always to physically distance, wash your hands, minimize mixing that includes large crowds, backyard events with neighbors or extended family members you haven't spent time with or been in contact with in some time. These are just foundational points.

Gavin Newsom: (28:24 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=1704.81)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-

1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=1704.81))

And I'll just close with this. None of us want to see education virtualized, at least I don't. I know some folks perhaps may think that's a better approach. I believe profoundly in the power of individuals and the cohort and the connectiveness of being engaged with others and learning to develop yourselves, not just intellectually, but emotionally and maturing in ways where I respectfully submit is difficult when you're doing it online. That said the one thing we have the power to do,, to get our kids back into school is look at

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this list again, wear a mask, physically distance, wash your hands, minimize the mixing. The more we do on this list and we do it at scale, the quicker all those counties are going to come off that monitoring list. We're going to mitigate the spread of this virus and those kids are back in school.

Gavin Newsom: (29:28 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=1768.98)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=1768.98))

So if that's your top priority, it's certainly mine. Then it's incumbent upon us to practice, not just what some of us preach, but to practice what we preach as individuals that desire to see our kids go back, to model the behavior that we know can mitigate the spread, model the behavior that can actually extinguish this virus. I saw one study, I don't really want to get into the details, but if every American wore a mask, in just a number of weeks, we'll have dramatically bent the curve. I don't know that's too much to ask, though I recognize these are not the most comfortable things and often attractive things to wear. But what's more unattractive, what's more uncomfortable is not taking care of the needs of our small business and our most precious resource, our children.

Gavin Newsom: (30:20 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=1820.67)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=1820.67))

And that's why this list and your individual acts can make a profound impact and move us in a much more expedited manner towards our ultimate goal in getting every one of our kids back in the classroom, getting every one of our small businesses up and running again and getting us back to a semblance of normalcy that all of us desperately look forward to, long for and we'll once again enjoy, if again we attend to these basic and foundational and fundamental principles.

Gavin Newsom: (30:54 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=1854.41)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=1854.41))

So with that, I always encourage you to learn more and go to that covid19.ca.gov website. And I encourage you to go to that website to learn more about these continuity plans that are also required in our public education system. We call them local continuity attendance plans. In the vernacular that's well known in the education system, we talk about [inaudible 00:31:19] plans. We are now adopting those in a COVID-19 environment to consider the spread and consider this disease and it's spread in light of some of those local plans. Those have to go up on... Well made public and go up on site where you have as a parent, as someone who cares about this issue, you have access to that information. A lot of that information, again, always been aggregated our covid19.ca.gov website.

Gavin Newsom: (31:54 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=1914.16)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=1914.16))

So again, we have Dr. Galley, a dad, a pediatrician who is available for any questions. We have Linda Darlene Hammond. And if you don't know her as in her formal role, she's also one of our nation's leading educational

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experts. The reason she was appointed to this position, we're blessed to have her as she's also available to answer [inaudible 00:32:19] questions. And then you have a governor with four kids, is also available to answer any questions.

Speaker 1: (32:26 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=1946.21)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=1946.21))
Ricardo Cano, CalMatters.

Speaker 2: (32:31 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=1951.17)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=1951.17))

Thank you, governor. There seems to be some skepticism from parents and students over the quality of distance learning that they're going to receive, just given the way things played out in the spring. The budget you signed in [inaudible 00:32:45] standards, but doesn't spell out requirements for live synchronous instruction that parents in academics feel is an important part of distance learning. My question is how much live instruction do you feel school should be offering students this fall? And what reports will parents and students have if they're not receiving the quality instruction from their schools laid out under your budget?

Gavin Newsom: (33:07 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=1987.72)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=1987.72))

Well we stipulated \$5.3 billion in terms of statutory language and expectation that certain conditions will be met as it relates to rigorous online and distance learning. So we laid those out in very specific terms here today, in terms of the slide that I put up. Let me put that slide now back up, because it will answer your question more specificity. You'll see our fifth bullet point rigorous distance learning. This is about having a requirement to have access to devices and connectivity for all of our kids. You may be aware and I'm really proud, my wife has been working overtime to try to get philanthropy engaged and to get support, to get devices donated and to have wifi hotspots and connectivity beyond even wifi-

Gavin Newsom: (34:03 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2043.001)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2043.001))

... by hotspots and connectivity beyond even WiFi in our public schools. I thank Tony Thurman for his leadership in this space as well, and Darlene Hammond. They all worked collaboratively together. I made an announcement a number of months ago, how Google really led in this space. We found 100,000 hotspots that we did advance in partnership with them, Microsoft, Amazon, others. Verizon came in providing \$10 a month per household plans. A lot of people still can't afford that, but it's a cohort of support. An example of where philanthropy even government is coming in, or business rather, is coming in. We have a lot more work to do there. We were able to get Chromebooks and laptops. We've already got tens of thousands, over 70,000. We announced a few months back, tens of thousands more coming in the CPUC.

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Gavin Newsom: (34:56 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2096.3)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2096.3))

I had made an announcement on this a few months ago. It goes to your question. It's worth repeating today. The CPUC has been doing much more targeted mapping of areas where connectivity is not robust and it's not optimal. There's been a renewed effort over the last few months to prepare for our fall academic season. We have, in addition to that, put up tens of millions of dollars, \$25 million from the CPUC that is providing supports to what we call LEAs, these local education authorities, to cut the costs of connectivity in devices in half in addition to all the philanthropic efforts that are underway.

Gavin Newsom: (35:39 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2139.17)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2139.17))

But we put that \$5.3 billion up and we put statutory language in the budget as it relates to the need to do lot more in the old traditional ways through bulk purchasing. And that's why that money is available. And that's why it's incumbent upon districts in the next couple of weeks that'll open up, some as early as August 17th, to purchase these devices to get that connectivity moving. Let me just give you an overall example of some of the connectivity. The City of Sacramento outfitted a lot of old school buses for connectivity and put out a playbook for other parts of the state to consider a possibility of mobile connectivity as well. It's just an example of some of the work that's being done. Some of the innovation that deserves some recognition. It's not a solution at scale, but it gives you a sense of what's been going on and what we intend to advance.

Gavin Newsom: (36:31 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2191.18)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2191.18))

Daily live interaction. You're absolutely right. The spirit of your question. As a parent, I agree with the spirit of your question. I want to see that interaction with teachers. I want to see that interaction with students. And I also want to see it rigorous. I want to see it challenging. I don't want to see it passive. I don't want to see it disjointed. So we deal with equity, we deal with connectivity, we deal with quality, we deal with the importance of having lesson plans that are robust and are meaningful, and we move aggressively to extinguish this virus so we can get everybody back in to the classroom as soon as we can. This is how we start in those monitory counties. This is not how we intend to end. Quite the contrary. We hope in some cases, some of these counties fall right off that monitoring list and we're back up and running in-person with all these new criteria and safety health expectations in place.

Speaker 4: (37:33 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2253.33)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2253.33))

John Myers, LA Times.

John Myers: (37:37 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2253.33)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-

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1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2257.09))

Hi governor. I'm hoping you can give me a little bit of information about your thinking on this question. When you talk to the press on Monday, a couple of reporters asked you about additional statewide efforts or statewide clarity, and you seemed to suggest at the time that there was enough out there already. But clearly things have changed in your thinking. So I'm just curious, what's changed between then and now, I should say. Did you see data from some of the local communities that gave you pause? Did you see maybe the suggestions of other school districts that have already moved to this? What changed? What was the moment that made you think you needed to do more work on the state?

Gavin Newsom: (38:11 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2291.95)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-

1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2291.95))

That was about 10 days ago, so forgive me for leaving you with that impression on Monday. It certainly was not my intention. Quite the contrary. We've been planning to make this announcement for some time. We've been working very collaboratively with all of our partners across the spectrum. John, you know well the spectrum of educational leaders, counsel, and advice that we've received from them, but also working with local health officials. So, I previewed that on Monday with the expectation that we'd be rolling out this plan with a little bit more nuance and detail. And so, we're just moving in that direction as we intended and we're very, very pleased and grateful for the incredible counsel advice that we've received from so many stakeholders.

Speaker 4: (38:57 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2337.15)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-

1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2337.15))

John [inaudible 00:38:56].

Speaker 3: (38:59 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2339.07)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-

1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2339.07))

Governor, thanks for taking our questions today. I think a lot of parents around the state are wondering what this means. You and others have talked about how kids getting back to school is going to be critical for really getting the economy restarted. So, do you have any plans to support parents who this news will mean kids staying at home indefinitely at this point?

Gavin Newsom: (39:22 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2362.34)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-

1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2362.34))

Yeah. I mean it's across the spectrum, isn't it? I mean, when you have an average daily rate of case increases now over 8,838, that's our seven day average, those case numbers are of concern. And that's why we move forward with modifications to our state at home order. I added more of these counties to the monitoring list. We're concerned across the spectrum about the impact on local businesses, the economy in the state, and obviously our parents. And again, it's not an intellectual exercise for me. It's quite personal as it is for so many people watching. I don't need to belabor that point except to say that I bring that personal experience to bear as it relates to the conversations we're having.

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Gavin Newsom: (40:03 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2403.78)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2403.78))

Dr. Ghaly certainly does as a pediatrician and as a parent of four. And of course, with our partners at CDE and our partnerships with the state board, we have been very sober in terms of how we've engaged in this conversation because, yes, our default, and I made that clear in that first slide, our default is in-person, but we have to do it in a safe way and we have to do it in a way that can guarantee the health of not just our kids, but also those that are entrusted with their care. And based upon the spread, based upon the increased spread of this virus just over the course of the last number of weeks and the fact that we haven't been able to yet, and we will, bend that curve to a degree that we must, that has unfortunately put us in this position.

Gavin Newsom: (40:55 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2455.03)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2455.03))

And so, I look forward to finding all of those supports we possibly can across the spectrum to help support our small businesses, to help support our caregivers and to help support our parents that, trust me, I know intimately are dealing with an extraordinary moment in their lives and their children's lives. The pressure we put on our parents is very, very intense indeed.

Speaker 4: (41:24 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2484.48)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2484.48))

Hannah Wiley, Sac Bee.

Hannah Wiley: (41:28 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2488.5)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2488.5))

Hi governor. Thanks for taking questions. Had the state moved more slowly through the reopening phase back in the late spring and early summer, do you think more school districts would be in a position to offer in-person learning?

Gavin Newsom: (41:43 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2503.64)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2503.64))

I am not able to hypothesize about coulda woulda shoulda. Here's the reality, the reality that's in front of us, reality I've presented you today in terms of the spread in these parts of the state. It's been, well, I think many people recognized that we are still going through the first wave with this pandemic. We're not out of the first wave. We were able to substantially mitigate any increase in the spread of this virus. We extended that mitigation for a period of time where ICU and hospitalizations held steady. And as we started to open up sectors of our economy, region by region, we are where we are. And now we are trying to tackle that in a very judicious way. We made some modifications last week, earlier in this week and we'll continue to be open argument, interested in evidence, looking at the data, looking at the conditions as they present

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themselves in diverse parts of the state and making subsequent recommendations.

Speaker 4: (42:43 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2563.24)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2563.24))

John Woolfolk from the Mercury News.

John Woolfolk: (42:47 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2567.7)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2567.7))

Hi governor. Can you just clarify this is an order or a recommendation, and can you clarify this is public as well as private schools or just public schools, and does it affect universities?

Gavin Newsom: (43:01 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2581.16)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2581.16))

Yeah. Public, private, university guidelines. We are working on basically [inaudible 00:43:05] socializing between us with the new incoming president of the UC system that's now transferring over. I want to make sure I don't put everything out as he's about to come on board, but we've been working overtime for our CSUs and UCs community colleges very, very collaboratively. And so, that guideline will be coming out very shortly. As it relates to your question about public, private, it includes public and private. And yes, as it relates to the stipulations that we put forth in our budget for public education, the criteria and the statutory language, the hold-harmless agreements and other relevant information that was put forth, adopted by the legislature and signed by me, it puts this in the form of a mandate in our public education system.

Speaker 4: (43:59 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2639.36)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2639.36))

Dustin Gardiner, SF Chronicle.

Dustin Gardiner: (44:04 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2644.19)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2644.19))

Thank you, governor. With respect to the testing requirement, how is the state going to ensure there's enough capacity for hundreds of thousands of educators to get tested every other month? How do you pay for that and how do you make sure there's the capacity?

Gavin Newsom: (44:18 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2658.13)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2658.13))

Well, as you may know, earlier this week on Tuesday, Dr. Ghaly put forth a new testing plan, new testing strategy, announced new co-directors of our testing task force that specifically answered the question of how we're prioritizing and what we're prioritizing. And today we reinforced that priority. He referenced during that presentation on Tuesday the expectation that health plans will start picking up the costs as they're required to do, but with different language we put forth. Then the federal guidelines to require those

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plans to reimburse and to provide for those tests. Employer responsibility. Employers include our responsibility as a state in our school system to pick up the costs of those tests. So that goes specifically into how we're going to pay for them.

Gavin Newsom: (45:13 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2713.13)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2713.13))

The testing, we need to increase. I was very clear about that. Even though we had 129,000 people tested yesterday, we still have responsibility to test many, many more. The purpose of that presentation, the purpose of reinvigorating our testing taskforce was to do just that. Today we've set forth expectation that our adults in our education system will be tested on a cohort basis, on a rotating basis. And as we avail ourselves to more testing capacity, we'll step up those efforts to a whole nother level.

Gavin Newsom: (45:49 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2749.84)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2749.84))

And more important perhaps than anything else is I think the announcement could be lost on connecting our contact tracers to our public education system as well. Because it's one thing to test someone, and we, again, focus a lot on that, but what do you do after someone's tested positive or someone's been exposed to someone who has tested positive? And that question can be very anxiety inducing in a public school setting. And that's why the partnership with the contact tracers at the county level now to really do the contact tracing isolation to understand where the spread happened, what the cohort looks like, becomes foundational in terms of meaningfully addressing, mitigating that spread and meaningfully opening up the opportunity to reintroduce students back into that school setting once we've addressed the spread of the virus.

Speaker 4: (46:44 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2804.35)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2804.35))

Kathleen Ronayne, AP.

Kathleen Ronayne: (46:48 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2808.65)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2808.65))

Hi governor. As you mentioned, some schools are starting in the middle of August, so four weeks from now. Do you think that you're giving them enough time to implement these complicated rules in a meaningful way by the time school starts? And then secondly, the guidelines don't mention extracurriculars. So if a school is open for in-person learning, what can they do in the extracurricular space? And then finally for Dr. Ghaly, is this slight decrease in the positivity rate a sign that the latest closures are having a positive effect.

Gavin Newsom: (47:20 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2840.38)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2840.38))

Yeah Well I'll leave that to Dr. Ghaly I'll just defer to him since I've taken too much of everybody's time I
<https://www.rev.com/blog/transcripts/california-governor-gavin-newsom-july-17-press-conference-transcript>

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turn. Well, I believe that to Dr. Ghaly. I'll just defer to him since I've taken too much of everybody's time. I have strong opinions about that positivity rate, but I'll let Dr. Ghaly express his first. But look, as it relates to providing time, we've been at this for months now. This shouldn't come as a surprise to anybody. We ended our school year last year with the expectation of providing distance learning. We work with a lot of the districts to share best practices to work through a lot of issues. So this is not sprung on people. This is not a shock just a few weeks before the school year.

Gavin Newsom: (47:55 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2875.53)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2875.53))

Now, the expectation that we're doing in all the monitoring counties obviously renews a sense of focus as it relates to distance learning. But the frame around distance learning broadly has been socialized over the course of many, many months here in the state of California. Example, by the work we did at the end of the year last year to provide more devices, to provide more points of connectivity, and also exemplified, and I think you can appreciate this, by the fact that some of our state's largest school districts have already moved forward to distance learning. And the fact is, many others followed suit in the last few days.

Gavin Newsom: (48:35 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2915.96)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2915.96))

And so, you have dozens and dozens and dozens of districts that already are moving down this path. And so, from that perspective, I think the opportunity for these districts to prepare, an opportunity to use the resources that we made available weeks and weeks ago in the budget avail themselves, I think, very favorably though, again, I'm not naive. You'll invariably find a district that doesn't want any mandate. And certainly not this mandate that obviously may express a different point of view. But we are working through 1000 plus districts in this state and we're working through a scale no other state in the country is working through. But with that, I'm not sure another state in the country has its head of Health and Human Service that has four kids and is a pediatrician. So let him answer that question on that positivity rate.

Dr. Mark Ghaly: (49:40 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2980.78)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=2980.78))

Thank you governor. Kathleen, thanks for the question on test positivity. Of course, it's encouraging to see it begin to stabilize, but we will see. I think we're doing a lot more testing. We know that we're seeing more transmission as evidenced by the increased number of cases over a seven day average. But certainly one of the first signs is that we start to see more of our tests come back negative and that positivity rate come down. So as we do every day, we're going to keep watching it very closely. Take it in context of some of the increased challenges of getting test results back because of the large number of tests being done across the nation.

Dr. Mark Ghaly: (50:23 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=3023.71)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=3023.71))

So yes, it's encouraging, but we're going to watch it closely and we're prepared for whatever we see tomorrow and over the trends. We continue to push out testing, try to get it to the places where we know

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we're seeing cases increased in those communities where it's vital and important, and we'll be keeping up on the updates. As soon as we feel confident in that trend and we see other numbers start to stabilize, we'll credit some of the moves we've made over the last few weeks to those. This is that time that given it's been about three, four weeks since we first started to make moves, the governor with his finger on the demo...

Dr. Mark Ghaly: (51:03 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=3063.8)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=3063.8))

Once we made, first started to make moves, the governor with his finger on the dimmer, moving it down a little bit. So we're right in that time period where we may see some of the changes in the benefits of those. So, with all of you, we'll watch it closely and see where we are over the weekend and early next week.

Gavin Newsom: (51:18 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=3078.78)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=3078.78))

And just to reinforce for folks, the positivity rate on the seven day when we announced that on Monday, was about 7.7%, 7.1 today. But, I've got to just say as a point of caution, those positivity numbers can fluctuate significantly in the seven day averages. And so, we may be in a completely different place on Monday. And so, again, some of these data points, even these short-term trends, I want to caution folks. But nonetheless, I want to thank everybody for their indulgence and their personal responsibility over the course last few weeks, and allowing us to move forward at this next level to mitigate the spread of this virus,

Speaker 5: (52:10 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=3130.03)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=3130.03))

[inaudible 00:52:11].

Speaker 6: (52:13 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=3133.35)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=3133.35))

Governor, on the topic of parents that have students with special needs, I spoke to several parents over this course with students on the autism spectrum. They say their children have regressed considerably since [inaudible 00:52:24] learning last semester, it just didn't work with less. Than two weeks for some of these districts, I understand there's additional funding. But realistically, how quickly is that going to be divvied up? And what additional services will be offered in terms of interaction for students with special needs?

Gavin Newsom: (52:38 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=3158.98)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=3158.98))

Yeah. No one, and I mean no one, better positioned than the champion of special education reform, Linda Darling-Hammond, who's on the line. Linda can answer that question more effectively than perhaps anyone. And so let me ask Linda to answer that question and I'll fill in wherever she leaves off. Linda.

Linda D.: (53:01 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-

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1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=3181.48))

Thanks very much for that question. We're very concerned about meeting the needs of the full range of students. All of the districts, you have been aware that they need to have capacities for distance learning and begin to adapt what they're doing for students with special needs. We will have further standards and guidance coming out over the coming week. But in the meanwhile, a lot of the districts and county offices have been developing resources. Many of them targeted for students with special education needs. Curriculum and plans for how teachers will be able to do one-on-one, as well as small group instruction, whether it's in person or online. There's been a lot of training happening this summer, and many teachers are learning how to, both getting their time put in their schedule and learning how to use the breakout room in Zoom, so that a small group can meet with them, including students who need one-on-one attention. The paraprofessionals sometimes can be one-on-one in that Zoom breakout room and in other contexts to work directly with students in the ways that they need to receive services.

Linda D.: (54:24 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=3264.09)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=3264.09))

So I think we're going to see a lot more capacity this school year than we were able to have in all districts last school year, to really respond to both classrooms as a whole and the needs of particular students. And of course, as the governor said, we want to get people back to school in person, and the guidelines not only say who can't open school, but who can. That's going to actually be encouraging. And how counties and districts and schools can get off the distance learning list if you will, and back in school in person. And so, as districts have been providing their plan A and plan B for classrooms of kids and individual kids, there's been a lot of attention that they've been able to provide with new resources from the Collaborative for Educational Excellence, and from the CDE to help them do that.

Gavin Newsom: (55:24 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=3324.73)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=3324.73))

Linda, let me, if I may, interject and ask you a question as well. In relationship to the work that CDE has done, all of your cohorts and partners, the superintendent of public education, the webinars, et cetera, just on the distance learning question. I thought Kathleen's question was a right question about the fact that some schools are opening as early as August 17th, and not all of them had announced that they were moving towards distance learning. Now they are compelled in these monitoring counties to talk a little bit about the last few months. Maybe you can fill in with a little bit more specificity, the work that has been done. That we haven't just been sitting on our hands, as it relates to preparing for some expectation that we may see distance learning this fall. Can you fill in just perhaps, a little more nuance into that?

Linda D.: (56:21 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=3381.63)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=3381.63))

Sure. The CDE, the California Department of Education, has been offering both a wide variety of resources, including curriculum resources, instructional resources, and webinars to educators, both around general instruction and distance learning and best practices, but also specific for English learners, for students with

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disabilities. Our Center for Collaboration, Excellence, and Education, the CCEE, has also been working very

closely with county superintendents who then work with their district superintendents. A number of them have created entire curricula that are now available for districts that didn't have a pathway to a continuity plan for instruction earlier, and have been holding up best practices, including for students with disabilities, in ways that have been traveling across the state at a very rapid clip.

Linda D.: (57:26 (<https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=3446.6>))

We do have an infrastructure where the county offices has worked directly with the districts in their counties and they're getting a lot of support from both of those agencies at the state level. And they also then are in touch at the county level, with county public health providers and health departments so that there's toggling that we're going to need to do between the safe environment for learning, and the method by which the learning will be enabled, can be done in a much more coherent way than we were able to do in the spring. Remember in the spring, when we first closed schools, a lot of people thought it would be two weeks. So they were just providing some supplementary resources. Some districts only had instructional packets. Many of them did not have the devices and connectivity for all of the students that they needed to have to really be in touch with kids one-on-one, that synchronous instruction is now required. So we're a much better position going into the school year in every county and district, to support the needs of children then we were back in the spring.

Gavin Newsom: (58:40 (<https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=3520.42>))

I appreciate that. Thank you, Linda. Thank you. Next question.

Speaker 5: (58:43 (<https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=3523.15>))

Final question?

Speaker 7: (58:46 (<https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=3526.56>))

Musadiq Bidar, CBS News.

Musadiq Bidar: (58:47 (<https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=3527.14>))

Hey Governor, thank you for taking the question. The Trump administration has made clear in recent weeks that reopening America goes hand in hand with reopening schools. President Trump has said he will pressure governors to open all schools. What kind of pushback and comments do you anticipate from the president on this? And have you been in contact with anyone in the administration or the Coronavirus Task Force about your plan?

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Gavin Newsom: (59:12 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=3552.5)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=3552.5))

Yeah. We've been constantly in contact with members of the Task Force, the vice president directly, not just individual members of the Task Force. I think this afternoon, I have a number of conversations with specific members as well on a myriad of issues, including where we are as it relates to education. Look, I want to just put up a slide, because I think it deserves to be reinforced. And this was a slide about what is our bottom line, because I think it goes to the heart of your question and to the heart of the moment we're in. You can just remove political context, remove one individual or elected official. I think broadly, this statement. And forgive me, I say broadly, because I recognize not everyone would submit to it. But broadly the statement I believe is accurate, that students, teachers, staff, and parents prefer in-classroom instruction. That we stipulate to, but only if we can do it safely.

Gavin Newsom: (01:00:09 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=3609.91)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=3609.91))

And I think it's that, "But only, if we could do it safely." That's the responsibility of governors. It's a responsibility of superintendents of public education. It's responsibility of county health officers. Responsibility of caretakers and teachers and other incredibly important classified staff. It's incumbent upon parents as well. And so, this is the question that we are responsible for answering. How can we do it safely, when you're seeing a background spread of a virus in certain areas that invariably will impact what's happening within the school environment? And I deeply recognize. I follow the science. I pay attention to the data as it relates, again, as a parent first. But as a governor, to the data about the spread of this virus based upon age. None of us are naive about a lot of the studies that are out there. And by age I mean, not just young people, but by ages underneath them meaning, 10 and younger. And our elementary school kids and the like.

Gavin Newsom: (01:01:19 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=3679.12)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=3679.12))

But we're not just talking about our children. We are also talking about those we entrust our children with when we drop them off at school as well, and their health and their safety. So it's an ecosystem, our public education system, our education system broadly, and we are responsible to address the needs of that ecosystem. And part of that ecosystem, in closing, does extend. And I recognize the president's insistence from an economic paradigm. I get that. It also impacts the larger economic question, because we all recognize as parents, the need, not only to get our kids back to school where they're healthy and safe, but also for us to get back to work as well. So all of these things are being weighed. They weigh heavily on all of us as parents, as members of a community that have roles of responsibility.

Gavin Newsom: (01:02:11 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=3731.98)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=3731.98))

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And so I appreciate this dialectic, I guess it's a way of saying this. I'm not looking to score cheap political

points with people that have different points of view. I respect and appreciate this dialectic, this conversation, that we're having. And we'll continue to have it with, I think, clarity of purpose and conviction to keep our kids and keep our economy moving. Keep everybody safe and healthy in the right balance.

Gavin Newsom: (01:02:39 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=3759.89)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=3759.89))

And so again, I thank all of you for the opportunity to balance perhaps some of your day with this update and your time. I want to thank for the questions that we received. I want to thank Linda Darling-Hammond for her just extraordinary work over the course of many, many months, not just weeks, as we organized around the announcement we're making today. Dr. Ghaly for all his work, working overtime, to help advance this cause. To all our education advisors and to the superintendent of public education, Tony Thurman, for his willingness to never sacrifice for expediency, but to really focus on the medium-long-term safety of our children and our staff.

Gavin Newsom: (01:03:24 ([https://www.rev.com/transcript-](https://www.rev.com/transcript-editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=3804.88)

editor/shared/nWnVCjVbqWLqQAe3h2rswbPNUjZzJXmZUyH6m5wanrCTmTKDcy8-1cpXc7LR9oPD4DivX30WF0rIm2rFHsFM8AdZ4dc?loadFrom=PastedDeeplink&ts=3804.88))

With that, hope everybody has a safe weekend where you are wearing your masks, practicing the physical distancing, and doing so in turn in the spirit of getting our kids back in classroom instruction. Take care everybody.

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1 XAVIER BECERRA
 Attorney General of California
 2 JENNIFER G. PERKELL
 Supervising Deputy Attorney General
 3 DARIN L. WESSEL, State Bar No. 176220
 JENNIFER A. BUNSHOFT, State Bar No. 197306
 4 Deputy Attorneys General
 600 West Broadway, Suite 1800
 5 San Diego, CA 92101
 P.O. Box 85266
 6 San Diego, CA 92186-5266
 Telephone: (619) 738-9125
 7 Fax: (619) 645-2012
 E-mail: Darin.Wessel@doj.ca.gov
 8 *Attorneys for Defendants*
 Gavin Newsom, in his official capacity as the
 9 Governor of California, Xavier Becerra in his
 official capacity as the Attorney General of
 10 California, Sonia Y. Angell, M.D., in her official
 capacity as the State Public Health Officer and
 11 Director of the Department of Public Health and
 Tony Thurmond, in his official capacity as State
 12 Superintendent of Public Instruction and Director
 of Education

13 IN THE UNITED STATES DISTRICT COURT
 14 FOR THE CENTRAL DISTRICT OF CALIFORNIA
 15 WESTERN DIVISION – FIRST STREET COURTHOUSE
 16

17
 18 **MATTHEW BRACH, et al.,**
 Plaintiffs,
 19
 20 v.
 21 **GAVIN NEWSOM, et al.,**
 Defendants.
 22

Case No. 2:20-cv-06472 SVW (AFMx)
DECLARATION OF DARIN L. WESSEL IN SUPPORT OF REQUEST FOR JUDICIAL NOTICE IN OPPOSITION TO APPLICATION FOR TEMORARY RESTRAINING ORDER (Dkt. 28); EXHIBITS
 Date: August 17, 2020
 Time: 1:30 p.m.
 Courtroom: 10A - Telephonic
 Judge: The Honorable Stephen V. Wilson
 Trial Date: Not set
 Action Filed: 7/21/2020

1 I, Darin L. Wessel, declare as follows:

2 1. I am an attorney duly admitted to practice before this Court. I am a
3 Deputy Attorney General with the California Office of the Attorney General. I
4 have personal knowledge of the facts set forth herein, except as to those stated on
5 information and belief and, as to those, I am informed and believe them to be true.
6 If called as a witness, I could and would competently testify to the matters stated
7 herein. I make this declaration to authenticate the exhibits attached to the Request
8 for Judicial Notice submitted in opposition to plaintiffs' application for a temporary
9 restraining order.

10 2. Attached as Exhibit A to the Request for Judicial Notice is a true and
11 correct copy of Governor Newsom's Coronavirus State of Emergency
12 Proclamation, dated March 4, 2020.

13 3. Attached as Exhibit B to the Request for Judicial Notice is a true and
14 correct copy of Executive Order N-25-20.

15 4. Attached as Exhibit C to the Request for Judicial Notice is a true and
16 correct copy of the Official Statement regarding Executive Order N-33-20 and
17 Essential Workers.

18 5. Attached as Exhibit D to the Request for Judicial Notice is a true and
19 correct copy of California's Resilience Roadmap.

20 6. Attached as Exhibit E to the Request for Judicial Notice is a true and
21 correct copy of Executive Order N-60-20.

22 7. Attached as Exhibit F to the Request for Judicial Notice is a true and
23 correct copy of Order of the State Public Health Officer, dated May 7, 2020.

24 8. Attached as Exhibit G to the Request for Judicial Notice is a true and
25 correct copy of Order of the State Public Health Officer, dated March 19, 2020.

26 9. Attached as Exhibit H to the Request for Judicial Notice is a true and
27 correct copy of Order of the State Public Health Officer, dated July 13, 2020.

28

1 10. Attached as Exhibit I to the Request for Judicial Notice is a true and
2 correct copy of California Department of Public Health, Guidance on Closure of
3 Sectors in Response to COVID-19, dated July 13, 2020.

4 11. Attached as Exhibit J to the Request for Judicial Notice is a true and
5 correct copy of California Department of Public Health, COVID-19 and Reopening
6 In-Person Learning Framework for K-12 Schools in California, 2020-2021 School
7 Year, dated July 17, 2020.

8 12. Attached as Exhibit K to the Request for Judicial Notice is a true and
9 correct copy of California Department of Public Health, COVID-19 Industry
10 Guidance: Schools and School-Based Programs, updated August 3, 2020.

11 13. Attached as Exhibit L to the Request for Judicial Notice is a true and
12 correct copy of California Department of Public Health, Schools Guidance FAQs,
13 dated August 3, 2020.

14 14. Attached as Exhibit M to the Request for Judicial Notice is a true and
15 correct copy of California Department of Public Health, COVID-19 and Reopening
16 of In-Person Learning for Elementary Education Waiver Notice to the California
17 Department of Public Health, dated August 3, 2020.

18 15. Attached as Exhibit N to the Request for Judicial Notice is a true and
19 correct copy of California Department of Public Health, COVID-19 and Reopening
20 In-Person Learning Elementary Education Waiver Process, dated August 3, 2020.

21 16. Attached as Exhibit O to the Request for Judicial Notice is a true and
22 correct copy of California Department of Public Health, Waiver-Letter Template,
23 issued August 3, 2020.

24 17. Attached as Exhibit P to the Request for Judicial Notice is a true and
25 correct copy of California Department of Public Health, Waiver Letter Template
26 Cover Form, issued August 3, 2020.

27
28

1 18. Attached as Exhibit Q to the Request for Judicial Notice is a true and
2 correct copy of California Department of Public Health, COVID-19 County
3 Monitoring Overview (accessed Aug. 7, 2020).

4 19. Attached as Exhibit R to the Request for Judicial Notice is a true and
5 correct copy of California Department of Public Health, COVID-19 County Data
6 Monitoring (accessed Aug. 7, 2020).

7 20. Attached as Exhibit S to the Request for Judicial Notice is a true and
8 correct copy of California Department of Public Health, COVID-19 County Data
9 Monitoring, Step 1: Active Data Monitoring (accessed Aug. 8, 2020).

10 21. Attached as Exhibit T to the Request for Judicial Notice is a true and
11 correct copy of California Department of Public Health, COVID-19 County
12 Monitoring Step 2: Targeted Engagement with CDPH (accessed Aug. 8, 2020).

13 22. Attached as Exhibit U to the Request for Judicial Notice is a true and
14 correct copy of California Department of Public Health, COVID-19 County
15 Monitoring Step 3: Reinstitute Community Measures (accessed Aug. 8, 2020).

16 23. Attached as Exhibit V to the Request for Judicial Notice is a true and
17 correct copy of State Officials Announce Latest COVID-19 Facts, July 31, 2020,
18 State confirms first death of a young person related to COVID-19
19 (<https://www.cdph.ca.gov/Programs/OPA/Pages/NR20-179.aspx>, accessed Aug. 8,
20 2020).

21 24. Attached as Exhibit W to the Request for Judicial Notice is a true and
22 correct copy of Christine M. Szablewski, et al., SARS-CoV-2 Transmission and
23 Infection Among Attendees of an Overnight Camp — Georgia, June 2020, 69(31)
24 Centers for Disease Control Morbidity and Mortality Weekly Report, pp. 1023-
25 1025 (Aug. 7, 2020) (<https://www.cdc.gov/mmwr/volumes/69/wr/mm6931e1.htm>,
26 accessed Aug. 8, 2020).

27 25. Attached as Exhibit X is a list of reported school outbreaks of COVID-19
28 in the United States, compiled in Santora, All These Schools Reopened and Then

1 Had COVID-19 Outbreaks, Fatherly, August 7, 2020, accessed via MSN on August
2 8, 2020.

3 26. Attached as Exhibit Y to the Request for Judicial Notice is a true and
4 correct copy of National Public Radio, *After Reopening Schools, Israel Orders*
5 *Them to Shut Down After COVID-19 Cases Are Discovered*, June 3, 2020.

6 27. Attached as Exhibit Z to the Request for Judicial Notice is a true and
7 correct copy of Isabel Kershner, et al., *When Covid Subsided, Israel Reopened Its*
8 *Schools. It Didn't Go Well*, The New York Times, Aug. 4, 2020.

9 28. Attached as Exhibit AA to the Request for Judicial Notice is a true and
10 correct copy of Derek Hawkins, *Nine people test positive for the coronavirus at*
11 *Georgia school where photos of packed hallways went viral*, The Washington Post,
12 Aug. 9, 2020.

13 29. Attached as Exhibit BB to the Request for Judicial Notice is a true and
14 correct copy of Eliza Shapiro, et al., *A School Reopens, and the Coronavirus*
15 *Creeps In*, The New York Times, Aug. 1, 2020.

16 30. Attached as Exhibit CC to the Request for Judicial Notice is a true and
17 correct copy of Young Joon Park, et al., *Contract Tracing during Coronavirus*
18 *Disease Outbreak, South Korea, 2020*, Centers for Disease Control Dispatch, vol.
19 26, no. 10 (early release).

20 31. Attached as Exhibit DD to the Request for Judicial Notice is a true and
21 correct copy of *Preparing K-12 School Administrators for a Safe Return to School*
22 *in Fall 2020*, Centers for Disease Control and Prevention, updated Aug. 1, 2020.

23 32. Attached as Exhibit EE to the Request for Judicial Notice is a true and
24 correct copy of *Stronger Together: A Guidebook for the Safe Reopening of*
25 *California's Public Schools*, California Department of Education, June 2020.

26 33. Attached as Exhibit FF to the Request for Judicial Notice is a true and
27 correct copy of *Distance Learning Frequently Asked Questions*, California
28 Department of Education, accessed Aug. 9, 2020.

1 34. Attached as Exhibit GG to the Request for Judicial Notice is a true and
2 correct copy of Learning Continuity and Attendance Plan Instructions (2020-21),
3 California Department of Education, Aug. 2020.

4 35. Attached as Exhibit HH to the Request for Judicial Notice is a true and
5 correct copy of Learning Continuity and Attendance Plan Template (2020-21),
6 California Department of Education, Jul. 2020.

7 36. Attached as Exhibit II to the Request for Judicial Notice is a true and
8 correct copy of California Department of Education Official Letter, 2020 Budget
9 Act and Special Education, July 15, 2020.

10 37. Attached as Exhibit JJ to the Request for Judicial Notice is a true and
11 correct copy of California State Budget Summary – 2020-2021, K-12 Education,
12 pages 31-41.

13 38. Attached as Exhibit KK to the Request for Judicial Notice is a true and
14 correct copy of California Department of Education, Release #20-63, State
15 Superintendent Tony Thurmond Outlines Ongoing Supports to Strengthen Distance
16 Learning and Announces Timeline for Ethnic Studies Model Curriculum during
17 Virtual Media Check-in, dated July 29, 2020.

18 39. Attached as Exhibit LL to the Request for Judicial Notice is a true and
19 correct copy of California Department of Education, Release #20-65, State
20 Superintendent Tony Thurmond Announces Major Collaboration with Apple and
21 T-Mobile to Connect Students in Need, dated August 5, 2020.

22 40. Attached as Exhibit MM to the Request for Judicial Notice is a true and
23 correct copy of California Department of Education, Release #20-66, State
24 Superintendent Tony Thurmond and Digital Divide Task Force Connect School
25 Leaders to Available Devices as Learning Resumes, dated August 5, 2020.

26 41. Attached as Exhibit NN to the Request for Judicial Notice is a true and
27 correct copy of Excerpts of California Senate Bill No. 98.
28

1 42. Attached as Exhibit OO to the Request for Judicial Notice is a true and
2 correct copy of the transcript of Governor Newsom’s July 17, 2020, Press
3 Conference.

4 I declare under penalty of perjury under the laws of the United States of
5 America that the foregoing is true and correct.

6 Executed on this 9th day of August, 2020, at El Cajon, California.

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/s Darin L. Wessel

Darin L. Wessel

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D.Wessel Dec..docx

CERTIFICATE OF SERVICE

Case Name: Brach v. Newsom, et al. No. 2:20cv06472 SVW (AFMx)

I hereby certify that on August 9, 2020, I electronically filed the following documents with the Clerk of the Court by using the CM/ECF system:

- MEMORANDUM OF POINTS AND AUTHORITIES IN OPPOSITION TO APPLICATION FOR TEMPORARY RESTRAINING ORDER (Dkt. 28)
- DECLARATION OF JAMES WATT, M.D., M.P.H., IN SUPPORT OF DEFENDANTS' OPPOSITION TO PLAINTIFFS' APPLICATION FOR TEMPORARY RESTRAINING ORDER AND FOR ORDER TO SHOW CAUSE WHY PRELIMINARY INJUNCTION SHOULD NOT ISSUE
- REQUEST FOR JUDICIAL NOTICE IN OPPOSITION TO APPLICATION FOR TEMPORARY RESTRAINING ORDER (Dkt. 28); EXHIBITS
- DECLARATION OF DARIN WESSEL IN SUPPORT OF REQUEST FOR JUDICIAL NOTICE IN OPPOSITION TO APPLICATION FOR TEMPORARY RESTRAINING ORDER (Dkt. 28)

I certify that all participants in the case are registered CM/ECF users and that service will be accomplished by the CM/ECF system.

I declare under penalty of perjury under the laws of the State of California and the United States of America the foregoing is true and correct and that this declaration was executed on August 9, 2020, at San Francisco, California.

G. Guardado
Declarant

/s/ G. Guardado
Signature

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