Phase 3 COVID Mitigation Health Plans for Public Schools

Per an order from the Virginia Public Health Commissioner, each private school and public school division operating in the Commonwealth, must develop a plan for implementing COVID-19 mitigation strategies before reopening in accordance with the Virginia Phase Guidance for Schools. Plans are required to be submitted one business day before schools can offer programs in Phase 3.

VDOE has prepared a health plan guidance document, which can be found on the VDOE website. The document outlines the key elements to be included in a division plan. The document can be used as a template if desired, but that is not required. This submission form will ask you to identify which of those key elements are included in the final health plan.

This form is for public school divisions submitting health plans for Phase 3. If schools began offering programs in Phase 2 and are expanding those offerings in Phase 3, they must submit a Phase 3 plan. If schools did not offer programs in Phase 2 but open in Phase 3, they must submit a Phase III plan before opening.

Divisions should submit one form covering all applicable buildings and programs.

* Required

1. Email address *

2. Name of School Division *

3. Contact person for the plan *

Contact Information
4. Email address of the contact person for the plan *


5. Phone number for the contact person for the plan *


6. Was your plan developed in consultation with your local health department? (This is not required before your plan is submitted).

    Mark only one oval.

    ────
    ○ Yes
    ○ No
    ○ Don't know

Intent to Vary

7. Will your health mitigation strategies vary from the Phase Guidance in any major ways? If so, how? (e.g. no physical distancing on buses; athletic competitions; etc)


Phase III Program

Offerings

Phase III of Virginia's School Reopening permits in-person instruction for any students.
8. Please describe all the programs your school division will offer/ students you will serve in person in Phase III. How often will students attend in-person? *

9. Does your plan include information about a COVID-19 team within the school division and a point person at each school facility, including names of staff and contact information?

   Mark only one oval.
   
   - Yes
   - No
   - Don't know

10. Does your plan provide the name of a specific point of contact at your local health department and direct contact information for that person?

    Mark only one oval.
    
    - Yes
    - No
    - Don't know
11. Does your plan include health and absenteeism monitoring/approaches?

*Mark only one oval.*

- [ ] Yes
- [ ] No
- [ ] Don't know

12. Does your plan include a communications strategy that includes: i) Orientation and training for staff and students specific to new COVID-19 mitigation strategies; ii) Plans for communication with staff, parents, and students of new policies; and iii) Plans for how to communicate an outbreak or positive cases detected at the school.

*Mark only one oval.*

- [ ] Yes
- [ ] No
- [ ] Some but not all
- [ ] Don't know

13. Does your plan prepare for the provision of health services, including: i) medical-grade PPE for health services staff; ii) maintenance of typical (non-COVID-19) health services; and iii) planning for the provision of mental health services.

*Mark only one oval.*

- [ ] Yes
- [ ] No
- [ ] Some but not all
- [ ] Don't know
14. Please describe barriers to including any of the key elements from this section in your plan.

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________________________________________________________________________________________
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Key Elements: Promoting Behaviors that Reduce the Spread of COVID-19

In the VDOE Health Plan Guidance document, there are 4 key elements related to promoting behaviors that reduce the spread of COVID-19. Please indicate which of those elements are included in your plan, and any barriers to incorporating those elements in your plan.

15. Does your plan create an education/training plan for staff, students and families, including education of staff and students related to: i) Hand hygiene and respiratory etiquette; ii) Use of cloth face coverings; iii) Staying home when sick; and iv) Encouraging physical distancing.

Mark only one oval.

☐ Yes
☐ No
☐ Some but not all
☐ Don't know

16. Does your plan promote physical distancing?

Mark only one oval.

☐ Yes
☐ No
☐ Don't know
17. If so, explain how you will promote physical distancing, in classrooms, buses, etc.

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_________________________________________________________________________

_________________________________________________________________________

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18. Does your plan include actions to maintain adequate supplies to promote healthy hygiene?

*Mark only one oval.*

- [ ] Yes
- [ ] No
- [ ] Don't know

19. Does your plan include the provision of signs and messaging to promote healthy hygiene?

*Mark only one oval.*

- [ ] Yes
- [ ] No
- [ ] Don't know

20. Please describe barriers to including key elements from this section in your plan.

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### Key Elements: Maintaining Healthy Environments and Operations

In the VDOE Health Plan Guidance document, there are 6 key elements related to maintaining health environments and operations. Please indicate which of those elements are included in your plan, and any barriers to incorporating those elements in your plan.

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<td>21.</td>
<td>Does your plan ensure that water systems are safe to use after a prolonged facility shutdown? Consider water fountains.</td>
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<td>□ Yes</td>
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<td>22.</td>
<td>Does your plan for gatherings, field trips, and volunteer restrictions align with the Executive Order in effect?</td>
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<td>23.</td>
<td>Does your plan include health monitoring of staff and students?</td>
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24. If so, when, where, and by whom?

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25. Does your plan include the promotion of hygiene practices; including: i) cleaning and disinfection protocols that include frequently touched surfaces; transport vehicles; schedules for increased cleaning, routine cleaning, and disinfection; ensuring adequate cleaning supplies and correct use/storage; ii) additional hand sanitizer/handwashing stations; and iii) adequate supplies to minimize sharing to the extent possible (e.g. dedicated student supplies, lab equipment, computers, etc).

\textit{Mark only one oval.}

\begin{itemize}
  \item [\square] Yes
  \item [\square] No
  \item [\square] Some but not all
  \item [\square] Don't know
\end{itemize}

26. Does your plan ensure ventilation systems operate properly and increase circulation of outdoor air as much as possible?

\textit{Mark only one oval.}

\begin{itemize}
  \item [\square] Yes
  \item [\square] No
  \item [\square] Not sure
\end{itemize}
27. Does your plan contemplate training back-up staff to ensure continuity of operations? Consider instructional and support positions.

*Mark only one oval.*

- [ ] Yes
- [ ] No
- [ ] Not sure

28. Please describe barriers to including key elements from this section in your plan.

- [ ]
- [ ]
- [ ]
- [ ]

**Key Elements:**

*In the VDOE Health Plan Guidance document, there are 2 key elements related to protecting vulnerable individuals. Please indicate which of those elements are included in your plan, and any barriers to incorporating those elements in your plan.*

29. Have you created policy options to support those students and staff at higher risk for severe illness to limit their exposure risk (e.g. telework, modified job duties, virtual learning opportunities)?

*Mark only one oval.*

- [ ] Yes
- [ ] No
- [ ] Not sure
30. Does your plan describe flexible sick leave policies and practices that enable faculty, staff and students to stay home or self-isolate when they are sick or have been exposed?

*Mark only one oval.*

- [ ] Yes
- [ ] No
- [ ] Not Sure

31. Please describe barriers to including key elements from this section in your plan.

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Key Elements: Preparing for When Someone Gets Sick

In the VDOE Health Plan Guidance document, there are 4 key elements related to preparing for when someone gets sick. Please indicate which of those elements are included in your plan, and any barriers to incorporating those elements in your plan.

32. Does your plan include information about separating and isolating those who present with symptoms?

*Mark only one oval.*

- [ ] Yes
- [ ] No
- [ ] Not sure
33. Does your plan include information about facilitating the safe transportation of those of who are sick to home or healthcare facility?

*Mark only one oval.*

- [ ] Yes
- [ ] No
- [ ] Not sure

34. Does your plan include procedures for cleansing and disinfecting areas used by sick individuals?

*Mark only one oval.*

- [ ] Yes
- [ ] No
- [ ] Not sure

35. Does your plan include a communications plan with local health department to initiate public health investigation, contact tracing and consultation on next steps?

*Mark only one oval.*

- [ ] Yes
- [ ] No
- [ ] Not sure

36. Please describe barriers to including key elements from this section in your plan.

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Key Elements: Planning to Close

In the VDOE Health Plan Guidance document, there are 3 key elements related to planning for extended closures. Please indicate which of those elements are included in your plan, and any barriers to incorporating those elements in your plan.

37. Does your plan include information about which conditions will result in the reduction of in-person classes?

*Mark only one oval.*

- [ ] Yes
- [ ] No
- [ ] Not sure

38. Does your plan include information about which conditions will result in a complete school closure?

*Mark only one oval.*

- [ ] Yes
- [ ] No
- [ ] Not sure

39. Does your plan include information about which conditions will result in a complete division closure?

*Mark only one oval.*

- [ ] Yes
- [ ] No
- [ ] Not sure
40. Please describe barriers to including key elements from this section in your plan.

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The Plan

41. Is your plan (or information about your health policies) publicly available online? (This is not required).

*Mark only one oval.*

☐ No

☐ Yes

☐ Not yet, but this information (or some version of it) will be posted in the future.

☐ Other: ____________________________

42. If so, please provide the link to your plan.

________________________________________________________________________

43. Is there anything else you want us to know about your health compliance plan?

________________________________________________________________________

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________________________________________________________________________
44. Upload a copy of your plan, and any other relevant documents. Please be sure that the name of your school or division is in the file name.

Files submitted:

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