



Throughout the 2020-2021 school year, Virginia divisions will be monitoring local public health conditions and evaluating instructional options reflective of those conditions. In September 2020, the [CDC issued guidance on Indicators for Dynamic School Decision-Making](#); which the Virginia Department of Health (VDH) has incorporated into its now [public-facing pandemic dashboard](#). It is important to note that in addition to public health metrics, the CDC emphasizes that transmission risk in any given school is also dependent on the successful implementation of school and community mitigation strategies. The VDH recommends this CDC model be used by Divisions to assess transmission risks and inform decisions about school operations and necessary mitigation strategies.

The CDC Indicators have been aligned to the [Phase Guidance for Virginia Schools](#) previously issued. Below is a summary of how these pieces of state and federal guidance on school reopening plans should be considered by local school leaders.



## GUIDANCE FOR SCHOOLS

### LOWEST OR LOWER RISK

Schools may consider Phase III Recommendations



In schools with lower risk of transmission, all students may be given the opportunity for in person instruction with mitigation and physical distancing measures in place. Facilities and staffing limitations may necessitate hybrid schedules.



A fully remote learning option should be available for all students and staff.

### MODERATE OR HIGH RISK

Schools may consider Phase II Recommendations



In schools with moderate or higher risk of transmission, specific learners should be prioritized for limited in person instruction, including willing students with disabilities, english learners, and PreK - 3rd grade students.



All other students should be served remotely. Fully remote option should be available to all.

### HIGHEST RISK

Schools may consider Phase I Recommendations



In schools with high risk of transmission, in person instruction should be limited to students with disabilities, as deemed appropriate by parents and IEP teams.



All other students should be served remotely. Divisions may consider a fully remote option.



Plans should be in place to phase back to in-person instruction.