# ARCHDIOCESAN PROTOCOLS FOR SAFELY REOPENING CATHOLIC SCHOOL BUILDINGS

ARCHDIOCESE OF SAINT PAUL AND MINNEAPOLIS

MOST RECENT REVISION: 10/09/2020

# ARCHDIOCESAN PROTOCOLS FOR SAFELY REOPENING CATHOLIC SCHOOL BUILDINGS

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#### Introduction to the Archdiocesan Protocols

Educating young people in the light of Christ is foundational to the mission of the Catholic Church. While the Church has carried out this work of education in the midst of social, health, and political crises, the current global COVID-19 pandemic has prompted unprecedented reflection on education and the central role of the physical school community in promoting the academic, spiritual, and emotional growth of the child. In preparing for the start of the 2020-21 school year, our local Church and the wider educational community throughout the state and the country will be required to make morally responsible decisions for how we educate the future citizens and leaders of our society during a pandemic, with special consideration for those children who are the most vulnerable among us. With the information that is currently available, we affirm that the most prudent decision for Catholic schools is to plan for the safe reopening of its school buildings at the start of the 2020-21 school year. We invite you to continue reading to learn more about the considerations that went into making this decision and the plans we have to prioritize health and safety in the upcoming academic year.

What We Have Learned: Since the Archdiocese made the recommendation to close its Catholic school buildings in March 2020 in response to the early stages of the COVID-19 pandemic, new scientific research with implications for reopening of schools has started to emerge. While we recognize that science is advancing daily, a current summary of scientific research with implications for the reopening of schools is summarized in the next section. In addition to the emerging research on COVID-19, we have learned that there are significantly adverse physical, academic, social and emotional consequences for many children when school buildings close. We have learned that some COVID-19 educational policies can disproportionately affect students of color and vulnerable families and children.

Morally Responsible Educational Leadership: While the research on COVID-19 and the research on the effects of school building closure on students and families is still emerging, it has becomes clear that there are risks in opening school buildings and risks in *not* opening school building. When it comes to partnering with families to provide for the educational needs of their children during a pandemic, the question before educational leaders is determining the responsible way to proceed in educating children when there are no risk-free options. Science can help inform our considerations. It is an essential data point. Ultimately, though, we are faced with a decision about moral value. Educational leaders must exercise prudential wisdom through morally responsible leadership to weigh the many risks and benefits and prudently chose the course of action that is best suited to provide for the good of all.

Responsible Planning and Transparent Communication: In order to welcome students back into the school building, we have responsibly planned and will take a number of action steps to lower the risk of COVID-19 transmission and intend to transparently communicate with all stakeholders throughout the implementation of these processes and procedures. These action steps required for all our Catholic schools are contained in this document, *Archdiocesan Protocols for Safely Reopening Catholic School Buildings*. When taken as a whole, these protocols create a framework that provide multiple safeguards that reduce the spread of COVID-19.

As the CDC has recently noted, these steps are similar to the layers of protections that exist when driving our cars. They include strategies that each individual can take, such as using your seat belt, as well as environmental strategies, such as speed limits, and social expectations like requiring a test to get a driver's license. Like we reduce the risk of driving, stacking these best practices with several layers of safeguards in a school help reduce the spread of COVID-19 and therefore lower the risks when we re-open our Catholic school buildings in the fall.

**Culture of Health and Safety:** The protocols are intended to mitigate, not eliminate, risk. No single action or set of actions will completely eliminate the risk of COVID-19 transmission, but implementation of several coordinated interventions can greatly reduce that risk. Our schools are not depending on one mitigation strategy, but a <u>combination</u> of all these strategies that when taken together substantially reduce the risk of transmission. In other words, establishing a culture of health and safety in our schools that focuses on regularly enforcing these important practices is more important than any one measure.

Educating Together: Each Catholic school is preparing to implement these special sets of policies and procedures for pandemic preparedness and response in order to help keep our Catholic school children, employees, and community safe and healthy. We recognize that the decision to return to school this fall is a deeply personal decision for each family. We pray for all our families, as they too have to make prudential decisions based on a multitude of considerations of their own particular situation. We ask for the prayers of the entire Catholic school community as we all seek the wisdom and courage to continue our sacrificial work for the sake of one of our noblest endeavors—the education of our children.

#### Emerging implications from the medical literature on childhood susceptibility to and transmission of COVID-19

A. Excerpt from the American Academy of Pediatrics (June 25, 2020):

Policy makers must also consider the mounting evidence regarding COVID-19 in children and adolescents, including the role they may play in transmission of the infection. SARS-CoV-2 appears to behave differently in children and adolescents than other common respiratory viruses, such as influenza, on which much of the current guidance regarding school closures is based. Although children and adolescents play a major role in amplifying influenza outbreaks, to date, this does not appear to be the case with SARS-CoV-2. Although many questions remain, the preponderance of evidence indicates that children and adolescents are less likely to be symptomatic and less likely to have severe disease resulting from SARS-CoV-2 infection. In addition, children may be less likely to become infected and to spread infection. Policies to mitigate the spread of COVID-19 within schools must be balanced with the known harms to children, adolescents, families, and the community by keeping children at home.

B. The State of Massachusetts has published one of the most accessible and up-to-date summaries of the emerging themes and implications from the medical literature as it relates to children, COVID-19, and schools. In an open letter, Massachusetts' Commissioner of Education Jeffery C. Riley writes: "In discussions with infectious disease physicians, other medical advisers, and the COVID-19 Command Center's Medical Advisory Board, we were heartened to learn that – based on current data and research – the medical community supports the return of our students to in-person learning, with appropriate health and safety guardrails in place." The following section "Emerging implications from the medical literature" is reprinted from *Initial Fall School Reopening Guidance* published by the Massachusetts Department of Elementary and Secondary Education, June 25, 2020:

This section summarizes some of the emerging themes and implications from the medical literature on childhood susceptibility to and transmission of COVID-19 as of mid-June 2020. Because COVID-19 is a novel disease, this literature is growing rapidly, and new information is emerging almost every day. Our guidance will continue to evolve as the science develops.

At this time, the evidence suggests schools have not played a significant role in COVID-19 transmission and that children, particularly younger children, are less likely than adults to be infected with COVID-19. Furthermore, if they become infected, it appears children may be less likely to transmit COVID-19 to others. Based on these initial findings, the health and safety requirements throughout this guidance, as well as considering the key features of school programming at different grade spans, the current evidence supports a safe in-person return to school with implementation details varying for elementary schools (including pre-kindergarten programs), middle schools, and high schools.

• Schools do not appear to have played a major role in COVID-19 transmission. In a review of COVID clusters, only 4% (8 of 210) involved school transmission.<sup>1</sup> In a case study from New South Wales Australia, after 18 cases were found in schools (12 in high schools and 6 in primary schools), only 0.3% of student contacts were infected (1 in 695 individuals in 10 high

<sup>&</sup>lt;sup>1</sup> Leclerc, Q. J., Fuller, N. M., Knight, L. E., Funk, S., Knight, G. M., & CMMID COVID-19 Working Group. (2020). What settings have been linked to SARS-CoV-2 transmission clusters?. *Wellcome Open Research*, 5(83), 83. Available at https://wellcomeopenresearch.org/articles/5-83/v2

schools and 1 in 168 individuals in primary schools). No teachers or staff were infected.<sup>2</sup> Additional studies are included in Appendix A.

- In general, rates of COVID-19 infection are lower for children than for adults. Based on an analysis of data from six countries, children under 20 are half as susceptible to COVID-19 infection than adults.<sup>3</sup> Furthermore, although children under the age of 18 make up 22% of the U.S. population, they account for less than 2% of all cases of COVID-19.<sup>4</sup> In Massachusetts, children under the age of 19 were about four times less likely than the population at large to be diagnosed with COVID-19.<sup>5</sup> Children are more likely to be asymptomatic, however, which underscores the importance of health behaviors for everyone (masks/face coverings, distancing, handwashing, surface cleaning).<sup>6</sup> Additional studies are included in Appendix A.
- If exposed, children may be less likely to become infected with COVID-19. A meta-analysis of studies from several countries found that children were only 44% as likely as adults to become infected after exposure (note: pre-print study). In China, in households with COVID-19 exposure, children under the age of 18 were infected at a rate of 4% compared with 17% for adults. Additional studies are included in Appendix A.
- If infected, it appears children may be less likely to infect others with COVID-19. Most transmissions are from adults to children, rather than vice versa; this is different from some other respiratory viruses (note: pre-print study). In a U.S. study of 15 households, 73% of transmissions were from adult to child (the remaining were child-to-child or child-to adult). Additional studies are included in Appendix A.
- \* Appendix A can be found in the full document: https://www.mass.gov/doc/dese-fall-reopening-guidance/download.

<sup>&</sup>lt;sup>2</sup> National Centre for Immunisation Research and Surveillance (NCIRS) (2020). COVID-19 in schools – the experience in NSW. Available at <a href="http://ncirs.org.au/sites/default/files/2020-04/NCIRS%20NSW%20Schools%20COVID\_Summary\_FINAL%20public\_26%20April%202020.pdf">http://ncirs.org.au/sites/default/files/2020-04/NCIRS%20NSW%20Schools%20COVID\_Summary\_FINAL%20public\_26%20April%202020.pdf</a>

<sup>&</sup>lt;sup>3</sup> Davies, N.G., Klepac, P., Liu, Y. et al. Age-dependent effects in the transmission and control of COVID-19 epidemics. Nat Med (2020). https://doi.org/10.1038/s41591-020-0962-9

<sup>&</sup>lt;sup>4</sup> Coronavirus Disease 2019 in Children — United States, February 12-April 2, 2020. MMWR Morb Mortal Wkly Rep 2020;69:422-426. DOI: http://dx.doi.org/10.15585/mmwr.mm6914e4

<sup>&</sup>lt;sup>5</sup> https://www.mass.gov/info-details/covid-19-response-reporting

<sup>&</sup>lt;sup>6</sup> Davies, N.G., Klepac, P., Liu, Y. et al. Age-dependent effects in the transmission and control of COVID-19 epidemics. Nat Med (2020). https://doi.org/10.1038/s41591-020-0962-9

<sup>&</sup>lt;sup>7</sup> Viner, R. M., Mytton, O. T., Bonell, C., Melendez-Torres, G. J., Ward, J. L., Hudson, L., ... & Panovska-Griffiths, J. (2020). Susceptibility to and transmission of COVID-19 amongst children and adolescents compared with adults: a systematic review and meta-analysis. *medRxiv*. Available at https://www.medrxiv.org/content/10.1101/2020.05.20.20108126v1

<sup>&</sup>lt;sup>8</sup> Wei Li, Bo Zhang, Jianhua Lu, Shihua Liu, Zhiqiang Chang, Cao Peng, Xinghua Liu, Peng Zhang, Yan Ling, Kaixiong Tao, Jianying Chen, Characteristics of Household Transmission of COVID-19, Clinical Infectious Diseases, , ciaa450, <a href="https://doi.org/10.1093/cid/ciaa450">https://doi.org/10.1093/cid/ciaa450</a>

<sup>&</sup>lt;sup>9</sup> Zhu, Y., Bloxham, C. J., Hulme, K. D., Sinclair, J. E., Tong, Z. W. M., Steele, L. E., ... & Gilks, C. (2020). Children are unlikely to have been the primary source of household SARS-CoV-2 infections. Available at <a href="https://www.medrxiv.org/content/10.1101/2020.03.26.20044826v1">https://www.medrxiv.org/content/10.1101/2020.03.26.20044826v1</a>

<sup>&</sup>lt;sup>10</sup> Mannheim, J., Gretsch, S., Layden, J. E., & Fricchione, M. J. (2020). Characteristics of Hospitalized Pediatric COVID-19 Cases—Chicago, Illinois, March—April 2020. *Journal of the Pediatric Infectious Diseases Society*. Available at <a href="https://academic.oup.com/jpids/advance-article/doi/10.1093/jpids/piaa070/5849922">https://academic.oup.com/jpids/advance-article/doi/10.1093/jpids/piaa070/5849922</a>

#### **Principles for Safely Reopening Catholic School Buildings**

The principles articulated below form the backbone for all deliberations as they relate to reopening Catholic school buildings in the Archdiocese of Saint Paul and Minneapolis for the beginning of the 2020-21 academic year. These principles guide the creation of the *Archdiocesan Protocols for Safely Reopening Catholic School Buildings*. The goal of the *Archdiocesan Protocols* is a responsible and prudent approach to reopening our school buildings. School leaders are encouraged to utilize these principles as they consider the practical details and establish appropriate school-level processes and procedures.

- Mission-aligned: Protocols are aligned with the mission of Catholic education.
- Tailored to Catholic schools: Protocols meet the unique capabilities and needs of Catholic schools which may be distinct from other public educational institutions.
- Safeguarding high quality education: Protocols help ensure that Catholic schools provide a high quality education that advances excellence for every student in all areas of their lives.
- Research-based: Protocols are grounded in the most current research and infectious disease mitigation strategies.
- **Broad:** Protocols are overarching, high-level that allow for school-specific modification and implementation.
- Feasible: Protocols can be implemented at a systems-level with minimal time for training.
- Flexible: Protocols are flexible enough to be able to respond to changes in community spread or public health guidance and the publication of new research.
- Accessible: K-8 Catholic schools will have access to the resources needed to implement protocols.
- Fiscally responsible: Protocol implementation is financially viable and reflects responsible stewardship.

The following graphic illustrates how the Archdiocesan Principles for Reopening relate to the creation of the school-level Pandemic Preparedness and Readiness Plan (PPRP). The Archdiocesan Principles for Reopening drive the development of the *Archdiocesan Protocols* which set the requirements for school-level procedures found in the PPRP.



# **Explanation of Format**

#### **ARCHDIOCESAN PROTOCOLS**

#### FOR SAFELY REOPENING CATHOLIC SCHOOL BUILDINGS

**DOMAIN:** The health and safety practices are divided into four overarching domains that describe the key areas for pandemic preparedness and response. The four domains are highlighted in blue.

**Benchmark:** Each of the four domains has a series of benchmarks to assist schools in recognizing health and safety practices in the four domains for reopening Catholic school buildings. The benchmarks are highlighted in yellow.

#### **Protocols**

This column articulates the high-level requirement that must be implemented in order to meet the **Benchmark.** These high-level requirements are called **Protocols.** Schools must have procedures or processes in place to implement each **Protocol.** 

#### Resources

This column is reserved for links to resources to guide school's implementation of the **Protocols**. These resources include public health guidance, like recommendations from MDH and CDC.

#### School Level Procedures

This column is reserved for school-level processes and procedures. Each Catholic school completes this column for its own school. This column is the substance of the school's Pandemic Preparedness and Response Plan. Following the requirements stated in the **Protocol** and with consideration to the references and guidance documents provided in **Resources**, schools develop their school-level processes and procedures to meet the **Benchmark**. Schools keep track of the most recent review or revision date of the procedures in the column to the left.

It is expected that some school-level processes and procedures will be considered interim and may change as more information becomes available.

#### Date

Most recent review or revision date for procedures and processes developed at the school-level.

#### **ARCHDIOCESAN PROTOCOLS**

#### FOR SAFELY REOPENING CATHOLIC SCHOOL BUILDINGS

#### A NOTE ON THE PROTOCOLS:

When taken as a whole, these Protocols outlined below create a framework that provides multiple safeguards that reduce the spread of COVID-19. As the CDC has recently noted, these steps are similar to the layers of protections that exist when driving our cars. They include strategies that each individual can take, such as using your seat belt, as well as environmental strategies, such as speed limits, and policies like requiring a test to get a driver's license. Stacking these best practices with several layers of safeguards help reduce the spread of COVID-19 and lower the risks when we re-open our Catholic school buildings in the fall.

In order to welcome students back into the school building, Catholic schools will use these Protocols to responsibly plan, transparently communicate, and implement a number of action steps to lower the risk of COVID-19 transmission. As school leaders prepare the PPRP for their schools, it is important to remember that it is not one mitigation strategy, but a <u>combination</u> of all these strategies taken together that will substantially reduce the risk of transmission. The Protocols are intended to mitigate, not eliminate, risk. No single action or set of actions will completely eliminate the risk of COVID-19 transmission, but implementation of several coordinated interventions can greatly reduce that risk. In other words, establishing a culture of health and safety in our schools that focuses on regularly enforcing these important practices is more important than any one measure.

Some school-level processes and procedures that are developed in the month of July may need to be considered "interim." As more information is made available throughout the summer and into the start of the 2020-21 school year, it is expected that interim school-level processes and procedures will be reviewed and revised as needed. The Archdiocese will continue to provide guidance as more information becomes available.

#### KEY HEALTH AND SAFETY COVID-19 RESOURCES FOR SCHOOLS FOR SCHOOL PROCEDURES DEVELOPMENT

MDH SCHOOL PLANNING GUIDE (MDH)

CONSIDERATIONS FOR K-12 SCHOOLS: READINESS AND PLANNING TOOL (CDC)

COVID-19 Planning Considerations: Guidance for School Re-entry (AAP)

# **ARCHDIOCESAN HEALTH & SAFETY PROTOCOLS**

# FOR SAFELY REOPENING CATHOLIC SCHOOL BUILDINGS

# **DIVINE MERCY CATHOLIC SCHOOL**

# **DOMAIN I: PROMOTING BEHAVIORS THAT REDUCE SPREAD**

#### Benchmark A: Staying home when appropriate

Only students, employees, and visitors who show no signs of illness are present in the school building. Students who were sick and are no longer symptomatic are returning to school at the advice of the student's health care provider.

| Protocol 1: Students and employees are required to stay home when they are sick. Schools must promptly send children and employees home when they display symptoms of COVID-19 illness.  | (Resources)  MDH: If You Are Sick: COVID-19  CDC: Coronavirus Disease 2019: Symptoms  | Parents and staff members will be informed of protocols and educated about what symptoms to look for screening for illness. Students and employees will be required to stay home if they are sick.  DMCS will follow the current decision tree provided by the MDH for exclusion guidance. These are being continuously updated and we will adjust our practices as the guidance changes.  The Archdiocese has also provided detailed guidance on how to determine exclusion criteria and follow the plan.              | (Date)<br>8/31/2020 |
|--|---|---|---------------------|
| Protocol 2: When determining when students or employees may return to school, schools will follow the directives of an individual's health care provider. In the event that no advice has been sought or given, schools will use guidelines provided by public health officials. | MDH: If You Are Sick: COVID-19: How long to stay home if sick  MDH: Decision Tree  MDH: COVID-19 and When to Return to Work | Students and Staff who develop symptoms of COVID-19 will be sent home. They will be asked to contact their primary care provider for guidance on testing.  If a child is sent home, a simple reminder will be sent with them to delineate next steps before returning to school.  DMCS will follow the guidelines provided by the Minnesota Department of Health and the Archdiocese of St. Paul and Minneapolis and utilize the MDH hotline and other tools to assist us in the decision-making process for each case. | 8/31/2020           |
| Protocol 3: Eliminate or prudently modify employment and student attendance policy incentives that could cause a student or employee to come   |   | DMCS currently has no attendance incentives in place.   | 8/10/2020           |

| to school when ill (e.g., "perfect attendance awards").  |   |   |            |
|--|---|---|------------|
| Protocol 4: Schools will designate an employee to be the primary COVID-19 Designated Point of Contact and a different employee to serve as a back-up COVID-19 Designated Point of Contact if the primary COVID-19 Designated Point of Contact is unavailable. This Point of Contact is responsible for responding to COVID-19 concerns (e.g. school nurse, head of school). All school employees and families should know who these individuals are and how to contact them. | MDH Planning Guide for Schools, p. 4  | At DMCS the principal, Regina Ashley, will be the primary point of contact. Back up will be provided by the school nurse, Mary Herzog, and Ginger VanHecke.  Due to the structure of our setting this triad of responders will assure that someone is always available to help families who has the most up-to-date information.  | 8/10/2020  |
| Protocol 5: Schools will inform families and employees of the public-health recommendations for quarantining after exposure to COVID-19.   | MDH School Planning Guide, pp. 12-13  MDH: What to do if you have had close contact with a person with COVID-19 | As part of the back to school information and orientation materials, school families will be provided with the MDH guidelines for quarantine after exposure to COVID-19.  Parents will be asked to be in communication with the school about illness in their homes. We will then follow the guidance provided by MDH and the Archdiocese on exclusion.   | 8/31/2020  |
| Benchmark B: Practicing personal   | hygiene measures  |   |            |
| Basic infection prevention measur<br>measures, including proper hand I   |   | at the school. All members of the school community are practicing person<br>quette.   | al hygiene |
| Protocol 1: Schools will teach and reinforce proper handwashing hygiene.   | MDH: Hand Hygiene  MDH: Teaching Hand Hygiene  MDH: Hand Hygiene for Schools and Child Care                     | Practicing Proper Handwashing Hygiene at Divine Mercy means that students and employees are washing their hands for at least 20 seconds with soap and water frequently throughout the day, but especially at the beginning and end of the school day, prior to any mealtimes, after meals/snacks, after recess, and after using the restroom.  Our school will teach employees proper handwashing techniques and provide resources for teachers to teach their students proper handwashing techniques. If soap and water are not readily available, hand sanitizer that contains at least 60% | 8/10/2020  |

|  |  | alcohol can be used (only for employees and older students who can safely use hand sanitizer).   |           |
|--|--|--|-----------|
| Protocol 2: Schools will monitor compliance in a practicable manner to help ensure adherence among students.   |  | At DMCS teachers will monitor students to help ensure adherence. Signs will be posted encouraging proper behavior and routine reminders and demonstrations will be given.  | 8/10/2020 |
| Protocol 3: Schools will teach and reinforce respiratory etiquette.  | MDH: Cover Your Cough  CDC: Cloth Face Covering Guidance  MDH School Planning Guide, pp. 7-8 | Practicing Proper Respiratory Etiquette at Divine Mercy means that members of the school community are 1) covering coughs and sneezes with a tissue 2) throwing used tissues in the trash and 3) washing hands using handwashing protocols after coughing or sneezing.  If tissues are not immediately available, students and employees are coughing or sneezing into their elbow.  Our school will  1) Educate all employees on proper respiratory etiquette. 2) Require teachers to instruct and remind students weekly of proper respiratory etiquette 3) Ask that teachers discreetly encourage individual students to practice proper respiratory etiquette on an as-needed basis. | 8/10/2020 |
| Protocol 5: Schools will encourage students to avoid touching their faces.   |  | All employees and students will be educated on the ways to reduce the spread of the virus. This includes not touching your face. Students and employees will be encouraged to be conscious of this behavior and to wash their hands if they do touch their face.   | 8/10/2020 |
| Benchmark C: Social distancing (pl   | -  |  |           |
| Schools implement appropriate so   | cial distancing practices to   | reduce the spread of disease.  |           |
| Protocol 1: Schools will consider all public health recommendations for social distancing and implement those that are reflective of students' ages and abilities; without negative impact on the learning and social-emotional environment; and responsive to the | MDH: COVID-19 Prevention Guidance  | At Divine Mercy Catholic School, we will utilize the strategy of classrooms as 'family pods' to provide physical distancing and contact tracing opportunity. 'Family Pods' will be limited in their interaction with other pods and other adults thereby limiting exposure and mitigating risk. Students will spend their day in their pod. These pods will be utilized throughout recess, lunch, and specialist activities as well, providing opportunity for sanitizing as necessary between pods.   | 10/9/2020 |

| local community.  Students from the same grade, but different classes will be allowed to play together during outdoor recesses. | evel of community spread in the wider | Masks or shields will be required in accordance with the Governor's order. |  |
|---|---------------------------------------|--|--|
|   | ocal community.                       |  |  |

# DOMAIN II: MAINTAINING HEALTHY FACILITIES

#### Benchmark A: Cleaning and disinfecting efforts

Regular housekeeping practices are being implemented, including routine cleaning and disinfecting of classroom surfaces, restrooms, lunch rooms, meeting rooms, and drop-off and pickup locations. More frequent cleaning and disinfecting is conducted in high-touch areas, such as door handles, elevator panels, and hand railings.

| Protocol 1: Schools will develop a schedule for increased, routine cleaning and disinfecting.   | Appendix D: Cleaning Log   | Maintenance has developed a log and schedule to reflect the increased cleaning protocols.  Classrooms will be cleaned twice daily.  | 8/10/2020 |
|---|--|---|-----------|
| Protocol 2: Schools will identify frequently touched surfaces (e.g., playground equipment, door handles, sink handles, drinking fountains) within the school and clean all frequently touched surfaces daily or between use as much as practicable. | MDH Playground Guidance  MDH COVID-19 Cleaning and Disinfecting Guidance | As part of the maintenance plan, high touch surfaces have been identified for frequent cleaning throughout the day.  Teachers have been provided cleaning supplies as well to address high-touch areas in classrooms. | 8/10/2020 |
| Protocol 3: Schools will ensure safe and correct use and storage of cleaning and disinfecting products, including always storing products securely away from children, and using products that meet EPA disinfecting criteria.                      | MDH School Planning Guide,<br>pp. 9-10                                   | Divine Mercy will follow all "Right to Know" for chemicals and will provide the Safety Data Sheet and training for each chemical.   | 8/10/2020 |

#### Benchmark B: Adequate supplies

| Appropriate and effective cleaning and disinfecting supplies have been purchased and are available for use in accordance with product labels, safety data sheets and manufacturer specifications and are being used with required personal protective equipment for the product. |  |  |            |
|--|--|--|------------|
| Protocol 1: Schools will provide adequate supplies for implementing cleaning and disinfecting.   | School Cleaning Supplies  IEA Creating your Restart Blueprint for COVID-19   | Maintenance staff has been planning and preparing for school opening through the summer. Cleaning and disinfecting supplies have been ordered and prepared for these protocols. Each classroom and area have been fitted with the appropriate cleaning supplies. | 8/10/2020  |
| Benchmark C: Separate physical s<br>Schools have a space for students  |  | ptoms of COVID-19 19. This space is supervised, safe, and regularly cleaned.   |            |
| Protocol 1: Schools will identify a supervised space or area to temporarily separate anyone who has COVID-19 symptoms until they can leave the building. This space will be regularly cleaned and sanitized.   | MDH Cleaning and Disinfecting Guidance, pp. 3-5  Catholic Mutual recommends that schools consider having this room close to an exit door, if possible.   | At Divine Mercy, the nurse's office and adjoining conference room will be used to temporarily separate anyone who has COVID-19 symptoms. This space will be able to be utilized in this capacity and therefore cleaned and sanitized on a specific schedule.     | 8/10/2020  |
| Protocol 2: Schools will establish procedures to decrease the risk of spread among (or to) employees who are responsible for supervising students who have COVID-19 symptoms.  | Catholic Mutual recommends that those responsible for supervising students who have COVID-19 symptoms be provided person protective equipment, including mask, shield, gloves, and gown when possible. | Gown, shield, mask, and gloves will be provided for staff who will interact directly with suspected COVID-19 exposure.   | 8/10/2020  |
|  | re operating in a way that ¡   | promotes a healthy environment. As much fresh air as possible is being bron systems are being properly used and maintained.  | ought into |
| Protocol 1: Schools will monitor ventilation systems such that they operate properly and increase circulation of outdoor air as much as  | CDC Building Reopening   | Divine Mercy School buildings have been cleaned and sanitized during the summer. Maintenance staff will follow the recommendations provided by the CDC to assure our building is ready to be occupied.   | 8/10/2020  |

| possible (e.g., by opening windows and doors).  |  | Efforts will be made to increase air circulation throughout the building. Teachers will be encouraged to open windows and use fans to circulate air in classrooms throughout the day.  |           |
|---|--|--|-----------|
| Protocol 2: Schools will take steps to ensure that all water systems and features (e.g., sink faucets, drinking fountains) are safe to use. | MDH Planning Guide, p. 13 CDC Building Reopening | Maintenance staff will follow the recommendations provided by the CDC to assure our water systems are safe to use.  Drinking Fountains will be closed with only the bottle fillers available. Students will be asked to bring their own water bottle from home each day. | 8/10/2020 |

# DOMAIN III: MAINTAINING HEALTHY OPERATIONS

# Benchmark A: Symptom monitoring and screening

Families, students, and employees have been informed of and encouraged to self-monitor for signs and symptoms of COVID-19 through regular health checks.

| Protocol 1: Schools will articulate expectations for regular health checks at home and at school (e.g., temperature screening and/or symptom checking) of employees and students. | MDH School Planning Guide, pp. 10-12  Catholic Mutual recommends posting videos on website and sending reminders about home health checks via email, letters and calls every day of the first week of school as parents and families are building back-to-school routines. | Divine Mercy will expect parents to diligently provide health checks of their children at home. We will post videos on health checks and proper hygiene on our website. We will send reminders about home health checks through the school newsletter and in our back to school packets. Teachers will be required to remind parents of this expectation in their classroom newsletters weekly at the beginning of the school year. | 8/10/2020 |
|---|--|---|-----------|
| Protocol 2: Health checks that occur at school will be conducted safely and protect student's privacy.  | CDC Supplemental Guidance for Childcare  CDC General Business FAQ  Catholic Mutual requires a separate health file and form for each person.   | Health checks that occur in school will be conducted in a safe and respectful way.  Divine Mercy Catholic School will follow all pertinent laws and practices to protect student and staff privacy while mitigating risk.   | 8/10/2020 |

|  | Health information must be kept in a confidential and secure location. |  |           |
|--|--|--|-----------|
| Benchmark B: Caring at school for<br>Any student who displays sympton<br>possible. Families are provided info  | ns of COVID-19 is separate   | d from other classmates and is picked up by a parent or guardian as soon   | as        |
| Protocol 1: Schools will separate employees and students who develop COVID-19 symptoms (such as fever, cough, or shortness of breath) while at school.   | MDH School Planning Guide,<br>pp. 12-13                                | Divine Mercy Catholic School has a nurse's office and has designated the attached conference room as a quarantine room. Students or staff that present with COVID-19 symptoms during the school day will be separated and quarantined until they can be transported home.  | 8/10/2020 |
| Protocol 2: Students who develop<br>COVID-19 symptoms while at school<br>will be taken to a separate, supervised<br>physical space until a parent/guardian<br>is able to pick up the student.  | MDH School Planning Guide,<br>pp. 12-13                                | The nurse's office and attached conference room will be utilized as a quarantine space should it become necessary to have a student separated until a parent is able to pick them up.  | 8/10/2020 |
| Protocol 3: The school's COVID-19 point of contact person will communicate with the student's family regarding current public health guidance for caring for others who are sick, the school's procedures for the student to return to school and reporting of any diagnosed case of COVID-19. | MDH School Planning Guide,<br>pp. 12-13                                | The principal, nurse, or admissions and enrollment specialist will communicate with the student's family regarding the current public health guidance and the school's procedures.  A short handout has been developed by the school nurse to give to families that will provide a step-by-step process of procedures to complete for the student to return to school. | 8/31/2020 |

#### Benchmark C: Classroom environment

With consideration to the Principles of Reopening, schools will implement appropriate procedures in light of its educational plan and its physical building to reduce the spread of disease.

| Protocol 1: In the development of their | MDH School Planning Guide | At Divine Mercy Catholic School, one of our main mitigation strategies will be "family | 10/9/2020 |
|---|---------------------------|--|-----------|
| schedules and classroom procedures,     |                           | pods". Given the behavioral challenges with elementary aged students and with the      |           |
|   |                           |  |           |

| schools have implemented public health recommended strategies at the classroom-level to mitigate the spread of disease.  |   | expressed goal to provide as authentic a classroom experience as possible for our students, individual classes will operate as small family units. Each classroom pod or unit will be kept from interaction with other classes to limit contact and provide clear opportunities for tracing.  If class pods mix for any type of instruction (ie. leveled math groups) the pods will be kept at 6 ft. distance from one another.  Teachers will eliminate extra furniture and non-essential items in their classrooms to provide the maximum amount of space. They will organize their rooms to allow students to be seated facing one direction and to allow for 3ft. of physical distance between students when at all possible.  Specialists classes can be held in their own classrooms except for Technology.  Specialists will travel to classroom pods or deliver and pick up classes to reduce interaction and crossover. If a classroom space is shared with another pod, students will be required to wash their hands when entering and leaving the space.  We will maintain small class sizes with a max of 20 students per class. |           |
|--|---|---|-----------|
| Protocol 2: To the degree possible, schools will limit the use of shared objects (e.g., gym or physical education equipment, art supplies, toys, games) or clean them between use. | CDC Considerations for Schools (Shared Objects)  Catholic Mutual recommends that all rugs and moveable carpets in classroom be replaced with individual mats. | Students will keep and maintain their own school supplies. Computers will be assigned to an individual student.  If supplies do need to be shared, they will be sanitized often, and students will be required to wash hands after use.   | 8/10/2020 |
| Benchmark D: Large-group gather With consideration to the Principle all large-group gatherings (e.g. as  | es of Reopening, schools ha   | ield trips)  Inversimplemented appropriate procedures to mitigate the spread of disease   | e during  |
| Protocol 1: Schools will limit large, inschool group events, gatherings, or meetings during the school day.  | CDC Considerations for<br>Schools (Modified Layouts;<br>Communal Spaces)  | Until guidance changes, large school gatherings except for Mass will not be allowed.  | 8/10/2020 |

| Protocol 2: Schools will pursue virtual activities and events where practicable in lieu of large group gatherings such as field trips, student assemblies, special performances, school-wide parent meetings, and spirit nights, as practical. | MDH School Planning Guide   | Divine Mercy will utilize virtual and live streaming venues to facilitate large group gatherings. Monday Morning Meeting will be held through Google Meet or another online application and viewed in each classroom.  Field Trips and other assemblies will not be allowed under the current guidance.  Virtual options will be explored and utilized.  | 8/10/2020 |
|--|---|--|-----------|
| Protocol 3: Schools will pursue options to convene sporting events and participation in sports activities in ways that minimizes the risk of transmission of COVID-19 to players, families, coaches, and communities.                          | MDH Sports Guide  Minnesota State High School League COVID-19 Updates | Divine Mercy Catholic School does not sponsor sporting events or teams. Any group using our facility will need to follow the protocols set by Bethlehem Academy and the Minnesota State High School League.  | 8/10/2020 |
| Benchmark E: Visitors  Schools admit only those people w   | tho are essential for continu   | uing school operations or maintaining the academic environment.  |           |
| Protocol 1: All visitors to the school will  | MDH: Visitor and  | Visitors will be extremely limited under this current guidance and not allowed   | 8/10/2020 |
| follow all school-defined safety and personal hygiene procedures for entering the school.  | Employee Health Screening Checklist                                   | beyond the front vestibule without a staff member guide. Divine Mercy will require each visitor to the building to verbally affirm that they have no symptoms of COVID-19 that cannot be attributed to another health condition according to the <i>Visitor and Employee Health Screening Checklist</i> . Visitors will be informed of, and required to follow, Divine Mercy's expectations for practicing hand hygiene and respiratory etiquette. Masks are required in accordance with the government mandate. |           |
| Protocol 2: Parents and Volunteers   |   | Under current guidance, Divine Mercy Catholic School will not allow parents past the   | 8/10/2020 |
| Schools will have a plan for entrance and movement within the school building for parents and volunteers to minimize exposure.   |   | front entry vestibule. Volunteers will be discouraged.   |           |
| Protocol 3: Prospective Families  Schools will have a plan for entrance and movement within the school   |   | Tours will be given by appointment only. Tour participants will not be allowed into classrooms. Participants will be asked to mask. We will also provide a virtual tour option.  | 7/29/2020 |

| building for prospective students and families to minimize exposure.  |  |           |
|---|--|-----------|
| Protocol 4: Vendors  Schools will have a plan for entrance and movement within the school building for vendors to minimize exposure.  | Divine Mercy will request that all vendors come before or after school hours. If they are not able to accommodate a before and after school time, they will be required to check in at the office, wear a mask, and be accompanied by a staff member. No classroom entrance will be allowed. | 8/10/2020 |
| Protocol 5: Guests  As much as possible, schools will limit guests, activities, and facilities use involving external groups or organizations – especially with individuals who are not from the local geographic area. | With the current guidance in place at this time, Divine Mercy will not be allowing guests to the school or outside agencies to use our facilities.   | 8/10/2020 |

# Benchmark F: Student and employee movement: entrance, movement within the building, and dismissal

With consideration to the Principles of Reopening, schools have implemented appropriate procedures to mitigate the spread of disease while students and employees are moving into, out of, and throughout the school building.

| Protocol 1: Schools will review their student arrival and dismissal procedures with consideration of public health recommendations strategies to reduce the spread of disease. | MDH School Planning Guide,<br>pp. 12-13 | Divine Mercy will have a staggered arrival between 7:40 -7:55 AM at doors 2 and 3. Students will enter and go straight to their classroom. Under the current guidelines, masks will be required in the hallway. We will rely on parent temperature screening and health checks each day, but students will receive a health screening through teacher observation at their classroom doors and will be required to wash their hands upon arrival at the classroom.  | 8/10/2020 |
|--|---|---|-----------|
|  |   | At dismissal, students will be sent to specific areas depending on their afterschool routine. Students whose parents walk up to pick them up will line up in the hallway by door 2 (physical distanced). Students getting picked up by car will be physically distanced by family in the gym while waiting for pick up at door 3. Students who ride the bus will line up in the 5 <sup>th</sup> grade hallway (physical distanced) and be escorted to the bus. Students going to aftercare will go directly to the cafeteria. Masks are required. |           |

| Protocol 2: Schools will develop procedures for student movement throughout the building during the school day.  | MDH School Planning Guide,<br>pp. 12-13  CDC Considerations for<br>Schools  | Students will stay in their classrooms in "family pods". Specialist teachers who wish to take a class to the gym or library (for instance) will meet and deliver the class to their door. Classes will travel in hallways in single file lines. All efforts will be made to avoid other groups. If they meet another class, they will take opposite sides of the hall to pass. | 8/10/2020 |
|--|---|--|-----------|
| Protocol 3: Schools will develop procedures for employee use of all shared common work spaces (e.g. lounges, restrooms, common offices, meeting spaces, work rooms). | CDC Considerations for Schools  | All staff and common work areas will have limited occupancy and be for employees only. The main office, conference room, and front vestibule will be used to interact with the broader public. Physical distancing and mask wearing will be required.  | 8/10/2020 |
| Protocol 4: Schools will review their procedures for bathroom use.   | CDC Considerations for Schools  | During the school day, the teaching staff will provide scheduled bathroom breaks for our learners. These bathroom breaks will be coordinated for no crossover of pods. Individual student use of the bathroom during the school day will require tracking (Older students sign out when they go to bathroom spaces) and masking procedures.                                    | 8/10/2020 |
| Protocol 5: Schools will review their procedures for the use of communal spaces (e.g. gym, playground, library, narthex).  | CDC Considerations for Schools  | The gym, playgrounds, library, music room, computer/STEM lab, and art spaces will be utilized throughout the day with efforts being made to spread out classes and develop systems for exit and delivery of students without contact, sanitizing of frequently touched surfaces, and hand washing.   | 8/10/2020 |
| Benchmark G: Food service plans  |   |  |           |
| Schools have implemented approp  | priate procedures to mitiga   | te the spread of disease during meal time at school.   |           |
| Protocol 1: Schools will review their procedures and schedules for food service (e.g. breakfast, snack, lunch).  | MDH School Planning Guide,<br>p. 5  | In consultation with the Food Service Director, the following protocol has been put in place:  | 8/10/2020 |
|  | MDH: Hand Hygiene for Food Handlers  MDH COVID-19 Prevention Guidance, p. 4 | Breakfast orders will be taken and recorded at the end of the school day for the next day. Lunchroom personnel will prepare breakfast crates for teachers by 7:30 AM. Teachers will pick up their breakfast crate and bring to room. Breakfast will be eaten in the classrooms. They will return the crate at the end of the day.  |           |
|  | CDC Considerations for Schools (Food Service)                               | One grade level will eat lunch in the lunchroom at a time. This grade level will be split into the two homeroom family pods and eat on side A or B of the lunchroom. (four persons to a table- physical distance of 3ft-pods separated by 6ft or more). A grade level teacher will monitor student lunchroom behavior and dismiss classes.                                     |           |

|  |   | They will help sanitize tables with bleach solution for the next group. Under the current guidance, lunches will be served already plated and there will be no self-service options.  |           |
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| Benchmark H: School and health o   | ffice operations  |   |           |
| Schools have implemented approp  | oriate procedures to mitiga   | te the spread of disease in school and health office operations.  |           |
| Protocol 1: Schools will analyze and adjust their physical space and front office procedures with consideration of public health recommended strategies to reduce the spread of disease. | MDH School Planning Guide, p. 4-6  CDC Considerations for Schools                 | A plexi-glass screen has been installed in the main entrance area. Pedestrian traffic must be buzzed in by the front office receptionist. Chairs in the waiting area will be marked off to promote physical distancing practices. The receptionist will monitor the traffic in the main hall to prevent congestion.  Efforts will be made to deliver and interact with public in non-contact ways utilizing the front entry area. | 8/10/2020 |
| Protocol 2: Schools will review all procedures related to access and use of the health office.   | MDH School Planning Guide   | Our school nurse will review all procedures relating to the health office.  | 8/10/2020 |
| Benchmark I: Transportation  Schools have implemented proced   | ures to mitigate the spread   | d of disease while transporting students.   |           |
| Protocol 1: Schools that manage their own transportation will analyze and adjust their transportation procedures and ensure availability of back-up drivers.                             | MDH School Planning Guide, p. 14  CDC Considerations for Schools (Transportation) | Most of our students rely on their parents for transportation to school. For students who do need school transportation, we will follow the procedures put in place by Faribault Transportation.  | 8/10/2020 |
| Protocol 2: Schools who rely on their district for transportation will review district protocols and develop a contingency plan if the district is unable to provide transportation.     |   | If the district is unable to provide transportation, we will offer before and after care to families so that they can bring their children to school before they leave for work and pick them up after they are done.   | 8/10/2020 |

| Benchmark J: Communal prayer, to  | h <mark>e Mass, and other Sacran</mark>   | nents   |           |
|---|---|---|-----------|
| Schools have procedures for comm  | nunal prayer and the celebi   | ration of the sacraments consistent with parish protocols.  |           |
| Protocol 1: Schools will analyze and adjust their Mass schedule, liturgical practices and traditions to ensure that all public celebrations of the Mass and other sacraments comply with Archdiocesan and parish requirements.  | The pastor or canonical administrator will provide direction on parish protocols. | Mass will be allowed to continue while utilizing the practices used at regular Sunday services to promote physical distancing. Groups will not exceed the maximum of 250 and masks will be worn.                | 8/10/2020 |
| Benchmark K: Thresholds for building closures  Heads of School are actively monitoring and addressing community spread of COVID-19 as it relates to decisions about short-term or long-term closure of the school building.   |   |   |           |
| Protocol 1: School Level: Schools will develop transparent criteria for implementing a short-term closure of their school building. The Head of School and Pastor will consult with the Archdiocesan Director for Catholic Education before announcing short-term closures. | Awaiting Final Guidance   | Divine Mercy Catholic School is awaiting final guidance on this question. Thresholds have not been communicated from MDH. As soon as we receive guidance, we will publish our intentions.                       | 8/10/2020 |
| Protocol 2: Systems Level: If the governor of Minnesota declares that all public school systems across the state will close, Catholic schools will follow the Archbishop's determination on how Catholic schools will respond.  |   | Divine Mercy Catholic School will follow the recommendation of the Archdiocese of St. Paul and Minneapolis on our response to a system shut down.   | 8/10/2020 |
| Protocol 3: If the local public school district declares that its local public school or district will close, the Head of School and Pastor will be responsible   |   | Divine Mercy Catholic School will work in coordination with Bethlehem Academy to determine closure in our local community. We will consult with the Pastor and provide a coordinated response for our families. | 8/10/2020 |

| for making a decision for its own school and will consult the Archdiocese as needed.   |   |            |
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| DOMAIN IV: COMMUNICATING, TR   | AINING & EDUCATING  |            |
| Benchmark A: Communications and training  Schools have effectively communicated their health been educated on the health and safety procedures   | and safety plan to all stakeholders. Parents, staff, teachers, and all others in the school comm<br>for shared involvement and responsibility.  | unity have |
| Protocol 1: Schools will post signs in highly visible locations (e.g., school entrances, restrooms) that promote every day protective measures and describe how to stop the spread of germs (such as by properly washing hands). | Signs have been purchased and will be posted in highly visible locations to help remind students and staff of our protocols and mitigation strategies.  | 8/10/2020  |
| Protocol 2: Schools will make regular, routine communications on reducing the spread of COVID-19.  | Through our weekly newsletter and online communication platforms, Divine Mercy will make regular, routine communications on reducing the spread of COVID-19.  | 8/10/2020  |
| Protocol 3: Schools will educate employees, students and families about when they/their child(ren) should stay home and when they may return to school if they have been sick, even prior to school opening.                     | Staff training on all protocols will occur before school begins. Students and families will be educated by the newsletter, other school communication, their classroom teacher, and videos on the signs and symptoms they should be looking for in order to discern when they should stay at home and when they can return to work. MDH handouts such as the decision tree will be shared with all. | 8/10/2020  |
| Protocol 4: Schools will train all employees, students, families, and community members (including volunteers) in school-level procedures found in the Pandemic Preparedness and Response Plan (PPRP).                           | Training will be provided through video, social media platforms, and other printed handouts on all the school-level procedures and protocols in the plan. This training will be put in easy to understand formats.  | 8/10/2020  |
| Protocol 5: The school will develop a MDH Planning   | Guide, p. 12- (Awaiting guidance on how theses should be reported to the state we already do  | 10/9/2020  |

plan for communicating a verified

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this with other things, so it is just finding out how they want us to do it.)

| report of a student or employee who has tested positive for COVID-19.   |                             | The State of Minnesota has developed a website to report a verified COVID-19 case. Divine Mercy's school nurse will utilize this system for reporting.   |           |
|---|-----------------------------|--|-----------|
| Protocol 6: Schools will communicate to families and staff their process for determining school-building closure.   |                             | We are awaiting final guidance on this issue. MDH has not published thresholds. Once a determination is made, we will communicate our protocol to the entire community.  | 10/9/2020 |
|   |                             | Divine Mercy Catholic School will monitor Rice County case rates and Public-School case rates, however, a decision to close the school building will be based on case rates at Divine Mercy Catholic School and Bethlehem Academy or instruction from the Archdiocese of St. Paul/Minneapolis. |           |
| Benchmark B: Supporting faith and   | d resilience                |  |           |
| Schools will encourage prayer for pand employees to trust in God's pr   |                             | e of the virus and draw upon the riches of the Catholic tradition to help stu<br>t of turmoil and disruption.  | ıdents    |
| Protocol 1: Schools will be mindful of the appropriate amount of COVID-19 information that is shared based on the development level of children.  |                             | Information will be tailored to the age group being addressed with specific emphasis placed on creating environments that are nurturing and promote healthy practices.   | 8/10/2020 |
| Protocol 2: Schools will be attentive and responsive to the social, spiritual, physical, and emotional needs of students and families.  |                             | The mission of Divine Mercy Catholic School includes forming the student-mind, body, and soul. We will continue to keep this mission at the forefront of all decision-making.  | 8/10/2020 |
| Benchmark C: Instructional contin   | uity and contingency plann  | ning   |           |
| Consistent with their academic prodistance learning if needed.  | ograms, schools will have p | lans to provide an approach to hybrid learning and to efficiently transition   | ı to      |
| Protocol 1: According to their ability, schools will have a plan to provide educational continuity for children who may not be able to be present in the school building for in-person learning (e.g. due to underlying health conditions, mental health concerns or a need to quarantine due to exposure to COVID-19). | See Appendix B & C          | Divine Mercy Catholic School is planning for all three scenarios. We are committed to meeting the needs of all students and will accommodate students who require online instruction. (See Handbook Addendum)  | 8/10/2020 |

| Protocol 2: According to their ability, schools will be prepared to implement short-term and long-term distance learning plans if in-person learning should be suspended for all students in the school. | See Appendix B & C | Divine Mercy has planned for Scenario 2 which would be a hybrid model and Scenario 3 which would be a distance learning model. We will work to be able to move from one scenario to another should the need arise. | 8/10/2020 |
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# **APPENDIX**

**APPENDIX A:** Additional Resources

Resources listed here do not indicate Archdiocesan approval or endorsement

# ADDITIONAL HEALTH AND SAFETY COVID-19 RESOURCES FOR SCHOOLS

2020-21 MDE MINNESOTA PUBLIC SCHOOLS PLANNING GUIDE (MDE)

**IEA Resources** (provided by Catholic Mutual)

<u>Initial Fall Reopening Guide</u> (State of Massachusetts)

**Recommendations for Reopening** (Sick Kids Children's Hospital, Canada)