



CCSESA School Reopening Guidance

Purpose and Assumptions

Purpose

This document is intended as a resource for county superintendents of schools and county offices of education (COEs) in working with their local public health officials and local educational agencies (LEAs) to establish and implement procedures for reopening and operating schools after the closure due to the COVID-19 pandemic.

This document will evolve over time as more information becomes available. The CCSESA COVID shared drive (<https://drive.google.com/drive/folders/OAMhgXUp8IPAvUk9PVA>) includes county-developed resources and other documents and examples helpful to county offices of education in responding to the pandemic. Resources will be added or updated as information and additional materials are identified.

The Health Officers Association of California (HOAC), a membership organization representing the physician health officers in California's city and county jurisdictions, designated a liaison to review and provide input on this document. CCSESA appreciates HOAC's collaboration and the technical assistance provided by their liaison.

Assumptions

1. Safety of students and staff is paramount.
2. County superintendent of schools are uniquely positioned to collaborate with local officials about reopening schools and to lead discussions about changes needed in schools to protect the safety of students and staff. County offices of education can:
 - a. Help LEAs in the county synthesize federal, state and local guidelines into practices and procedures for reopening and operating local schools to support both education and public health goals
 - b. Encourage local districts and charters to use the same practices whenever possible so as to send consistent messages to students, parents, community members and staff
 - c. Communicate with parents and the community about these practices and procedures
3. The COVID-19 virus will be a public health threat until a vaccine is developed and widely used. Development of a vaccine will take time. The earliest a vaccine could be in production is in the winter of 2020-21. If that happens, it will likely take until the end of the 20-21 school year to distribute enough vaccine to ensure adequate coverage.
4. Decisions to re-open schools will be based upon gradual relaxing of State and local stay-home orders, or flexibility granted in the order(s). Modification of those orders will be based on:
 - a. The ability to do case finding, contact tracing, isolation and quarantine
 - b. Availability of testing

- c. Availability of personal protective equipment
 - d. Availability of cleaning supplies and disinfectants
 - e. Duration of decline or stability of cases
 - f. Surge capacity in local hospitals
5. Counties, districts and schools across California will have different timelines and approaches for reopening due to local variations in the virus spread, rate of infection and local needs and resources.
 6. Reductions in school funding are likely as state revenues decline due to the economic impact of the pandemic; the impact is likely to be long term as it will take time for the economy to recover. Issues that will be discussed in the development of the 2020-21 State Budget include adequate funding for increased costs associated with the response to the pandemic and alternative methods for funding (e.g. enrollment based rather than ADA based) while some to many students continue to use distance learning. CCSESA will track school funding issues, advocate per legislative priorities, and keep county superintendents and business officials informed of emerging legislative actions.
 7. With the sharp rise in unemployment as a result of the virus, more students will qualify for school nutrition programs and these programs will provide eligible students with a significant portion of their food each school day. Schools that continue to use distance learning and/or a hybrid approach and schools with students on self-isolation due to their or a family member's exposure or illness will need to continue to provide students access to meals when they are not on campus.
 8. In-person school attendance will likely be less than before the pandemic for a variety of reasons, including:
 - a. Public health recommendations for children with chronic health issues (e.g. diabetes and asthma) to continue to shelter in place
 - b. Families may relocate due to unemployment and/or illness or death of one or more family member
 - c. Families may choose to enroll their children in schools that operate via distance learning
 - d. COVID-19 may cause more absences than schools have in a typical year
 9. Staff members who are 65 and over as well as children and staff of any age with underlying health conditions (e.g. high blood pressure, chronic lung disease, diabetes, obesity, asthma, and those whose immune system is compromised such as by chemotherapy for cancer and other conditions requiring such therapy) will continue to be especially vulnerable and may be advised or choose to stay at home.
 10. When schools are allowed to reopen, operations will need to be modified to address COVID-19 in areas such as, but not necessarily limited to:
 - a. Development of criteria/plan for closing school again if necessary
 - b. Updated/accessible site-specific protection plan
 - c. Campus access
 - d. School cleaning/disinfecting and other health/safety practices
 - e. Protective equipment
 - f. Physical distancing
 - g. Staff and labor issues
 - h. Mental/emotional support for students/staff
 - i. Communications with parents/students, employees and the community
 11. Effects from COVID-19, including fear, isolation, and/or sorrow, may cause students and staff to need more social/emotional support than was provided prior to the pandemic.

12. Expectations regarding student learning outcomes in the 2019-20 year will need to be re-examined going into the 2020-21 school year and COEs will be involved in assisting their LEAs in addressing academic needs and identifying resources to meet those needs.
13. Consistent with direction from the CCSESA Board, CCSESA will support COEs by advocating for waivers, funding, and/or state and federal policies changes needed to provide COEs, districts and schools with the resources, guidance and flexibility they need to meet educational goals while responding to the pandemic.

California's Response to the COVID-19 Pandemic

California Governor Newsom issued a statewide stay-at-home order on March 19, 2020. On April 14, Governor Newsom outlined six indicators for the state to consider when modifying the stay-at-home order. They include:

- 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 a stay-at-home order

On April 28, the Governor also announced four stages California would use to gradually reopen. California is now in Stage 2, where gradual reopening with modifications can occur for retail (curbside only), related logistics and manufacturing, office workplaces, limited personal services, outdoor museums, childcare and essential businesses. Some counties have applied for a variation in Stage 2. Some communities may move through Stage 2 faster if they are able to show greater progress. Counties that have met the readiness criteria and worked with the California Department of Public Health can gain state authorization to open more workplaces. See <https://covid19.ca.gov/roadmap/> and <https://covid19.ca.gov/roadmap-counties/> for more information.

California has issued steps every business should take when they are permitted to open to reduce the risk of COVID-19 and create a safer environment for workers and customers. Businesses may use effective alternative or innovative methods to build upon the guidelines. Before reopening, all facilities **must:**

1. Perform a detailed risk assessment and develop and implement a site-specific protection plan
2. Train employees on how to limit the spread of COVID-19, including how to screen themselves for symptoms and stay home if they have them
3. Implement individual control measures and screenings
4. Implement disinfecting protocols
5. Implement physical distancing guidelines

See Appendix A for links to state resources on responding to the COVID-19 pandemic.

Local Procedures to Promote the Safety of Staff and Students in School

Consistent with state and local public health guidelines, as LEAs reopen, they will do so with new practices in place to decrease the spread of the disease. State guidelines to assist in this effort will be issued in the coming weeks. The federal Center for Disease Control (CDC) has published a decision tool to assist in the decision to reopen schools that can be found at <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/schools-decision-tool.html>. Additional CDC considerations for schools are posted at <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/schools.html>. Interim guidelines for reopening child care centers are posted at <https://www.cdc.gov/coronavirus/2019-ncov/downloads/php/CDC-Activities-Initiatives-for-COVID-19-Response.pdf#page=40>.

In planning for reopening schools, counties, districts and schools will need to address:

- a. Criteria/plan for closing school again if necessary
- b. Site-specific protection plans
- c. Campus access
- d. School cleaning/disinfecting and other health/safety practices
- e. Protective equipment
- f. Physical distancing
- g. Staff and labor issues
- h. Mental/emotional support for students/staff
- i. Communication with parents/students, employees and the community

Criteria/plan for Closing School Again if Necessary

Development of defined criteria and/or a plan for closing one or more schools again if certain conditions are met will facilitate prompt action should the virus surge or cause a second wave of cases. The criteria/plan may also address the conditions under which a classroom will be sent home for isolation and/or what happens if family member(s) of a student or staff member tests positive. This criteria should be developed in conjunction with the local health jurisdiction. Further, if the criteria are met, the school district should consult with the County/City Health Officer on what actions should be taken.

Site-specific Protection Plan

Prior to reopening COEs, districts and schools will need to:

1. Conduct a work-site risk assessment
2. Update their site-based safety and/or injury and illness prevention plan to address issues specific to COVID-19 and steps that will be taken to prevent the spread of the virus, including:
 - a. Plans for training for students, staff and parents on behaviors that reduce the virus spread, including:
 - i. Staying home when they/their children when they are sick, test positive for COVID-19, or had close contact with someone with COVID-19

- ii. Frequent handwashing
 - iii. Coughing and sneezing etiquette
 - iv. Keeping hands away from the face
 - v. Using face coverings
 - vi. Maintaining physical distancing
 - vii. Following [CDC guidelines](#) on when to return to school if they/their children were sick or in close contact with someone with COVID-19
- b. The role the school will play in alerting the local health department of COVID-19 cases and in contact tracing in collaboration with the local health department
3. Make the plan accessible to parents and employees

Involving staff, parents and the community in the development of the updated plan, including new procedures to prevent spread of the virus, can help develop understanding of, and support for, the plan and new procedures. As with developing district plans, the local health jurisdiction can assist with developing site-specific plans.

Campus Access

Measures to prevent the spread of the virus will include developing policies regarding access to school campuses and district/county facilities. Best practice is to establish policies and practices that primarily restrict access to students and staff who are required to be on campus that day and to plan how access points to enter and leave school will be used to limit student and staff exposure to large groups of people. Encourage potential visitors to use virtual means for business with the school whenever possible. Establish protocols to address how and when parents and other individuals (e.g. office delivery and/or warehouse staff) will have access and continue to use a single point of entry for these visitors.

Use of the campus for community events will likely be governed by state and/or local orders prohibiting large gatherings. Once applicable order(s) are relaxed, determine when and how facilities will be made available for joint use and/or rentals by community groups. Consider the cleaning/disinfecting that will need to be completed before students and staff can use the facilities following their joint use or rental.

School Cleaning/disinfecting and Other Health/Safety Practices

COEs can help ease parent and community concerns by encouraging LEAs in their county to adopt the same or similar procedures for reducing the spread of COVID-19. Those procedures include:

- Requiring anyone (student and staff) with COVID-19 symptoms to stay home and to remain at home and follow care instructions from their healthcare provider and local health department until they are advised they may return to school. LEAs may want to consider developing policies that encourage sick employees and students to stay home when sick without fear of reprisal, including considering not having perfect attendance awards and providing virtual learning and telework options if feasible.
- Encouraging all students, families, and staff to take preventive actions:
 - Use “respiratory etiquette.”

- Cover cough with a tissue or sleeve. See CDC’s [Healthy Habits to Prevent Flu](#) page for multilingual posters and flyers posted at the bottom of the webpage.
 - Wash hands frequently.
 - Encourage thorough hand washing by students and staff by:
 - Educating staff, students and parents on the importance of handwashing,
 - Establishing a routine for handwashing and/or using hand sanitizer (e.g. every time they enter a room or return to their workstation, after using the restroom, after touching surfaces touched by many people), and
 - Providing adequate supplies (e.g. soap, paper towels and/or hand sanitizer with at least 60% alcohol).
- Enhancing cleaning consistent with state requirements and CDC guidance (see [Environmental Cleaning and Disinfection Recommendations](#)). Establish a daily cleaning schedule at all school sites and district offices to ensure frequent cleaning and regular disinfecting of surfaces.
- Considering the assignment of restrooms to specific classes and/or using procedures to indicate when a restroom/stall is clean or if it has been used since the last cleaning (e.g. use of red/green signs to indicate clean or dirty).
- Discourage sharing of items that are difficult to clean or disinfect. Acquire adequate supplies to minimize sharing of high-touch materials and objects (e.g. art supplies, books, learning aids)
- Implement some form of screening for illness/infection control for staff and students before they enter the school and/or upon entry onto buses. Although these practices may vary across the state depending upon local infection rates and conditions, local communities will benefit when school districts in the same cities and in neighboring communities implement consistent procedures. County offices can assist in the collaboration to develop these consistent practices.
 - Schools may use examples of screening methods in the [Centers for Disease Control and Prevention’s \(CDC\) supplemental Guidance for Child Care Programs that Remain Open](#) as a guide for screening children and [CDC’s General Business FAQs](#) for screening staff. If screenings will be done, determine how, when and where the checks/screenings will occur, and who will do the checks/screenings. If transportation drivers conduct temperature screenings, ensure emergency communication contact numbers are available to reach parents or guardians.
 - School nurses and other healthcare providers should use CDC’s [Standard- and Transmission-Based Precautions](#) when caring for sick people.
 - Establish procedures for safely transporting anyone who is sick home or to a healthcare facility.
 - Notify local health officials, staff, and families immediately of a possible case while maintaining confidentiality as required by applicable state and federal statutes (e.g. Family and Medical Leave Act (FMLA), the Americans with Disabilities Act (ADA)).
 - Close off areas used by a sick person and do not use it again before cleaning and disinfection.

Refer to [CDC Guidance for Administrators of K-12 Schools and Child Care Programs](#) additional information.

Prior to reopening:

- Inspect all buildings, facilities, equipment, materials, etc. and determine status and needs for resuming and maintaining operations. Maintain records on what needs to be done prior to occupancy and the ongoing maintenance that is done after reopening.
- Consider acquiring handwashing stations for distribution across various campus locations (e.g. playground and common areas) to provide easy access without students and staff having to wait in long lines to wash their hands and/or touchless soap dispensers for all sinks to be used for handwashing; touchless or foot pedal trash cans if they are not already in use; touchless hand sanitizer dispensers; and no-contact thermometers.
- Obtain the necessary cleaning supplies, hand sanitizer with at least 60% alcohol and face covering; identify new vendors for these supplies if necessary. Use cleaning products approved for use against COVID-19 on the [Environmental Protection Agency \(EPA\)-approved list](#) and follow product instructions and Cal/OSHA requirements.
- Clean facility per CDC guidelines.
- Change air conditioning/heater filters. Thoroughly ventilate the facility.
- Consider posting the CDC posters ([hand washing](#), [cover while sneezing/coughing](#)) in classrooms and common areas.
- Consider installing sneeze guards in high traffic areas, especially school offices, the cafeteria and the nurse's office.
- Consider installing plastic flexible screens between bathroom sinks, especially when they are not six feet apart.
- Prepare an isolation area within the school or district building for use in the event a student or staff member becomes ill while at the school/district.
- Inspect and clean buses.

After reopening:

- Modify maintenance staff cleaning routines to provide for disinfecting of surfaces touched by multiple people during the day (work areas, counters, restrooms, doorknobs, desks, and stair railings and other "high-touch" surfaces) several times a day.
- Clean classrooms, restrooms, all hallways, common areas, and the outside of lockers daily per CDC guidelines.
- Ensure restrooms stay functional and stocked with soap and toilet paper.
- When safe to do so, leave doors open or ajar so that students and staff do not have to touch doorknobs.
- Implement routines for handwashing/using hand sanitizer at regular intervals.
- Provide hand sanitizer in each classroom that does not have access to soap and water.
- Discontinue use of shared food and beverage equipment in employee breakrooms.
- Provide adequate supplies within easy reach, including tissues and no-touch or foot-pedal trash cans.

- Increase circulation of outdoor air as much as possible by opening windows and doors when safe to do so.
- If students or staff become ill at school, have the individual use the isolation area until transportation can be arranged. Have a supply of masks available and require the ill person to use the mask while present.
 - If an illness occurs and the local health jurisdiction is conducting contact tracing, identify possible contacts and notify the local health jurisdiction.
- Clean and disinfect buses after each route.

Protective Equipment

- Provide guidance as to when staff and students are required or encouraged to wear face coverings. Address students who remain in the same classroom all day and those who move between classrooms. Teach and reinforce the use of face coverings consistent with the guidance.
- Prioritize the provision and use of face masks to staff based upon risks associated with tasks being completed (e.g. custodians cleaning restrooms and/or maintaining plumbing, nurses, cafeteria workers).
- Consistent with public health guidelines, develop job-specific guidance/requirements for glove use, protective eyewear, and gowns, such as requiring maintenance staff to wear gloves when cleaning or repairing restrooms, and requiring glove use, protective eyewear and gowns when assisting those who become ill while at school.

Practices for Physical Distancing

Implementing physical distancing in schools will require advance planning as it will involve examining every setting, transition and activity in the school day to determine what restructuring is needed and how that will be done to maintain six feet of separation. It will also involve teaching students to maintain physical distancing and developing effective ways to remind students and gain their compliance. Physical distancing options at school include:

- Re-arranging desks/tables in classrooms to be at least six feet apart, facing the same direction and assigning only one student per desk/table.
- Implementing changes in the daily/weekly school schedule to decrease class size so that students and the teacher can maintain a physical distance of six feet at all times. Examples include:
 - Having some students come to school Mondays and Wednesdays and other students Tuesday and Thursdays. On days students do not come to school, consider having them virtually attend part of the day using technology if possible.
 - Having students attend school in shifts, such as an early and a late shift (Note: If this option is under consideration, be sure to consider the time that will be needed between shifts to provide sufficient time clean/disinfect after each shift; stagger student exit and entry times, and screen incoming students).

- Having some grades attend school in person and other grades attend via distance learning.
- Having certain students (e.g. students who do not have access to distance learning from home and struggling students) attend school on campus and have the remaining students attend via distance learning.
- Having students attend classes that cannot be conducted remotely, such as some career technical education courses.
- Having students with underlying conditions and those whose parents prefer to keep their children at home attend school via distance learning.
- Staggering times when students and staff are moving outside their classrooms/work areas to reduce the number of potential contacts and require students to stay six feet apart in when transitioning from one space to another.
- Holding classes in larger rooms such as the gym, library or cafeteria and space students at least six feet apart.
- Postponing high-contact activities/classes (e.g. certain PE activities, field trips, choir, high-contact after school activities such as football) and restructuring athletic, performing arts and club activities to keep students engaged while physically distant.
- In any locations where students need to line up, placing markers on the pavement to show where students stand to maintain a distance of six feet in a single line and where lines form so that lines are at least six feet apart.
- Holding staff meetings virtually.

To limit student exposure to many individuals during the day, consider:

- Delivering meals to classrooms, the specific area in the campus designated for each class, or in kiosks near locations where students will be eating.
- Having students eat lunch and snacks in the classroom or outside in designated areas for each class so that students do not mix.
- Using block schedules or rotating teachers through the classroom rather than having students change classrooms.
- Supervising boarding of and seating in buses to ensure physical distancing and consider assigning seats. Board students in the order in which they boarded in the morning.

If not being used as individual classrooms, consider keeping libraries, gyms, playgrounds, and other common areas off-limits for regular use unless they can be sanitized between groups.

Physical distancing options on school buses involves decreasing the number of students on individual buses so that students maintain a distance of six feet apart. Teach students how to sit on the bus to maintain that distance and, if possible, mark buses or block seats to assist in maintaining that distance.

Staff and Labor Issues

Having staff able and ready to return to work is a prerequisite for reopening schools. Counties and districts need continuous and ongoing communication with staff and bargaining units to facilitate schools reopening and to respond to employee questions, concerns and/or suggestions about safety as

well as other issues that may be impacted by the virus, such as how professional development needs will be addressed when large gatherings are restricted or prohibited. Collaboration with bargaining units in the development of memorandum of understandings (MOU) to address changes in the work environment as a result of COVID-19 can help explore and resolve areas needing attention.

It is critical that employees needing to self-isolate because of COVID-19 are encouraged to stay at home to prevent further infection. Information on government programs supporting employee sick leave and workers compensation is available at <https://www.dir.ca.gov/dlse/Comparison-COVID-19-Paid-Leave.html>.

COEs can dialogue with their districts to determine if districts need assistance compiling information about which staff members are ready to return to work; some counties may assist with an Employee Hotline Phone Bank or website so employees can report their status (name; position; work location; health status; return to work date).

County offices can also help district Human Resources and/or administrative staff collaborate on how they will track and report each staff category that can be used to help determine when school can reopen and the timeline and staffing threshold for reopening.

Finding substitutes may be a challenge for COEs, districts and schools as some substitutes may no longer be available to work. Human resources (HR) staff may find it beneficial to collaborate with other HR staff on what procedures will be used when there are insufficient substitutes to meet the need in the event many staff members are home sick or quarantined at home because of a recent exposure.

Some staff members will meet the criteria for vulnerable individuals. Additional accommodations for these individuals could include teaching classes remotely, utilizing a larger classroom where physical distancing can be maintained, or giving an option not to return until the risks are reduced.

Mental/Emotional Support

COEs, districts and schools will need to determine how they will address and support the mental/emotional well-being of students and staff. Some students and/or staff may be anxious about their risk when going back to school, some may have experienced trauma during the time school was closed such as the loss of one or more family or friends, domestic violence, child abuse, etc. In addition, some families may have experienced job loss and be anxious about their futures. Mental/emotional support during re-entry can help staff and students, especially those who are struggling to adjust to being back at school.

Many county offices of education have expertise in supporting the well-being of students and staff and can provide guidance to their LEAs. For example, LEAs could be encouraged to:

- Plan for a positive, supportive re-entry to school focused on helping students with the transition and adjusting to changes in the school structure/schedule.
- Notify teachers, staff, students, and parents about support services available.
- Post information on school district websites and on social media for parents regarding helping children cope with the virus and any tragedies or loss resulting from it.
- Help principals and teachers understand how to:
 - Quickly identify students, families or staff members experiencing problems adjusting.
 - Provide personal supports to those struggling with minor adjustment problems.

- Provide specialized assistance and referrals when necessary for those who experience major challenges.
- Activate mental health/student support service team (school counselor, community Mental Health Partners, Community School Community Treatment (CSCT) staff members) to plan for students and staff, in conjunction with local mental health services staff, including post-traumatic stress syndrome counseling.
- Share information about availability of counseling services with staff and families. For example, HR could provide staff with information about access to Employee Assistance Programs that can provide virtual counseling services. Students who have experienced loss or trauma during the COVID-19 pandemic will need access to counseling services with follow-up care. Schools may have site-based counseling services for students who have experienced loss or trauma or be able to provide information about community-based counseling services.

Communications with Parents/Students, Employees and the Community

Pro-active communications for all stakeholders that shares information about reopening schools, identifies concerns, and addresses these concerns can help prepare students and their families for return to schools. COEs can coordinate with their local emergency management agency, the local health department and other local officials (e.g. mental health, Fire Marshal, law enforcement, public transportation, etc.) to identify and develop communications structures and communications for students/parents, staff and community members related to COVID-19 and schools. COE Public Information Officers can work with county Joint Information Centers on communications when those centers are established.

COEs and local public health officials can communicate with parents and staff information about contact tracing and guidelines for families about sending students to school and when to keep them at home. COEs and local public health officials can also develop a common understanding of:

- What schools will do if they have one or more positive COVID-19 case(s) on campus and/or if a student or staff member has a family member that tests positive.
- The legal responsibilities/privacy rights for communicating information about cases of the virus on school campuses.

COEs can assist LEAs with consistent messaging to parents and the community and encourage these LEAs to:

- Share their timeline for opening with news media, via social media, on the district/school website, and on recordings on the LEAs main phone line.
- Revise/update the school year calendar and share with staff, parents, and news media.
- Share with staff and parents information about new practices and procedures for cleaning, hand washing, etc. prior to school opening.
- Develop and send a communication targeted to vulnerable members of the school community.
- Share information with families about sending students to school and when to keep them home.

Appendix A: California COVID-19 Resources

COVID-19 Response Main Page: <https://covid19.ca.gov/>

Resilience Roadmap: <https://covid19.ca.gov/roadmap/>

State Report Card: Criteria for Moving to Stage 2 on the Resilience Roadmap:
<https://www.gov.ca.gov/wp-content/uploads/2020/05/5.4-Report-Card-on-California-Resilience-Roadmap.pdf>

State Guidance for Offices: <https://covid19.ca.gov/pdf/guidance-office-workspaces.pdf>

Emotional Health resources: <https://covid19.ca.gov/resources-for-emotional-support-and-well-being/>

Cal/OSHA Guidance on Requirements to Protect Workers from Coronavirus:
<https://www.dir.ca.gov/dosh/coronavirus/Health-Care-General-Industry.html>

California Department of Education COVID page: <https://www.cde.ca.gov/ls/he/hn/coronavirus.asp>

**Appendix B: Summary of the White House Guidelines for Opening Up America Again
for use by School Officials**

The *White House Guidelines for Opening Up America Again* issued on April 16, 2020, can inform decisions about reopening states and local jurisdictions. Excerpts of those guidelines are included in this appendix to facilitate their review and use by county superintendents, especially as it relates to recommendations for reduction in the number and rate of infections and the status of schools in each stage.

The guidelines include a three-phased approach based on the advice of public health experts for states and local communities to reopen their economies and get people back to work. The guidelines recognize that state and local officials may choose to tailor the application of the criteria included in the guidelines to local circumstances (e.g., metropolitan areas that have suffered severe COVID outbreaks, rural and suburban areas where outbreaks have not occurred or have been mild). Table 1 includes the phases, criteria to begin each phase, the guidance for individuals and the status of schools. Refer to the guidelines (<https://www.whitehouse.gov/openingamerica/#criteria>) for additional information and information regarding non-school employers.

Table 1: White House Phases for Reopening

Phase	Criteria to Begin Phase	Guidance for Individuals	Schools
1	<p>Downward trajectory of influenza-like illnesses and COVID-like cases reported within a 14-day period</p> <p>Downward trajectory of documented cases and positive tests as a percent of total tests within a 14-day period</p> <p>Hospitals can treat all patients without crisis care and a robust testing program is in place for at-risk healthcare workers</p>	<p>All vulnerable individuals* continue to shelter in place.</p> <p>When in public, other individuals practice social distancing.</p> <p>Avoid groups of more than 10 people in circumstances that do not readily allow for appropriate physical distancing.</p> <p>Minimize nonessential travel.</p>	<p>Schools closed.</p> <p>Vulnerable populations shelter in place.</p>
2	<p>Downward trajectory of influenza-like illnesses and COVID-like cases reported within a 28-day period</p> <p>Downward trajectory of documented cases and positive tests as a percent of total tests within a 28-day period</p> <p>Hospitals can treat all patients without crisis care and a robust testing program is in place for at-risk healthcare workers</p>	<p>All vulnerable individuals continue to shelter in place.</p> <p>When in public, all individuals should maximize physical distance from others. Social settings of more than 50 people should be avoided unless precautionary measures are observed.</p> <p>Nonessential travel can resume.</p>	<p>Schools open.</p>

Phase	Criteria to Begin Phase	Guidance for Individuals	Schools
3	<p>Downward trajectory of influenza-like illnesses and COVID-like cases reported within a 42-day period.</p> <p>Downward trajectory of documented cases and positive tests as a percent of total tests within a 42-day period.</p> <p>Hospitals can treat all patients without crisis care and a robust testing program is in place for at-risk healthcare workers.</p>	<p>Vulnerable individuals can resume public interactions, but should practice physical distancing, minimizing exposure to social settings where distancing may not be practical, unless precautionary measures are observed.</p> <p>Low risk populations should consider minimizing time spent in crowded environments.</p>	Schools open.

* Vulnerable individuals include the elderly and individuals with serious underlying health conditions, including high blood pressure, chronic lung disease, diabetes, obesity, asthma, and those whose immune system is compromised such as by chemotherapy for cancer and other conditions requiring such therapy.