

COVID-19

CRIPICS

CSP

CPP

# 2022

## CORE Butte Charter School

### Safe Return to In-Person Instruction and Continuity of Services (SRIPICS) / COVID-19 Safety Plan (CSP)

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# COVID-19 School Guidance Checklist

January 14, 2021

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CALIFORNIA  
**ALL**

Your Actions  
Save Lives



Date: \_\_\_\_\_

# 2021 COVID-19 School Guidance Checklist

Name of Local Educational Agency or Equivalent: \_\_\_\_\_

Number of schools: \_\_\_\_\_

Enrollment: \_\_\_\_\_

Superintendent (or equivalent) Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

\_\_\_\_\_

Email: \_\_\_\_\_

Date of proposed reopening: \_\_\_\_\_

County: \_\_\_\_\_

Grade Level (check all that apply)

Current Tier: \_\_\_\_\_  
(please indicate Purple, Red, Orange or Yellow)

TK  2<sup>nd</sup>  5<sup>th</sup>  8<sup>th</sup>  11<sup>th</sup>

K  3<sup>rd</sup>  6<sup>th</sup>  9<sup>th</sup>  12<sup>th</sup>

1<sup>st</sup>  4<sup>th</sup>  7<sup>th</sup>  10<sup>th</sup>

Type of LEA: \_\_\_\_\_

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**This form and any applicable attachments should be posted publicly on the website of the local educational agency (or equivalent) prior to reopening or if an LEA or equivalent has already opened for in-person instruction. For those in the Purple Tier, materials must additionally be submitted to your local health officer (LHO), local County Office of Education, and the State School Safety Team prior to reopening.**

The email address for submission to the State School Safety for All Team for LEAs in Purple Tier is:

[K12csp@cdph.ca.gov](mailto:K12csp@cdph.ca.gov)

**LEAs or equivalent in Counties with a case rate  $\geq 25/100,000$  individuals can submit materials but cannot re-open a school until the county is below 25 cases per 100,000 (adjusted rate) for 5 consecutive days.**

**For Local Educational Agencies (LEAs or equivalent) in ALL TIERS:**

I, \_\_\_\_\_, post to the website of the local educational agency (or equivalent) the COVID Safety Plan, which consists of two elements: the **COVID-19 Prevention Program (CPP)**, pursuant to CalOSHA requirements, and this **CDPH COVID-19 Guidance Checklist** and accompanying documents,

which satisfies requirements for the safe reopening of schools per CDPH [Guidance on Schools](#). For those seeking to open while in the Purple Tier, these plans have also been submitted to the local health officer (LHO) and the State School Safety Team.

I confirm that reopening plan(s) address the following, consistent with guidance from the California Department of Public Health and the local health department:

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

Please provide specific information regarding:

How many students and staff will be in each planned stable, group structure? (If planning more than one type of group, what is the minimum and maximum number of students and staff in the groups?)

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

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

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**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 for staff and students.

**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 safe and appropriate use will be promoted and incorporated into routines for staff and students.

**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.

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

Maximum: \_\_\_\_\_ feet

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

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**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 Staff:** How school officials will ensure that students and staff who have symptoms of COVID-19 or have been exposed to someone with COVID-19 will be rapidly tested and what instructions they will be given while waiting for test results. Below, please describe any planned periodic asymptomatic staff testing cadence.

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

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**Testing of Students:** How school officials will ensure that students who have symptoms of COVID-19 or have been exposed to someone with COVID-19 will be rapidly tested and what instructions they will be given while waiting for test results. Below, please describe any planned periodic asymptomatic student testing cadence.

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

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**Identification and Reporting of Cases:** At all times, reporting of confirmed positive and suspected cases in students, staff and employees will be consistent with [Reporting Requirements](#).

**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.

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

Labor Organization

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

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Parent and Community Organizations

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

Name: \_\_\_\_\_

Date: \_\_\_\_\_

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

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**For Local Educational Agencies (LEAs or equivalent) in PURPLE:**

**Local Health Officer Approval:** The Local Health Officer, for (state County) \_\_\_\_\_. County has certified and approved the CRP on this date: \_\_\_\_\_. If more than 7 business days have passed since the submission without input from the LHO, the CRP shall be deemed approved.

**Additional Resources:**

[Guidance on Schools](#)

[Safe Schools for All Hub](#)

# 2022

SECTION TWO: IIP

## **CORE Butte Charter School**

Injury and Illness Prevention Plan  
COVID-19 Addendum / Cal OSHA  
Prevention Program  
(CPP)

# Injury and Illness Prevention Plan COVID-19 Addendum / Cal OSHA Prevention Program (CPP)

California employers are required to establish and implement an Injury and Illness Prevention Program (“IIPP”) to protect employees from all worksite hazards, including infectious diseases.

CORE Butte Charter School has adopted this addendum to accommodate reopening school for in-person instruction in accordance with the Framework for Reopening K-12 Schools from the California Department of Public Health (“CDPH”). Resumption of in-person instruction presumes that the school operates in a county that has been removed from the state’s monitoring list for 14 days, but school and worksite administrators should coordinate with state and local health officials to obtain timely and accurate information about the level of disease transmission in the local community before resuming on-site work practices. Local conditions will influence the decisions that public health officials make regarding community-level strategies.

This addendum contains three parts. Part one contains background information regarding COVID-19, including known symptoms, emergency warning signs and high-risk factors. Part two provides guidelines for implementation of a COVID-19 Response Plan, which includes short-term measures to implement while COVID-19 remains endemic in states and communities. Part three contains measures to maintain a healthy workforce until herd immunity in the population is achieved or the global incidence of COVID-19 comes under control.

## **Background**

In November 2019, a novel coronavirus (SARS-CoV-2) was discovered in Wuhan, China, which was found to cause a viral respiratory illness (coronavirus disease 2019, or “COVID-19”) leading to severe injury and death in certain populations, particularly elderly persons and persons with underlying health conditions.

COVID-19 was declared a pandemic by the World Health Organization on March 11, 2020. In response to the COVID-19 Pandemic, public health officers in many states and counties ordered all individuals to stay home or at their place of residence (i.e., “Shelter in Place”), except as needed to maintain continuity of operations of certain critical infrastructure sectors. Across the nation, public schools and most other government offices and private businesses were closed in order to slow the spread of the coronavirus in the community. Many states and localities have now commenced phased reopening.

In 2020, the CDC identified the following symptoms of COVID-19, which typically appear within 2-14 days after exposure to the virus:

- Fever or chills



- Cough
- Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches
- Headache
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea

The CDC also recommends that, if a person shows any of the following emergency warning signs,\* he or she should seek emergency medical care immediately:

- Trouble breathing
- Persistent pain or pressure in the chest
- New confusion
- Inability to wake or stay awake
- Bluish lips or face

\*Please note that this is not a complete list of all possible symptoms. Anyone experiencing any other symptoms that are severe or concerning should contact a medical provider.

Certain people are at higher risk for severe illness from COVID-19, including:

- People 65 years and older
- People who live in a nursing home or long-term care facility
- People of all ages with underlying medical conditions, particularly if not well controlled, including:
  - People with chronic lung disease or moderate to severe asthma
  - People who have serious heart conditions
  - People who are immunocompromised
    - Many conditions can cause a person to be immunocompromised, including cancer treatment, smoking, bone marrow or organ transplantation, immune deficiencies, poorly controlled HIV or AIDS, and prolonged use of corticosteroids and other immune weakening medications
  - People with severe obesity (body mass index [BMI] of 40 or higher)
  - People with diabetes
  - People with chronic kidney disease undergoing dialysis
  - People with liver disease

Decisions to resume operations should be based on both the level of disease transmission in the community and the capacity to protect the safety and health of staff and students at each school site. By providing guidelines for the design of a control plan for COVID-19, part two of this addendum is intended to allow for the resumption of school by implementing measures to prevent and slow the spread of COVID-19 within the workplace.

## **COVID-19 Response Plan**

### **Authority and Responsibility**

The Executive Director or Designee has overall authority and responsibility for implementing the provisions of this CPP in our workplace. In addition, all managers and supervisors are responsible for implementing and maintaining the plan in their assigned work areas and for ensuring employees receive answers to questions about the program in a language they understand.

Before resuming normal or phased school activities after a Shelter in Place order is lifted, prepare and implement a COVID-19 preparedness, response, control and prevention plan (i.e., COVID-19 Response Plan). Federal, state, and local public health communications must be monitored to keep up with information available about COVID-19 regulations, guidance, and recommendations, to ensure that workers have access to the timeliest information.

### **1. Design, implement, update and maintain a COVID-19 Response Plan:**

The overall goal of the COVID-19 Response Plan is to decrease the spread of COVID-19 and lower the impact of the disease in the workplace. This includes the following objectives:

- Prevent and reduce transmission among employees;
- Maintain healthy school operations; and
- Maintain a healthy work environment.

All site administrators should implement and update as necessary a control plan that:

- Is specific to your workplace;
- Identifies areas and job tasks with potential exposures to COVID-19; and
- Includes control measures to eliminate or reduce such exposures.

COVID-19 Response Plans should consider that employees may be able to spread COVID-19 even if they do not show symptoms, which is a source of anxiety in the workforce, particularly among higher-risk individuals. Therefore, it is important to have discussions with workers about planned changes and seek their input. Additionally, collaboration with workers to effectively communicate important COVID-19 information.

### **2. Adjust operations to slow the spread:**

- Employees who have COVID-19 symptoms should notify their supervisor and stay home as directed.
- Sick employees should follow Butte County Health-recommended steps for self-quarantine. Employees should not return to work until the criteria to discontinue home isolation are met, in consultation with their supervisor, local health departments and healthcare providers.
- Employees who appear to have symptoms upon arrival at work or who become sick during the day should immediately be separated from other employees, students, and visitors, and sent home.
- Employees who are well but who have a sick family member at home with COVID-19 should notify their supervisor and follow Butte County Health-recommended precautions.

- If implementing in-person health checks, conduct them safely and respectfully. Protect the screener using social distancing, barrier or partition controls, or personal protective equipment (“PPE”). However, reliance on PPE alone is a less effective control and is more difficult to implement, given PPE shortages and training requirements.
- During an outbreak, complete the health checks in a way that helps maintain current social distancing guidelines (if applicable), such as providing multiple screening entries into the building.
- Follow guidance from the Equal Employment Opportunity Commission regarding confidentiality of medical records from health checks.
- To prevent stigma and discrimination in the workplace, make employee health screenings as private as possible. Do not make determinations of risk based on race or country of origin or any other protected characteristics, and be sure to maintain confidentiality of each individual’s medical status and history.

### **3. Conduct a Workplace Hazard Assessment:**

The purpose of a hazard assessment of the workplace is to identify where and how workers might be exposed to COVID-19 at work. Combinations of controls from the hierarchy of controls are used to limit the spread of COVID-19 (see Controls Table in Appendix A). These include engineering controls, workplace administrative policies, and personal protective equipment (PPE) to protect workers from the identified hazards.

- Conduct a thorough hazard assessment to determine if workplace hazards are present, or are likely to be present, and determine what type of controls are needed for specific job duties.
- When engineering and administrative controls cannot be implemented or are not fully protective:
  - Determine what PPE is needed for each workers’ specific job duties,
  - Select and provide appropriate PPE to the workers at no cost, and
  - Train their workers on its correct use.
- February 28, 2022 - Health Order from the California Department of Public Health
  - Effective March 1, 2022 , the requirement that unvaccinated individuals mask in indoor public settings will move to a strong recommendation that all persons, regardless of vaccine status, continue indoor masking.
  - Universal masking shall remain required in specified high-risk settings.
  - After March 11, 2022, the universal masking requirement for K-12 and Childcare settings will terminate. CDPH strongly recommends that individuals in these settings continue to mask in indoor settings when the universal masking requirement lifts.

### **4. Take action if an employee is suspected or confirmed to have COVID-19 infection:**

Effective January 1, 2020, employers are required to provide certain notices in response to a “notice of potential exposure to COVID-19,” in accordance with Labor Code section 6409.6. A “notice of potential exposure” means any of the following:

- (a) Notification from a public health official or licensed medical provider that an employee was exposed to a qualifying individual at the worksite;

- (b) Notification from an employee, or their emergency contact, that the employee is a qualifying individual;
- (c) Notification through the school’s testing protocol that the employee is a qualifying individual; or
- (d) Notification from a subcontracted employer that a qualifying individual was on the schoolsite.

Upon receipt of a “notice of potential exposure,” the Charter School must take the following actions within one (1) business day of the notice:

- (a) Provide a written notice to all employees who were on the premises in the same worksite<sup>1</sup> as the qualifying individual<sup>2</sup> within the infectious period<sup>3</sup> that they may have been exposed to COVID-19.<sup>4</sup>
- (b) Provide a written notice to the exclusive representative, if any, of the above employees.<sup>5</sup>
- (c) Provide all employees who may have been exposed and the exclusive representative, if any, with information regarding COVID-19-related benefits to which employees may be entitled under applicable federal, state, or local laws.
  - Information regarding COVID-19-related benefits includes, but is not limited to, workers’ compensation, and options for exposed employees, including COVID-19-related leave, Charter School sick leave, state-mandated leave, supplemental sick leave, or negotiated leave provisions, as well as anti-retaliation and antidiscrimination protections applicable to employees.
- (d) Notify all employees, and the employers of subcontracted employees and the exclusive representative, if any, on the disinfection and safety plan that the employer plans to implement and complete per the guidelines of the federal Centers for Disease Control.

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<sup>1</sup> The “worksites” does not include buildings, or floors within multistory buildings, that a qualifying individual did not enter. If the Charter School operates multiple worksites, the school must only notify employees who worked at the same worksite as the qualified individual. (Labor Code § 6409.6, subd. (d)(5).)

<sup>2</sup> A “qualifying individual” means (a) a laboratory-confirmed case of COVID-19, as defined by the State Department of Public Health; (b) a positive COVID-19 diagnosis from a licensed health care provider; (c) a COVID-19-related order to isolate provided by a public health official; (d) died due to COVID-19, in the determination of a county public health department or per inclusion in the COVID-19 statistics of a county. (Labor Code § 6409.6, subd. (d)(4).)

<sup>3</sup> The “infectious period” means the time a COVID-19-positive individual is infectious, as defined by the State Department of Public Health. (Labor Code § 6409.6, subd. (d)(2).)

<sup>4</sup> Written notice must be provided in the same manner that the Charter School ordinarily uses to communicate employment-related information. Written notice may include, but is not limited to, personal service, email, or text message if it can reasonably be anticipated to be received by the employee within one business day of sending and shall be in both English and the language understood by the majority of the employees.

<sup>5</sup> Written notice to the exclusive representative must contain the same information as required in an incident report in a Cal/OSHA Form 300 injury and illness log unless the information is inapplicable or unknown to the school. This requirement does not apply if the school’s employees do not have an exclusive representative.

Records of the above notices must be retained for a minimum of three (3) years.

Effective January 1, 2020, the school must also take the following responses in the event of a COVID-19 “outbreak,” as defined by CDPH:

- Within forty-eight (48) hours, the Executive Director or designee shall notify the county public health department of the names, number, occupation, and worksite of employees who meet the definition of a qualifying individual.<sup>6</sup>
- The Executive Director shall also report the address and NAICS code of the worksite where the qualifying individuals work.
- Additional notice will be provided of any subsequent laboratory-confirmed cases of COVID-19 at the worksite.

Specific guidelines for responding to suspected and confirmed cases of COVID-19 in schools are also released by the CDPH. In most cases, the facility will not be shut down.

Cleaning of areas, material, and equipment used by a COVID-19 case during the high-risk exposure period, and disinfection if the area, material, or equipment is indoors and will be used by another employee within 24 hours of the COVID-19 case will take place.

Follow the CDPH and CDC cleaning and disinfection recommendations:

- Clean dirty surfaces with soap and water before disinfecting them.
- To disinfect surfaces, use products that meet EPA criteria for use against SARS-Cov-2, the virus that causes COVID-19, and are appropriate for the surface.
- Always wear gloves and other PPE appropriate for the chemicals being used when you are cleaning and disinfecting.
- You may need to wear additional PPE depending on the setting and disinfectant product you are using. For each product you use, consult and follow the manufacturer’s instructions for use.

Determine which employees may have been exposed to the virus and may need to take additional precautions:

- Inform employees of their possible exposure to COVID-19 in the workplace but maintain confidentiality as required by the Americans with Disabilities Act (ADA).
- Follow the Public Health Recommendations for Community-Related Exposure and instruct potentially exposed employees to stay home for recommended quarantine period as established by local health order, telework if possible, and self-monitor for symptoms.
- Fully vaccinated employees without symptoms do not need to be tested or quarantined after close contacts with COVID-19 cases unless they have symptoms.

## **Reporting, Recordkeeping, and Access**

It is our policy to:

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<sup>6</sup> A “qualifying individual” means (a) a laboratory-confirmed case of COVID-19, as defined by the State Department of Public Health; (b) a positive COVID-19 diagnosis from a licensed health care provider; (c) a COVID-19-related order to isolate provided by a public health official; (d) died due to COVID-19, in the determination of a county public health department or per inclusion in the COVID-19 statistics of a county. (Labor Code § 6409.6, subd. (d)(4).)

- Report information about COVID-19 cases at our workplace to the local health department whenever required by law, and provide any related information requested by the local health department.
- Report immediately to Cal/OSHA any COVID-19-related serious illnesses or death, as defined under CCR Title 8 section 330(h), of an employee occurring in our place of employment or in connection with any employment.
- Maintain records of the steps taken to implement our written COVID-19 Prevention Program in accordance with CCR Title 8 section 3203(b).
- Make our written COVID-19 Prevention Program available at the workplace to employees, authorized employee representatives, and to representatives of Cal/OSHA immediately upon request.

### **Return-to-Work Criteria**

- COVID-19 cases with COVID-19 symptoms will not return to work until all the following have occurred:
  - At least 24 hours have passed since a fever of 100.4 or higher has resolved without the use of fever-reducing medications.
  - COVID-19 symptoms have improved.
  - Currently recommended quarantine term, as published by Public Health, has passed since COVID-19 symptoms first appeared.
- COVID-19 cases who tested positive but never developed COVID-19 symptoms will not return to work until a minimum of 5 days have passed since the date of specimen collection of their first positive COVID-19 test.
- A negative COVID-19 test will not be required for an employee to return to work.
- If an order to isolate or quarantine an employee is issued by a local or state health official, the employee will not return to work until the period of isolation or quarantine is completed or the order is lifted. If no period was specified, then the period will be 10 days from the time the order to isolate was effective, or 14 days from the time the order to quarantine was effective.

### **Measures to Maintain Healthy Ongoing School Operations**

- 1. Identify a workplace coordinator.** Bernadine Janke, Human Resource Officer, will be responsible for COVID-19 issues and their impact at the workplace.
  - a. That employees can report symptoms and hazards without fear of reprisal.
- 2. Protect employees at higher risk for severe illness through supportive policies and practices.** Older adults and people of any age who have serious underlying medical conditions are at higher risk for severe illness from COVID-19.
  - Provide options to telework, if available and reasonable.
  - Offer vulnerable workers duties that minimize their contact with students and other employees, if the worker agrees to this.
  - Offer flexible options such as telework to employees where available and reasonable to eliminate the need for employees living in higher transmission areas to travel to workplaces in lower transmission areas and vice versa.

3. **Communicate supportive workplace policies clearly, frequently, and via multiple methods.** Employers may need to communicate with non-English speakers in their preferred languages.
  - Train workers on how implementing any new policies to reduce the spread of COVID-19 may affect existing health and safety practices.
  - Communicate to any contractors or on-site visitors about changes that have been made to help control the spread of COVID-19. Ensure that they have the information and capability to comply with those policies.
  - Create and test communication systems that employees can use to self-report if they are sick and that you can use to notify employees of exposures and closures.
  - Use a hotline or another method for employees to voice concerns anonymously.
  
4. **Give employees and students what they need to clean their hands and cover their coughs and sneezes:**
  - Proper face coverings and PPE will be provided at the entrance to each building for any staff, student, or stakeholder who may request it.
  - Provide tissues and no-touch trash cans.
  - Provide soap and water in the workplace. If soap and water are not readily available, use alcohol-based hand sanitizer that is at least 60% alcohol. Ensure that adequate supplies are maintained.
  - Touchless hand sanitizer stations in multiple locations to encourage hand hygiene.
  - Place posters that encourage hand hygiene to help stop the spread at the entrance to your workplace and in other workplace areas where they are likely to be seen. This should include signs for non-English speakers, as needed.
  - Direct employees to visit CDC’s coughing and sneezing etiquette and clean hands webpage for more information.
  
5. **Perform routine cleaning:**
  - Incorporate the Guidance for Cleaning and Disinfecting to develop, implement, and maintain a plan to perform regular cleanings to reduce the risk of exposure to COVID-19.
  - Routinely clean and disinfect all frequently touched surfaces in the workplace, such as workstations, keyboards, telephones, handrails, and doorknobs.
    - If surfaces are dirty, clean them using a detergent or soap and water before you disinfect them in accordance with Healthy Schools Act protocols.
    - For disinfection, most common, EPA-registered, household disinfectants should be effective. A list of products that are EPA-approved for use against the virus that causes COVID-19 is available on the EPA website. Follow the manufacturer’s instructions for all cleaning and disinfection products (e.g., concentration, application method, and contact time).
  - Discourage workers from using each other’s phones, desks, offices, or other work tools and equipment, when possible.
  - Provide disposable disinfecting wipes so that employees can wipe down commonly used surfaces (e.g., doorknobs, keyboards, remote controls, desks, other work tools and equipment) before each use.

- Store and use disinfectants in a responsible and appropriate manner according to the label.
- Do not mix bleach or other cleaning and disinfection products together. This can cause fumes that could be very dangerous to breathe in.
- Advise employees to always wear gloves appropriate for the chemicals being used when they are cleaning and disinfecting and that they may need additional PPE based on the setting and product.

**6. Perform enhanced cleaning and disinfection after persons suspected/confirmed to have COVID-19 have been in the facility:**

- If a sick employee is suspected or confirmed to have COVID-19, follow the CDC cleaning and disinfection recommendations.

The Executive Director is authorized to implement changes or additions to this addendum in order to ensure compliance with new or revised orders or guidance from local, county, state or federal authorities (“Agencies”) and/or the facts of a specific circumstance, and to take any and all actions consistent with orders and guidance from the Agencies that is not specifically addressed by this policy. The Executive Director shall provide the Board with regular updates as to actions taken pursuant to this section.



## Appendix A

### Controls Table

The following table presents examples of controls to implement in the workplace. The most effective controls are those that rely on engineering solutions, followed by administrative controls, then PPE. PPE is the least effective control method and the most difficult to implement. Worksites may have to implement multiple complementary controls from these columns to effectively control the hazard.

<b>Engineering (Facilities and Equipment)</b> <ul style="list-style-type: none"><li>• Assess job hazards for feasibility of engineering controls</li><li>• Ensure ventilation and water systems operate properly</li><li>• Encourage staff to open windows and/or doors to increase air circulation</li><li>• Alter office workspaces to maintain social distancing. Examples include:<ul style="list-style-type: none"><li>○ Configure partitions as a barrier shield</li><li>○ Move electronic payment reader away from cashier in cafeteria</li><li>○ Use verbal announcements, signage, and visual cues to promote social distancing</li><li>○ Remove/rearrange furniture</li></ul></li></ul>
<b>Administrative</b>
<b>Management and Communications</b> <ul style="list-style-type: none"><li>• Monitor state and local public health communications about COVID-19</li><li>• Require students who are ill to stay home</li><li>• Encourage sick workers to report symptoms, stay home, and follow CDC guidance</li><li>• Develop strategies to:<ul style="list-style-type: none"><li>○ communicate with staff</li><li>○ manage staff concerns</li></ul></li><li>• Remind staff of available support services</li><li>• Communicate to partners, suppliers, other contractors on policies and practices</li><li>• Encourage social distancing and the use of cloth face coverings (if appropriate) in the workplace</li><li>• Use technology to promote social distancing (e.g., telework and virtual meetings)</li><li>• Cancel group events</li><li>• Close/limit use of shared spaces</li><li>• Consider policies that encourage flexible sick leave and alternative work schedules.</li><li>• Schedule stocking during off-peak hours</li></ul>
<b>Cleaning and Disinfection</b> <ul style="list-style-type: none"><li>• Clean and disinfect frequently touched surfaces, (e.g., counters, shelving, displays)</li><li>• Provide employees with disposable disinfectant wipes, cleaner, or sprays that are effective against the virus that causes COVID-19</li></ul>
<b>Training</b> <p>Provide employees with training on:</p> <ul style="list-style-type: none"><li>• Symptoms, emergency warning signs and high-factors for COVID-19</li><li>• Policies to reduce the spread of COVID-19</li><li>• General hygiene</li><li>• Cleaning and disinfection</li><li>• Cloth face covers</li><li>• Social distancing</li></ul>

- Use of PPE
- Safe work practices
- Stress management

**Personal Protective Equipment (PPE)**

- Conduct workplace hazard assessment
- Determine what PPE is needed for their workers' specific job duties based on hazards and other controls present
- Select and provide appropriate PPE to the workers at no cost, and train employees in the use of the PPE.

# 2022

COVID-19 RESPONSE PLAN

# CORE Butte Charter School

INFORMATION FOR CORE BUTTE COMMUNITY

*Per the Federal Government it is required to post California's COVID-19 Safety Measures.*

## **A) CORE Butte Intention**

The health, safety and well-being of CORE Butte students, staff and community are of the utmost importance. The school has dedicated endless hours to developing high quality decisions based upon the most recent state and federal guidelines. This plan is constructed with the purpose to slow the spread of respiratory diseases, including COVID-19, and to establish continuity for student learning during the different stages CORE Butte will go through while reopening. This plan is fluid and intended to change as the state of Butte County changes.

## **B) Guidance**

CORE Butte is dedicated to the health and safety of our students, staff, and families. As such, the information used to determine the reopening and sustained operation of CORE Butte's resource centers during the COVID-19 pandemic, is derived from the following sources:

- Center for Disease Control (CDC)
- California Department of Public Health (CDPH)
- State of California, Office of the Governor
- State of California, Office of The Superintendent of Public Instruction
- California Industry Guidance for Schools
- California Department of Education (CDE)
- Special Education Local Plan Area (SELPA)
- Butte County Office of Education
- Butte County Public Health
- CORE Butte's Legal Council: Young, Minney, and Corr

This information is regularly reviewed and updated. CORE Butte reviews all changes and guidance regularly. As necessary, plans are amended to meet current guidance.

## **C) Essential Work and Definitions**

For the purpose of this document, several definitions are included.

1. *School(s) or Resource Center*: is in reference to CORE Butte Charter School and the Chico buildings
2. *Essential*: is any business or activity designated by the State Public Health Officer as "Essential Critical Infrastructure Workers" as defined in [https://covid19.ca.gov/img/Essential\\_CriticalInfrastructureWorkers.pdf](https://covid19.ca.gov/img/Essential_CriticalInfrastructureWorkers.pdf) and

referenced in [Executive Order N-33-20](#) issued by the Governor of the State of California. Schools are considered essential, therefore all school staff are also considered essential.

3. *Essential Work*: tasks or activities critical to the operation of CORE Butte that must be conducted or completed in person. These tasks cannot be completed remotely or virtually nor be placed on hold without having a significant impact on CORE Butte students, staff, community, or the school as a whole.
4. *Gathering*: is any group or convening that brings together members of more than one household for both instructional and non-instructional services.
5. *Physical Distancing*: If applicable, maintaining a three to six foot separation from all people who are not in your immediate household, are not first responders or medical providers, and are not employees of CORE Butte.
6. *Face Covering(s)*: all students, staff, and members of the public are recommended to wear a face covering indoors at the resource center. A face covering is defined as a double layer of material that covers the nose and mouth. A face covering may be made of cotton, linen, silk or any other fabric.
7. *Safety Protocols*: may include the use of physical distancing if applicable, wearing masks, outdoor or well ventilated areas, and proper hygiene.
8. *Reopened Business(es)*: a business that is not an essential business and has reopened in accordance with state and local guidelines for operations.
9. *CORE Butte Service Area*: CORE Butte is able to serve students from Butte County and all contiguous counties. These include:
  - a. Butte
  - b. Tehama
  - c. Plumas
  - d. Glenn
  - e. Colusa
  - f. Sutter
  - g. Yuba

## **D) Safety Measures** - Public Health Order June 30, 2022

<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/K-12-Guidance-2022-23-School-Year.aspx>

### **1. Mitigation Strategies**

#### **a. Staying Up to Date on Vaccinations**

Vaccinations prevent illness by working with the body's natural defenses to help safely develop immunity to disease. Not only do vaccinations provide individual-level

protection, but high vaccination coverage reduces the burden of disease in schools and communities and may help protect individuals who are not vaccinated or those who may not develop a strong immune response from vaccination.

1. Recommended Actions:

- a. California strongly recommends that all eligible individuals [get vaccinated against COVID-19](#) and [remain up-to-date](#) to protect oneself and reduce transmission of the virus.
- b. Additionally, children have fallen behind on receiving other vaccines over the course of pandemic, placing them and their communities at increased risk of falling ill from other vaccine-preventable illnesses. Schools should review statutory requirements for vaccination requirements for entry into K–12 schools and visit [Shots for School](#) for information.

### **b. Optimizing Indoor Air Quality**

The risk of getting COVID-19 is greater in indoor settings with poor air quality. Effective ventilation and filtration can curb the spread of COVID-19 and other infectious diseases. It may also protect students and staff from exposure to wildfire smoke and other airborne allergens and pollutants.

1. Recommended Actions:

- a. Follow [CDPH recommendations to improve indoor air quality](#) to mitigate against COVID-19 in K–12 schools. Facility maintenance staff may also review [technical considerations](#) (PDF).
- b. In circumstances where outdoor air quality is poor (such as from wildfire smoke), schools are encouraged to confer with local health officials to determine the best approach forward. Considerations include access to the following:
  - air filtration strategies that do not rely on outdoor air sources (e.g., [portable air cleaners](#));
  - higher quality facemasks (e.g., N95, KN95, or KF94 respirators);
  - alternative spaces with better air quality to host in-person learning
  - alternative ways to commute to/from school; and
  - local COVID-19 epidemiologic factors (i.e., vaccination coverage status, community case rates).

For more information, see resources and guidance from the [California Department of Education](#) and the [California Air Resources Board](#).

### **c. Using Facemasks**

Masks, particularly [high-quality and well-fitting masks](#) (PDF), remain highly effective, inexpensive, and dynamic tools to protect oneself and mitigate transmission of COVID-19 and other respiratory pathogens.

1. Required Actions:

- a. No person can be prevented from wearing a mask as a condition of participation in an activity or entry into a school, unless wearing a mask would pose a safety hazard (e.g., watersports).
- b. Schools must develop and implement local protocols to provide masks to students who inadvertently fail to bring a face covering to school and desire to use one.

2. Recommended Actions:

- a. Unless otherwise directed by local health departments or local educational agencies, students and staff should follow [CDPH masking guidance for the general public](#), as well as masking guidance for specific situations referenced below (e.g., when having symptoms, being infected, or exposed).

**d. Getting Tested for COVID-19 - [CDPH Testing Framework for K12 Schools](#)**

The following are recommended practices for California districts, schools, and county offices of education:

- Identify a COVID Testing Point of Contact to facilitate communication and coordination with the CA Testing Task Force along with other relevant agencies or organizations that oversee school operations.
- Review and reference current testing recommendations provided in the CDPH K-12 School COVID Guidance and any additional recommendations or requirements provided by the Local Health Jurisdiction.
- Maintain situational awareness of the testing resources and programs offered by the CA Testing Task Force and monitor availability of pre-positioned testing resources housed with a County Office of Education or Local Health Jurisdiction for rapid distribution to schools.
- Monitor the CDC's COVID Community Data Tracker as a method of identifying when to increase or reestablish school testing operations.
- Communicate any questions, concerns, or additional operational testing resources/needs to the CA Testing Task Force at [schooltesting@cdph.ca.gov](mailto:schooltesting@cdph.ca.gov)

The following list describes operational considerations for COVID-19 testing for K-12 schools:

- California is currently offering direct ordering of COVID-19 over-the-counter (OTC) tests to schools. Schools may use OTC tests to supplant on-site testing in many situations. Such efforts should be paired with educational materials to facilitate proper OTC use, particularly in communities with limited English proficiency and/or lower health literacy.
- California also offers COVID-19 OTC tests to all county offices of education (COEs) for use by public and private school students and staff for return from various prolonged school holiday break testing, such as summer and winter

breaks. California Department of Public Health (CDPH) has communicated with COEs about a 2022-2023 Winter Break distribution; for more information, please contact your local COE or email [schooltesting@cdph.ca.gov](mailto:schooltesting@cdph.ca.gov).

- CDPH recommends that antigen tests be considered the primary option for detecting COVID-19 in schools, rather than PCR tests. Both the professional, on-site antigen tests as well as the OTC at-home antigen tests have been effective in identifying persons who have infectious levels of all known variants of SARS-CoV-2. PCR tests are highly sensitive, but their utility is greatest as a confirmatory test in appropriate situations and/or in clinical settings. If you are currently participating in a CDPH school-based PCR testing program, please email [schooltesting@cdph.ca.gov](mailto:schooltesting@cdph.ca.gov) for more information about transitioning to an antigen testing program, and to learn more about available resources.
- CDPH will continue to support professional on-site antigen testing programs in the 2022-2023 school year. However, the volume of anticipated on-site testing is likely to decrease with the increased availability and ease of OTC tests. We anticipate the workload for on-site testing to substantially decrease for the 2022-2023 school year as OTC testing will often meet testing needs. Thus, state support for school-based testing staff (via End-to-End vendors) will be reduced. For more information, please email [schooltesting@cdph.ca.gov](mailto:schooltesting@cdph.ca.gov).

**PCR or other molecular testing is recommended in the following limited situations in the school setting:**

- People at high risk for hospitalization or death from COVID-19\* benefit from early treatment and should have an immediate PCR (or other molecular) test and repeat an antigen test (at-home tests are acceptable) in 24 hours if the PCR result has not returned (Updated Testing Guidance). Sometimes people with COVID-19 have a negative antigen test in the first days of symptoms. PCR (or other molecular tests) may detect the virus earlier than an antigen test. For low-risk people, repeat an antigen test (at-home tests are acceptable) in 24-48 hours. Individuals may consider repeat testing every 24-48 hours until a positive test is returned or until symptoms improve.
- When a participant has ambiguous or invalid antigen test results, even on a repeat test, schools can consider also repeating an antigen test in 24-48 hours as an alternative.

These updates and anticipated changes are based on current scientific knowledge and anticipated trends. The framework is subject to change. As noted in the SMARTER plan, COVID-19 trends can shift rapidly and California's response to conditions in schools must remain nimble, adaptive, and responsive to dynamic challenges to keep students and staff safe.

Preliminary Testing Framework for K-12 Schools for the 2022–2023 School Year originally published on May 27, 2022.



### **e. Maintaining Clean Hands**

Hand hygiene can prevent the spread of infectious diseases, including COVID-19.

#### 1. Recommended Actions:

- a. Schools should teach and reinforce proper [handwashing](#) to lower the risk of spreading viruses, including the virus that causes COVID-19.
- b. Schools should ensure adequate supplies to support hand hygiene behaviors, including soap, tissues, no-touch trashcans, and hand sanitizers with at least 60 percent alcohol for staff and children who can safely use hand sanitizer. Hand sanitizers should be stored up, away, and out of sight of younger children and should be used only with adult supervision for children ages 5 years and younger.
- c. Schools should teach and reinforce covering [coughs and sneezes](#) to help keep individuals from getting and spreading infectious diseases, including COVID-19.

### **f. Managing Individuals with Symptoms:**

Staying home when sick can lower the risk of spreading infectious diseases, including COVID-19, to other people.

#### 1. Recommended Actions:

- a. K-12 schools are encouraged to develop standard criteria for managing students who develop symptoms of infectious diseases, including COVID-19. In most situations, any student who develops new, unexplained symptoms should not return to campus until it is clear that symptoms are mild and improving or are due to a non-infectious cause (e.g., allergies). This includes waiting until 24 hours have passed since resolution of fever without the use of fever-reducing medications.
- b. Additionally, if [symptoms](#) are concerning for COVID-19, it is strongly recommended that students wear a mask and get tested immediately. Students should also follow [CDPH recommendations](#) for retesting and/or isolating if results are positive.
- c. Schools should avoid policies that incentivize coming to school while sick.

### **g. Reporting COVID-19 disease burden to local health authorities:**

Notifying local health authorities of the disease burden in schools can expedite deployment of additional strategies and resources to manage illness and contain transmission and outbreaks.

#### 1. Required Actions:

- a. K-12 schools should refer to California Code of Regulations (CCR) Title 17, [§2500](#) and [§2508](#) for reporting requirements. Note that 17 CCR §2500 has been temporarily modified by the [State Public Health Officer Order of February 10th, 2022](#).
- b. As workplaces, schools are subject to COVID-19 workplace outbreak reporting requirements stipulated in [AB 685](#) and [Cal/OSHA Emergency Temporary Standards](#).

#### **h. Managing Students Diagnosed with COVID-19:**

Prompt management of students with COVID-19 can prevent further spread and, in some cases, allow for early treatment.

1. Recommended Action:

- a. Students diagnosed with COVID-19 should follow recommendations listed in [Table 1 \(Persons with COVID-19\)](#) of CDPH's guidance for the general public, including staying home for at least 5 days and wearing a well-fitting mask around others for a total of 10 days, especially in indoor settings.

#### **i. Managing Students Exposed to COVID-19:**

Prompt notification to students and families regarding exposure to infectious diseases, including COVID-19, can allow for rapid testing, early treatment, and prevention of further spread.

1. Recommended Actions:

- a. It is recommended that families notify schools if their child has COVID-19 and was on school grounds during their [infectious period](#), and that schools in turn notify students who spent more than a cumulative total of 15 minutes (within a 24-hour time period) in a shared indoor airspace (e.g., classroom) with someone with COVID-19 during their infectious period.
- b. In lieu of individual exposure notifications, schools should consider providing a general notification to the entire school community during times of elevated [community transmission](#) of COVID-19. This communication can alert all to the increased potential of being exposed to COVID-19 due to a rise in cases among school and community members, and remind all to monitor for symptoms and get tested.
- c. All students with known exposure to persons with COVID-19 should follow recommendations listed in [Table 2 \(Asymptomatic Persons Who are Exposed to Someone with COVID-19\)](#) of CDPH's guidance for the general public. If they remain without symptoms, students may continue to take part in all aspects of K–12 schooling including sports and extracurricular activities. As recommended in [Table 2](#), they should wear a well-fitting mask around others for a total of 10 days and get tested 3–5 days after last exposure.

#### **j. Managing COVID-19 Outbreaks**

CDPH will continue to support local health and education officials in managing [suspected or confirmed outbreaks](#) of COVID-19.

1. Recommended Actions:

- a. Broad disruptions to in-person learning, such as temporary school or classroom closures, due to COVID-19 should remain a last resort and considered only after all available resources have been exhausted, and only after conferring with local health officials.
- b. Local public health officials are encouraged to [contact CDPH](#) to learn more about consultation, testing and vaccination resources to support management of COVID-19 outbreaks.

### **k. Cleaning Facilities**

In general, routine cleaning is enough to sufficiently remove the virus that causes COVID-19 from surfaces. If disinfectants are used, use [asthma-safer products](#).

1. Recommended action:

- a. Drinking fountains may be open and used by students and staff. Routine cleaning is recommended.

### **l. Additional Considerations**

1. Considerations to address student mental and behavioral health: Schools are encouraged to implement strategies to address student mental and behavioral health. Schools should review guidance and resources available to support [social and emotional learning](#) and [mental health resources for youth](#), including California's [Healthy Minds, Thriving Kids](#) Project.
2. Considerations for students with disabilities or other health care needs: When implementing this guidance, schools should carefully consider how to address the legal requirements related to provision of a free appropriate public education and requirements to reasonably accommodate disabilities, which continue to apply. For additional recommendations for students with disabilities or other health care needs, refer to guidance provided by the [American Academy of Pediatrics](#).
3. Considerations for higher risk activities: Certain activities that involve increased and forceful exhalation can pose increased risk for getting and spreading COVID-19, particularly if conducted indoors, in poorly ventilated settings, and/or without the use of masks. Accordingly, schools may consider implementing additional measures to mitigate transmission in these settings, including screening testing and vaccination, particularly during COVID-19 outbreaks or surges.
4. Considerations for large events at K–12 schools: Particularly during surges of COVID-19, school dances, large assemblies, and other school-based crowded

events, especially those held indoors, all have the potential to cause substantial spread of COVID-19 within and beyond the school community. Prior to hosting large events, schools are encouraged to review the [Safe and SMART Events Playbook](#) (PDF) for mitigation strategies that should be considered.

5. Considerations for visitors to K–12 schools: Schools should not limit access for essential direct service providers who comply with school visitor policies due to a concern about mitigating spread of COVID-19.
6. Considerations for boarding schools and programs that may operate residential components: Participants in activities with a residential component are at increased risk of getting and spreading COVID-19 to one another. Accordingly, they should consider all the layered mitigation strategies described in this guidance, especially recommendations to get vaccinated and undergo testing for COVID-19 prior to returning to school following major breaks (e.g., summer, winter, spring).

## **E) Student and Staff Mental Health**

The school will share methods to help staff and students cope with stress in healthy ways, provide tools to reduce stress, and ensure resources are provided to maintain mental health and wellbeing. Students and staff may also utilize services as outlined on the CDC's website:

<https://www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/stress-coping/index.html>

CORE Butte has also developed a social-emotional tiered system of support for students.