

**NOTICE OF SPECIAL MEETING OF THE BOARD OF TRUSTEES
MINIDOKA COUNTY JOINT SCHOOL DISTRICT #331
RUPERT, MINIDOKA COUNTY, IDAHO**

NOTICE IS HEREBY GIVEN that an **Special Meeting** of the Board of Trustees of the Minidoka County Joint School District is posted for **Monday, June 29, 2020 at 10:30 AM** at the **District Service Center 310 10th Street Rupert, ID 83350** at which meeting the following business will be conducted:

CALL TO ORDER & ROLL CALL:

Bonnie Heins, Chair	Dr. Kenneth Cox, Superintendent
Rick Stimpson, Vice Chair	Kerri Tibbitts, Board Clerk
Russ Suchan, Trustee	Reed Cotten, School Counsel
Jeff Gibson, Trustee	
Mary Andersen, Trustee	

1. Join Zoom Meeting
<https://zoom.us/j/93750820644?pwd=L2JPYWZ5bytnT2hnaDRrdE91WFZtUT09>
Meeting ID: 937 5082 0644
Password: i13Z1t
2. CALL TO ORDER
3. ROLL CALL
4. AGENDA APPROVAL (Action Item)
5. DISCUSSION ITEMS
 - A. Proposed Draft Plan for Returning to School
 - B. Additional Considerations
6. ADJOURNMENT

#boldsubject#

2

** Robert's Rules of Order will govern all meetings

*** Any person needing special accommodations to participate in the above-noticed meeting should contact the Minidoka County School District one (1) day prior to the meeting at 310 10th St., Rupert, Id. (208) 436-4727

Minidoka County School District 331 Pandemic Operations Plan

Green: Traditional No Community Spread

No community spread (as defined by Idaho Department of Health & Welfare) and no positive cases in a school.

Safety procedures will be in place to reduce the chance of spread of illness in all scenarios.

PPE Strategies

- Optional Masks/Face Shields
- Any person exhibiting mild symptoms must wear a mask until leaving campus
- Establish and maintain hand hygiene stations at key locations in the building
- Use of sneeze guards at appropriate locations
- Have a plan for when a student, staff member, or visitor becomes sick
- Identify an isolation/screening room in the school

Classroom

- Staff and students trained in physical distancing, handwashing, respiratory etiquette and mask used to mitigate exposure.
- Sanitize desks, keyboards, and screens
 - Schedule desk sanitation during school day at appropriate transitions
 - Custodial staff routinely clean highly touched surfaces in the evenings
- Desks – arrange to account for physical distancing
- Integrate good hygiene practices into instruction and classroom expectations
- Limit the use of shared materials and spaces
 - Keep student belongings separate
 - Avoid sharing supplies
 - Avoid sharing electronic devices, toys, books, and other games or learning aids.
- Avoid outside food in the classroom
- Students and staff use personal water bottles vs. hallway/classroom drinking fountains

Office Strategies and Other Non-Instructional Spaces

- Maintain 6 feet distance when possible (floor stickers)
- Sneeze guards placed at counters where public or guests to the school may stand or approach
- Sanitize surface areas regularly and frequently
- Hand sanitizer at each workstation
- Cafeteria
 - Regular hot menu served in the cafeteria
 - Students eat in cafeteria; stagger lunch times and increase serve times

Minidoka County School District 331 Pandemic Operations Plan

- Offer options to eat outside
- Use of touchless hand sanitizer at start of all serving lines
- Self-service of items that are pre-packaged only
- Staff use separate restrooms than students
- Lockers – No assignment of lockers except for special circumstances. Individual locker assignments where possible.
- Have a plan for when a student, staff member, or visitor becomes sick
- Identify an isolation/screening room in the school

Visitors

- Post Stop the Spread signs at entry points and in highly visible areas
- No irregular/unscheduled visitors
- Limit visitors to parents, by appointment, and critically important visitors on campus
- Lock exterior doors during school hours
- Develop a visitation procedure for appointments. Example: call the office upon arrival from car vs. walking into the main office
- Develop parent pick-up & drop-off procedures

Gatherings

- Implement strategies that discourage gathering for areas (bus lane, restrooms, recess, hallways, etc.)
- Limit field trips, assemblies, and other large gatherings if physical distancing cannot be achieved.
- Limit mixing groups
- Avoid personal contact such as touching, hugs, high fives, etc.

Communication Strategies to students, staff, parents

- Educate staff and families about good hygiene, physical distancing, symptoms of COVID-19 and when to stay home due to illness.
- Regular communication with parents, students, and staff

Plan in place for vulnerable students and staff.

Minidoka County School District 331 Pandemic Operations Plan

Yellow: Enhanced Traditional

Minimal community spread (as defined by Idaho Department of Health and Welfare)

PPE Strategies

- Masks/Face Shield recommended for students and staff
 - Wear face protection when working in groups and when physical distancing is not possible.
- Any person exhibiting mild symptoms must wear a mask until leaving campus
- Establish and maintain hand hygiene stations at key locations in the building
- Use of sneeze guards at appropriate locations
- Have a plan for when a student, staff member, or visitor becomes sick
- Identify an isolation/screening room in the school

Classroom

- Staff and students trained in physical distancing, handwashing, respiratory etiquette and mask use to mitigate exposure.
- Sanitize desks, keyboards, and screens
 - Schedule a desk sanitation during school day at appropriate transitions
 - Custodial staff routinely clean highly touched surfaces in the evenings
- Desks – arrange to account for physical distancing
- Integrate good hygiene practices into instruction and classroom expectations
- Restrict classroom activities that don't allow for 6 feet of distance between students as much as possible
- Limit the use of shared materials and spaces
 - Keep student belongings separate
 - Avoid sharing supplies
 - Avoid sharing electronic devices, toys, books, and other games or learning aids.
- Avoid outside food in the classroom
- Students and staff use personal water bottles vs. hallway/classroom drinking fountains

Office Strategies and Other Non-Instructional Spaces

- Maintain 6 feet distance when possible (floor stickers)
- Sneeze guards placed at counters where public or guests to the school may stand or approach
- Sanitize surface areas regularly and frequently
- Hand sanitizer at each workstation
- Cafeteria

Minidoka County School District 331 Pandemic Operations Plan

- Regular hot menu served in the cafeteria
- Students eat in cafeteria; stagger lunch times and increase serve times
- Offer options to eat outside
- Use of touchless hand sanitizer at start of all serving lines
- Self-service of items that are pre-packaged only
- Lockers – No assignment of lockers except for special circumstances. Individual locker assignments where possible.
- Staff use separate restrooms than students
- Have a plan for when a student, staff member, or visitor becomes sick

Visitors

- Post Stop the Spread signs at entry points and in highly visible areas
- No irregular/unscheduled visitors
- Limit visitors to parents, by appointment, and critically important visitors on campus
- Doors locked during school hours
- Develop a visitation procedure for appointments. Example: call the office upon arrival from car vs. walking into the main office
- Develop parent pick-up & drop-off procedures

Gatherings

- Implement strategies that discourage gathering for areas (bus lane, restrooms, recess, hallways, etc.)
- Cancel field trips, assemblies, and other large gatherings if physical distancing cannot be achieved.
- Restrict mixing groups
- Avoid personal contact such as touching, hugs, high fives, etc.

Communication Strategies to students, staff, parents

- Educate staff and families about good hygiene, physical distancing, symptoms of COVID-19 and when to stay home due to illness.
- Regular communication with parents, students, and staff

Plan in place for vulnerable students and staff.

Minidoka County School District 331 Pandemic Operations Plan

Orange: Modified Schedule

Moderate community spread (as defined by Idaho Department of Health and Welfare) and positive cases with some risk of exposure in an individual school, classroom and/or within the District.

See protocols and process from Yellow: Enhanced Traditional + Modified Schedule intended to reduce the number of students in the building at one time.

This contingency plan is created as an option to avoid complete school closure. If physical distancing requirements become more stringent, and/or cases are identified within a school and/or classroom, schools may go to a modified schedule. When not in school, students would use their school-issued device to continue learning remotely.

Minidoka recognize this plan places a burden on families to make accommodations for students when they are not in school. This plan was developed to avoid complete school closure in order to maintain regular contact between teachers and students.

a. Elementary:

b. Secondary:

Red: Distance Learning

Substantial community spread (as defined by Idaho Department of Health and Welfare) and widespread positive cases with significant risk of exposure within a school and/or multiple schools.

If there is a state-wide or local order to close all schools or an individual school, learning will continue remotely. Students will interact with their peers and teachers using their school-issued device. Students will submit work, receive feedback, and grading will continue until schools can reopen.

Minidoka County School District 331
Pandemic Operations Plan

Facilities & Operations – Pandemic Plan
Food Services – Pandemic Plan
Transportation – Pandemic Plan

DRAFT

Minidoka County School District 331
Pandemic Operations Plan

Resources

<https://www.cdh.idaho.gov/pdfs/cd/Coronavirus/Resource%20Docs/schools/Schools-Guidance-COVID.pdf>

https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/guidance-for-schools.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fspecific-groups%2Fguidance-for-schools.html

DRAFT

SCHOOLS DURING THE COVID-19 PANDEMIC



The purpose of this tool is to assist administrators in making (re)opening decisions regarding K-12 schools during the COVID-19 pandemic. It is important to check with state and local health officials and other partners to determine the most appropriate actions while adjusting to meet the unique needs and circumstances of the local community.

Should you consider opening?

- ✓ Will reopening be consistent with applicable state and local orders?
- ✓ Is the school ready to protect children and employees at higher risk for severe illness?
- ✓ Are you able to screen students and employees upon arrival for symptoms and history of exposure?

ANY
NO



**DO NOT
OPEN**

Are recommended health and safety actions in place?

- ✓ Promote healthy hygiene practices such as hand washing and employees wearing a cloth face covering, as feasible
- ✓ Intensify cleaning, disinfection, and ventilation
- ✓ Encourage social distancing through increased spacing, small groups and limited mixing between groups, if feasible
- ✓ Train all employees on health and safety protocols

ALL
YES



ANY
NO



**MEET
SAFEGUARDS
FIRST**

ALL
YES



Is ongoing monitoring in place?

- ✓ Develop and implement procedures to check for signs and symptoms of students and employees daily upon arrival, as feasible
- ✓ Encourage anyone who is sick to stay home
- ✓ Plan for if students or employees get sick
- ✓ Regularly communicate and monitor developments with local authorities, employees, and families regarding cases, exposures, and updates to policies and procedures
- ✓ Monitor student and employee absences and have flexible leave policies and practices
- ✓ Be ready to consult with the local health authorities if there are cases in the facility or an increase in cases in the local area

ALL
YES



**OPEN AND
MONITOR**

ANY
NO

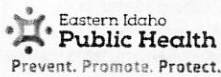
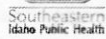
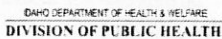


**MEET
SAFEGUARDS
FIRST**



Table 3. Potential mitigation strategies for public health functions. Public health control activities by level of COVID-19 community transmission

None to Minimal	Minimal to Moderate	Substantial
<p>Evidence of isolated cases or limited community transmission, case investigations underway, no evidence of exposure in large communal setting, e.g., healthcare facility, school, mass gathering.</p>	<p>Widespread and/or sustained transmission with high likelihood or confirmed exposure within communal settings with potential for rapid increase in suspected cases.</p>	<p>Large scale community transmission, healthcare staffing significantly impacted, multiple cases within communal settings like healthcare facilities, schools, mass gatherings etc.</p>
<ul style="list-style-type: none"> • Continue contact tracing, monitor and observe contacts as advised in guidance to maximize containment around cases. • Isolation of confirmed COVID-19 cases until no longer considered infectious according to guidance. • For asymptomatic close contacts exposed to a confirmed COVID-19 case, consideration of movement restrictions based on risk level, social distancing. • Monitoring close contacts should be done by jurisdictions to the extent feasible based on local priorities and resources. • Encourage HCP to develop phone triage and telemedicine practices. • Test individuals with signs and symptoms compatible with COVID-19. • Determine methods to streamline contact tracing through simplified data collection and surge if needed (resources including staffing through colleges and other first responders, technology etc.). 	<ul style="list-style-type: none"> • May reduce contact tracing if resources dictate, prioritizing to those in high-risk settings (e.g., healthcare professionals or high-risk settings based on vulnerable populations or critical infrastructure). • Encourage HCP to more strictly implement phone triage and telemedicine practices. • Continue COVID-19 testing of symptomatic persons; however, if testing capacity limited, prioritize testing of high-risk individuals. 	<ul style="list-style-type: none"> • May reduce contact tracing if resources dictate, prioritizing to those in high-risk settings (e.g., healthcare professionals or high-risk settings based on vulnerable populations or critical infrastructure). • Encourage HCP to more strictly implement phone triage and telemedicine practices. • Continue COVID-19 testing of symptomatic persons; however, if testing capacity limited, prioritize testing of high-risk individuals.



COVID-19 Guidance for Schools

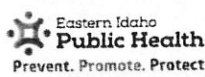
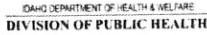
This guidance uses the most up-to-date information available from the CDC and emerging best practices, thus subject to change.

Schools, working together with local public health districts, have an important role in slowing the spread of diseases to help ensure students have safe and healthy learning environments. Schools serve students, staff, and visitors from throughout the community. All of these people may have close contact in the school setting, often sharing spaces, equipment, and supplies.

Schools are encouraged to review the checklist in Appendix A to ensure that they have everything in place to prevent COVID-19 infections, to respond to cases when they occur among students and/or staff, and to be prepared for short-term and long-term school closures. Public health districts are available to review plans and provide assistance.

Guidance for schools includes the following:

- Confirmed Case in School, Regardless of Community Transmission
- Category 1: No community transmission (preparedness phase)
- Category 2: When there is minimal to moderate community transmission
- Category 3: When there is substantial community transmission
- Communication and Guidance for School Staff and Parents
- Appendix A COVID-19 Preparedness Checklist



COVID-19 Guidance for Schools

Confirmed Case in School, Regardless of Community Transmission

Any school in any community may need to implement short-term closure procedures regardless of community spread if an infected person has been in a school building.

Coordinate with your local public health district.

- Contact your local public health district and we will work with you to determine a course of action
- Begin identifying anyone who may have been in close contact with a confirmed or suspected COVID-19 case. Close contact is less than 6 feet for more than 15 minutes. While face coverings are believed to reduce the risk, they are not considered as protective for the purpose of identifying close contacts.
- Collaborate with your local public health agency to determine the process for notifying close contacts and instructions for staying home and self-monitoring for symptoms, and follow CDC guidance if symptoms develop.
 - Example: local public health may reach out to close contacts via phone for an official notification, and the school will disseminate a letter to the school community informing them of the situation.

Follow local public health guidance for course of action. Recommendations will be given on a case-by-case basis, and could include the following:

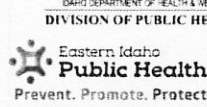
- Exposure to others in the school was minimal, no close contacts were identified, and positive case should self-isolate and return once criteria to discontinue home isolation and quarantine have been met.
- Exposure to others in the school was moderate, a handful of close contacts were identified, and positive case and close contacts should stay home for isolation.
- Exposure to others was severe, multiple close contacts were identified and risk of exposure to larger school community warrants a dismissal of in-person learning.

A short-term dismissal of students and most staff for 1-2 days may be recommended.

- Initial short-term dismissal allows time for the local health officials to gain a better understanding of the COVID-19 situation impacting the school. This allows the local health officials to help the school determine appropriate next steps, including whether an extended dismissal duration is needed to stop or slow further spread of COVID-19.
- Local health officials' recommendations for the scope (e.g., a single school, multiple schools, the full district) and duration of school dismissals will be made on a case-by-case basis using the most up-to-date information about COVID-19.
- During school dismissals, also cancel extracurricular group activities, school-based afterschool programs, and large events (e.g., assemblies, field trips, and sporting events).
- Encourage and practice physical distancing.

Extended school dismissal may be recommended.

- Depending on the level of risk and subsequent cases as a result of exposure at school, a longer school dismissal may be warranted.



COVID-19 Guidance for Schools

- Work with local health officials on whether staying open for staff while students stay home is advised, or reinstate telecommuting or other alternative work opportunities.
- Administrators are not expected to make extended school dismissal decisions or determine when students and staff should return to schools on their own and should work in close collaboration and coordination with local health officials.
- Students and staff who are well but are taking care of or share a home with someone with a case of COVID-19 should follow instructions from local health officials to determine when to return to school.

Communicate with staff, parents, and students regarding dismissal decisions and possible COVID-19 exposure.

- Include messages to counter potential stigma and discrimination
- Coordinate responses with local public health
- Maintain confidentiality in accordance with the Americans with Disabilities Act (ADA) and Health Insurance Portability and Accountability Act (HIPAA)
- Outline intended response efforts

Clean and disinfect thoroughly.

- Close off areas used by the individual with COVID-19 and wait as long as possible, up to 24 hours, before beginning cleaning and disinfecting. Open doors and windows if possible.
- Clean all other areas, especially highly touched surfaces, such as doorknobs, lights, desks, phones, keyboards, faucets, sinks. Resource: Cleaning and Disinfecting Your Facility

Reinstate strategies to continue education and related supports to students as needed.

COVID-19 Guidance for Schools

Category 1 No Community Spread

Evidence of isolated cases or limited community transmission, case investigations underway, no evidence of exposure in large communal setting, e.g., healthcare facility, school, mass gathering.

Review, update, and implement emergency operations plan and reinforce healthy hygiene practices.

- Include strategies (Non-pharmaceutical interventions, or NPI) to reduce the spread of a wide variety of infectious diseases, physical distancing and school dismissals that can be used to stop the spread.
- Emphasize everyday preventive actions for students and staff
 - [CDC Staying Home When Sick Flyer](#) / [What To Do If You're Sick](#)
 - [Spanish Version](#)
 - [CDC Avoid Spreading Germs At Work Flyer](#) / [Stop the Spread of Germs](#)
 - [Spanish Version](#) / [Spanish Version](#)
 - [CDC Handwashing Posters for Children and Teens](#)
 - [CDC Cover Your Cough Flyer](#)
 - [Spanish Version](#)

Intensify cleaning and disinfection efforts.

- Enhance cleaning of high touch surfaces like doorknobs, toilet handles, light switches, classroom and bathroom sink handles, countertops.
- Ensure that hand sanitizer, soap/paper towels, and tissues are widely available in school facilities.

Monitor and plan for absenteeism.

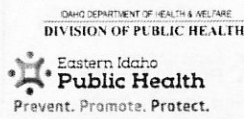
- Day-to-day reporting (absenteeism) of students and staff, and review for patterns for large increases.
- Encourage students and staff to stay home when sick or when they have symptoms, even without documentation from doctors. Use flexibility, when possible, to allow staff to stay home to care for sick family members, especially for those with common cold and flu symptoms, which are similar to COVID-19.
- Cross-train staff and create a roster of trained back-up staff.

Assess group gatherings and events.

- Review any planned events (e.g. assemblies, field days, athletic events) and determine if physical distancing strategies can be put place. If not, consider cancelling, rescheduling or modifying. Give special consideration to events that might put students, staff, or their families in close proximity to others from communities that may have identified cases of COVID-19.

Create and test communication plans for use within the school community.

- Create strategies for communicating with staff, students, and their families, including sharing steps being taken to prepare, how information will be shared in the future.
- Designate a staff person to be responsible for responding to COVID-19 concerns, and ensure all staff and families know who this person is, and how and when to contact them.
- Put system in place for having staff and families self-report to the school if they or their student have symptoms of COVID-19, a positive test, or were exposed to someone with COVID-19 within the last 14 days.
 - Maintain privacy and confidentiality.



COVID-19 Guidance for Schools

Require students and staff to stay home if they are sick or have symptoms. Establish procedures for students and staff who become sick or develop symptoms at school.

- Sick or symptomatic staff and students should be sent home or to a healthcare facility depending on how severe their symptoms are as soon as possible, and keep them separate and isolated from well students and staff until they can leave. Following [CDC guidance for caring for oneself and others](#) who are sick.
- Schools are not expected to screen students or staff to identify cases of COVID-19. If a school has cases of COVID-19, local health officials will help identify those individuals and will follow up on next steps.
Resource: [Flyer - Steps to help prevent the spread of COVID-19 if you are sick](#) / [Spanish Version](#)

Begin implementing mitigation strategies and plan for when community spread occurs (non-pharmaceutical interventions or NPIs).

- [Personal NPIs](#) (e.g. stay home when sick, cover coughs, wash hands, etc.)
- [Community NPIs](#) (e.g. social and physical distancing)
- [Environmental NPIs](#) (e.g. routine cleaning practices)

Review and update leave (time off) policies and excused absence policies.

- Implement flexible sick leave policies and practices that enable staff to stay home when they are sick, have been exposed, or caring for someone who is sick.
 - Leave policies should also account for employees who need to stay home with their children if there are school or childcare closures, or to care for sick family members.
- Develop policies for return-to-school after COVID-19 illness using CDC's [criteria to discontinue home isolation and quarantine](#)

Provide Staff Training.

- Train staff on all safety protocols.
- Conduct training virtually or ensure physical distancing is maintained during training.

Ensure Consistent Non-School Events Facility Use.

- Encourage organizations that share or use school facilities to follow your plans.
- Share your re-opening and operational plans with other organizations that utilize your school space.

Support Coping and Resilience.

- Encourage employees and students to take breaks from watching, reading, or listening to news stories about COVID-19, including social media if they are feeling overwhelmed or distressed.
- Promote employees and students eating healthy, exercising, getting sleep, and finding time to unwind.
- Encourage employees and students to talk with people they trust about their concerns and how they are feeling.
- Consider posting signage for the [Idaho COVID-19 hotline \(Spanish Version\)](#), the national distress hotline: 1-800-985-5990, and/or text "TalkWithUs" for English or "Hablamos" for Spanish to 66746
 - [Disaster Helpline Wallet Card](#)

Category 2 Minimal to Moderate Community Transmission

Widespread and/or sustained transmission with high likelihood or confirmed exposure within communal settings, with potential for rapid increase in suspected cases.

If local health officials report there are multiple cases of COVID-19 in the community, schools may need to implement additional strategies in response to prevent spread in the school, but they should continue using the strategies they implemented when there was no community transmission. These additional strategies include:

Coordinate with local health officials.

- This should be a first step in making decisions about responses to the presence of COVID-19 in the community. Health officials can help a school determine which set of strategies might be most appropriate for their specific community's situation.

Implement multiple physical distancing strategies. Select strategies based on feasibility given the unique space and needs of the school:

- Pursue virtual group events, gatherings, or meetings in lieu of field trips, assemblies, special performances, spirit nights, as possible; and promote 6 feet between people if events are held, and limit group size to support appropriate physical distancing.
- **Cancel or modify classes where students are likely to be in very close contact.** In physical education or other close contact classes, consider having teachers come to classrooms to prevent classes mixing with others in the gymnasium or music room.
- **Increase the space between desks.** Rearrange student desks to maximize the space between students. Turn desks to face in the same direction (rather than facing each other) to reduce transmission caused from virus-containing droplets (e.g., from talking, coughing, sneezing).
- **Avoid mixing students in common areas.**
 - Allow students to eat lunch and breakfast in their classrooms or stagger lunch.
 - Stagger recess times and/or separate recess areas by class.
 - Send a few students into the library to pick out books rather than going as a class.
 - Restrict hallway use through homeroom stays or staggered release of classes.
 - Try to avoid taking multiple classes to bathrooms at once (e.g., avoid having all classes use the bathroom right after lunch or recess).
 - Ensure student and staff groups (cohorting) are static as much as possible (all day for young children, as much as possible for older children).
- **Stagger arrival and/or dismissal times.** These approaches can limit the amount of close contact between students in high-traffic situations and times.
- **Reduce congestion in the health office.** Use the health office for children with flu-like symptoms and a satellite location for first aid or medication distribution.
- **Limit nonessential visitors.** Limit the presence of volunteers for classroom activities, mystery readers, cafeteria support, and other activities.
- **Limit cross-school transfer for special programs.** If students are brought from multiple schools for special programs (e.g., music, robotics, academic clubs), consider using distance learning to deliver the instruction or temporarily offering duplicate programs in the participating schools.



COVID-19 Guidance for Schools

- **Teach staff, students, and their families to maintain distance from each other in the school.** Educate staff, students, and their families at the same time and explain why this is important.
- **Consider alternative class size and structure.**
 - Create hybrid classrooms where students can attend virtually and in-person, reducing social contacts.
 - Hold physical education and music classes outside and encourage students to spread out.
 - Turn desks to face same direction and space at least 6 feet apart.
 - Stagger days or instructional blocks of time (morning/afternoon).
- **Teach and reinforce the wearing of cloth face coverings when practical while at school.**
 - Staff and students (and visitors and volunteers, if permitted) should be encouraged to wear cloth face coverings.
 - Personal cloth face coverings can be worn, or school can provide for those who do not have one but wish to wear one.
 - When physical distancing cannot take place, further reinforce the use of cloth face coverings.
- **Conduct daily health screenings of employees and students for COVID-19 symptoms upon entry to the facility, including a check for low-grade fever with no-touch thermometer and/or daily symptom checking.**
- **Pursue options to convene sporting events and participation in sports activities in ways that minimize the risk of COVID-19 transmission to players, families, coaches, and communities.**
 - Discourage activities that promote heaving breathing (e.g. singing, cheering, shouting) and create alternative ways to show support (e.g. clapping or waving).
 - Limit spectators to allow for appropriate physical distancing and encourage cloth face coverings in group settings; consider streaming sporting events live.

Maintain healthy environments.

- **Intensify cleaning and sanitizing of drinking fountains.** Encourage staff and students to bring their own water to minimize use and touching of water fountains, and take steps to ensure water systems and features are safe after prolonged facility shutdown.
- **Clean and disinfect school buses or other transport vehicles.** See guidance for bus transit operators, and create distance between children when possible.
- **Assess shared objects and space for personal belongings.**
 - Discourage sharing of items that are difficult to clean.
 - Keep child's belongings separated from others in individually labeled containers, cubbies, or areas.
 - Minimize sharing high touch materials where possible (e.g. individual art supplies) or limit use of supplies/equipment by one group of children at a time and clean and disinfect between use.
 - Avoid sharing personal items (toys, books, electronic devices).
- **Install physical barriers and guides.**
 - Place sneeze guards or partitions in areas where it's difficult to maintain 6 feet (e.g. reception desks, between bathroom sinks).
 - Provide physical guides, such as tape on floors or sidewalks and signs on walls to remind students to remain 6 feet apart. Particularly with line formation, consider one-way routes in hallways.

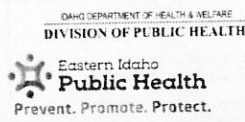
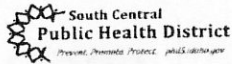


COVID-19 Guidance for Schools

- **Modify communal areas.**
 - Close communal use shared spaces such as dining halls and playgrounds with shared playground equipment if possible; otherwise, stagger use, and clean and disinfect between uses.
- **Adapt food service.**
 - Have children bring their own meals as feasible, or serve individually plated meals in classrooms; eliminate buffet or family style meals.
 - Use disposable food service items (e.g. utensils, dishes). When not feasible or desirable, handle with gloves and wash with dish soap and hot water or dishwasher. Individuals should wash their hands after removing gloves or handling food service items.
 - If food is offered at an event, have pre-packaged boxes or bags for attendees.

Consider ways to accommodate the needs of children and families at higher risk for serious illness from COVID-19.

- Honor requests of parents who may have concerns about their children attending school due to underlying medical conditions of those in their home.
- Staff who cannot be at school due to their own high-risk conditions can provide distance learning instruction to those students who are also unable to attend.
- People 65 years of age and older.
- The CDC lists underlying medical conditions that may increase the risk of serious COVID-19 for people of any age:
 - **Blood disorders** (e.g. sickle cell disease or on blood thinners).
 - **Severe obesity** (i.e. body mass index [BMI] of 40 or higher)
 - **Chronic kidney disease as defined by your doctor.** Patient has been told to avoid or reduce the dose of medications because kidney disease, or is under treatment for kidney disease, including receiving dialysis.
 - **Chronic liver disease** as defined by your doctor (e.g., cirrhosis, chronic hepatitis). Patient has been told to avoid or reduce the dose of medications because liver disease or is under treatment for liver disease.
 - **Compromised immune system** (immunosuppression) (e.g., seeing a doctor for cancer and treatment such as chemotherapy or radiation, received an organ or bone marrow transplant, taking high doses of corticosteroids or other immunosuppressant medications, HIV or AIDS).
 - **Endocrine disorders** (e.g., diabetes mellitus).
 - **Metabolic disorders** (such as inherited metabolic disorders and mitochondrial disorders).
 - **Heart disease** (such as congenital heart disease, congestive heart failure and coronary artery disease).
 - **Lung disease** including asthma or chronic obstructive pulmonary disease (chronic bronchitis or emphysema) or other chronic conditions associated with impaired lung function or that require home oxygen.
 - **Neurological and neurologic and neurodevelopment conditions** [including disorders of the brain, spinal cord, peripheral nerve, and muscle such as cerebral palsy, epilepsy (seizure disorders), stroke, intellectual disability, moderate to severe developmental delay, muscular dystrophy, or spinal cord injury].



COVID-19 Guidance for Schools

Category 3 Substantial Community Transmission

Large-scale community transmission, healthcare staffing significantly impacted, multiple cases within communal settings like healthcare facilities, schools, mass gatherings, etc.

Additional strategies should be considered when there is substantial transmission in the local community in addition to those implemented when there is no, minimal, or moderate transmission. These strategies include:

Continue to coordinate with local health officials.

- If local health officials have determined there is substantial transmission of COVID-19 within the community, they will provide guidance to administrators on the best course of action for schools. These strategies are expected to extend across multiple programs, schools, or school districts within the community, as they are not necessarily tied to cases within schools.

Consider extended school dismissals.

- In collaboration with local health officials, implement extended school dismissals (e.g., dismissals for longer than two weeks). This longer-term, and likely broader-reaching, dismissal strategy is intended to slow transmission rates of COVID-19 in the community.
- During extended school dismissals, also cancel extracurricular group activities, school-based afterschool programs, and large events (e.g., assemblies, spirit nights, field trips, and sporting events).
- Remember to implement strategies to ensure the continuity of education (e.g., distance learning) as well as meal programs and other essential services for students.

Communication and Guidance for Parents and Staff

What increases the chance of school closures?

- Experiencing a positive case or cluster of cases where:
 - Physical distancing strategies are not in place
 - Students and staff do not consistently wear cloth face coverings
- Not cleaning and disinfecting appropriately
- Not washing and/or sanitizing hands frequently
- Not limiting the mixing of students
- Holding mass gatherings, especially with attendees outside of your local community
- Sick staff and/or students on campus when symptomatic
- Rapid rise in positive cases in the local community that meet or exceed hospital capacity to manage

My child attends a school where a COVID-19 case has been confirmed. What should I do?

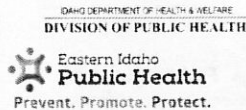
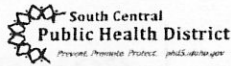
- **Guidance from local public health districts may be given on a case-by-case basis.** Transmission takes place with close contact (shared a classroom, was seated next to the person for at least 15 minutes), and there is a chance your student was not exposed (in another wing of the school). Some examples of guidance may include:
 - Monitor for signs and symptoms – [Symptom Self Checker](#) / [Spanish Version](#) or the [COVID-19 Screen Tool](#).
- If a student or staff is medium or high-risk reference:
 - [Who should self-quarantine after potential COVID-19 exposure.](#)
 - Encourage good hygiene – stop handshaking, clean hands at the door and at regular intervals, avoid touching your face and cover coughs and sneezes.
 - Stay home if you are sick, have symptoms, or have a sick or symptomatic family member in your home.
 - If recommended by the CDC, wear a face covering, but keep in mind this may cause an increase in touching the eyes, nose, and mouth.
- The CDC does not recommend testing for people who do not have symptoms.

What is considered a “close contact”?

- The CDC defines it as *a person that has been within 6 feet of the infected person for a prolonged period of time (about 15 minutes). Wearing a face covering while within 6 feet does not eliminate consideration as a close contact.*

When can a student or staff member discontinue home isolation?

- Persons who have tested positive for COVID-19 or who have not been tested but had COVID-19 symptoms and were directed to care for themselves at home may discontinue home isolation under the following conditions:
 - At least 3 days (72 hours) have passed *since recovery* - defined as resolution of fever without the use of fever-reducing medications **and**
 - improvement in respiratory symptoms (e.g., cough, shortness of breath); **and**,



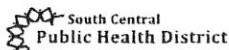
COVID-19 Guidance for Schools

- At least 10 days have passed *since symptoms first appeared*.
- Some individuals may not experience COVID-19 symptoms but test positive. Their discontinuation of home isolation guidance can be found [here](#), which is typically 10 days since being tested but may be dependent on healthcare provider’s advice and availability of testing.

What should I include in my message to our school community of a confirmed case that has been in our school?*

*Public Health Districts will work in partnership with the school to identify, notify, and monitor close contacts of confirmed COVID-19 cases in school settings in accordance with CDC guidance.

- Possible dates of exposure.
- Remind employees that there is current community spread of COVID-19. Advise them to watch for signs and symptoms which develop within 2 – 14 days of exposure.
- Remind employees how to best protect themselves from COVID-19 and the importance of staying home if they are sick or have symptoms.
- Let your employees know what your establishment is doing as a result of exposure (e.g. closing, cleaning)
- Remind your employees of the establishment’s illness policy.
- Where to find reputable sources and information for COVID-19.
 - [Centers for Disease Control and Prevention](#)
 - [Panhandle Health District](#); [Public Health – Idaho North Central District](#); [Central District Health](#); [Southwest District Health](#); [South Central Public Health](#); [Southeastern Idaho Public Health](#); [East Idaho Public Health](#)
 - [Governor’s Coronavirus Website](#)



COVID-19 Guidance for Schools

Appendix A

School Preparedness Checklist for COVID-19

This guidance uses up-to-date information from the CDC and emerging best practices, thus subject to change.

Local public health districts support schools in resuming normal operations based on their community needs and COVID-19 community spread. Schools should continue using the strategies they implemented if their level of community transmission increases (e.g. If moving to Category 2, include Category 1 & 2 strategies).

Category 1: No Community Transmission

- Review, update, and implement emergency operations plans
- Reinforce healthy hygiene practices
- Intensified cleaning disinfection protocols and practices are in place
- Monitor and plan for absenteeism (and plan for students/parents who do not feel comfortable returning to school)
- Review group gatherings and events, and determine if social distancing strategies can be put in place
- Communications plan for informing parents and staff of the school district and charter school response plans, protocols, and policies to manage the impact of the coronavirus
- Revised student/staff illness policies – require them to stay home when ill, procedure for when they become sick at school, and parent/guardian responsibility for immediate pick-up from school when notified
- Verify point of contact for each school district and charter school for effective communication and collaboration with local public health officials
- Begin implementing mitigation strategies and plan for when community spread occurs
- Prepare for your first confirmed COVID-19 case in school, including coordinating with local public health, communication to your school community, possible short-term closures for students and staffs (1-2 days) and cancellation of all group events and activities, and possible extended dismissals

Category 2: Minimal to Moderate Community Transmission

- Coordinate with local health officials
- Identify social distancing strategies based on feasibility of space and needs of the school, including staff duties which require close contact and mitigation strategies to use
- Teach and encourage students, staff, and visitors to wear cloth face coverings when practical, and provide for those who do not have one but wish to wear one
- Communicate with local public health districts to determine if screening employees and students daily for COVID-19 symptoms upon entry to the facility, including check for low-grade fever with no-touch thermometer
- Identify and plan for vulnerable staff and students with a special emphasis on people over age 60 and those who are medically vulnerable

Category 3: Substantial Community Transmission

- Continue coordination with local health officials
- Consider extended school dismissals and reinstate continuity of teaching and learning plans

School Guidance (COVID-19) v2.0 • June 19, 2020

Adapted from the Centers for Disease Control

Page 12 of 12

Coronavirus Disease 2019 (COVID-19)

Help Stop the Spread of COVID-19 in Children

Tips to Protect Children During a COVID-19 Outbreak

Based on available evidence, children do not appear to be at higher risk for COVID-19 than adults. While some children and infants have been sick with COVID-19, adults make up most of the known cases to date.

Watch your child for any signs of COVID-19 illness

COVID-19 can look different in different people. For many people, being sick with COVID-19 would be a little bit like having the flu. People can get a fever, cough, or have a hard time taking deep breaths. Most people who have gotten COVID-19 have not gotten very sick. Only a small group of people who get it have had more serious problems.

CDC and partners are investigating cases of multisystem inflammatory syndrome in children (MIS-C) associated with COVID-19. Learn more about COVID-19 and multisystem inflammatory syndrome in children (MIS-C).

Take steps to protect children and others

Help stop the spread of COVID-19 by doing the same things everyone should do to stay healthy. Teach your children to do the same.

- **Clean hands often** using soap and water or alcohol-based hand sanitizer.
- **Avoid people who are sick** (coughing and sneezing).
- **Put distance between your children and other people** outside of your home. Keep children at least 6 feet from other people.
- **Children 2 years and older should wear a cloth face covering** over their nose and mouth when in public settings where it's difficult to practice social distancing. This is an additional public health measure people should take to reduce the spread of COVID-19 in addition to (not instead of) the other everyday preventive actions listed above.
- **Clean and disinfect high-touch surfaces daily** in household common areas (like tables, hard-backed chairs, doorknobs, light switches, remotes, handles, desks, toilets, and sinks).
- **Launder items** including washable plush toys as needed. Follow the manufacturer's instructions. If possible, launder items using the warmest appropriate water setting and dry items completely. Dirty laundry from an ill person can be washed with other people's items.

You can find additional information on preventing COVID-19 at [How to Protect Yourself](#) and at [Preventing COVID-19 Spread in Communities](#). Additional information on how COVID-19 is spread is available at [How COVID-19 Spreads](#).

Limit time with other children

If children meet in groups, it can put everyone at risk. Children can pass this virus onto others who may be at higher risk, including older adults and people who have serious underlying medical conditions.

Practice social distancing

The key to slowing the spread of COVID-19 is to limit contact as much as possible. While school is out, children should not have in-person playdates with children from other households. If children are playing outside their own homes, it is essential that they remain 6 feet from anyone who is not in their own household.

To help children maintain social connections while social distancing, help your children have supervised phone calls or video chats with their friends.

Clean hands often

Make sure children practice everyday preventive behaviors, such as washing their hands often with soap and water for at least 20 seconds. **This is especially important if you have been in a public place.**

Change travel plans

Revise travel plans if they included non-essential travel.

Limit time with people at highest risk of severe illness from COVID-19

Older adults and people who have serious underlying medical conditions are at highest risk of severe illness from COVID-19.

- If others in your home are at particularly high risk for severe illness from COVID-19, consider extra precautions to **separate your child from those people.**
- If you are unable to stay home with your child while school is out, carefully consider who might be best positioned to provide child care. If someone at higher risk for COVID-19 will be providing care (older adult, such as a grandparent or someone with a chronic medical condition), **limit your children's contact with other people.**
- Consider **postponing visits or trip to see older family members and grandparents.** Connect virtually or by writing letters and sending via mail.

More Information

[ASL Video Series: Tips to Keep Children Healthy While School is Out](#)

[ASL Video Series: Answers to Questions from Children about COVID-19](#)

[Essentials for Parenting Toddlers and Preschoolers](#)

Page last reviewed: May 20, 2020

Clean hands often

Make sure children practice everyday preventive behaviors, such as washing their hands often with soap and water for at least 20 seconds. **This is especially important if you have been in a public place.**

Change travel plans

Revise travel plans if they included non-essential travel.

Limit time with people at highest risk of severe illness from COVID-19

Older adults and people who have serious underlying medical conditions are at highest risk of severe illness from COVID-19.

- If others in your home are at particularly high risk for severe illness from COVID-19, consider extra precautions to **separate your child from those people.**
- If you are unable to stay home with your child while school is out, carefully consider who might be best positioned to provide child care. If someone at higher risk for COVID-19 will be providing care (older adult, such as a grandparent or someone with a chronic medical condition), **limit your children's contact with other people.**
- Consider **postponing visits or trip to see older family members and grandparents.** Connect virtually or by writing letters and sending via mail.

More Information

ASL Video Series: Tips to Keep Children Healthy While School is Out

ASL Video Series: Answers to Questions from Children about COVID-19

Essentials for Parenting Toddlers and Preschoolers

Page last reviewed: May 20, 2020

Coronavirus Disease 2019 (COVID-19)

For Parents: Multisystem Inflammatory Syndrome in Children (MIS-C) associated with COVID-19

What we know about MIS-C

Multisystem inflammatory syndrome in children (MIS-C) is a condition where different body parts can become inflamed, including the heart, lungs, kidneys, brain, skin, eyes, or gastrointestinal organs. We do not yet know what causes MIS-C. However, we know that many children with MIS-C had the virus that causes COVID-19, or had been around someone with COVID-19. MIS-C can be serious, even deadly, but most children who were diagnosed with this condition have gotten better with medical care.

What to do if you think your child is sick with MIS-C

Contact your child's doctor, nurse, or clinic right away if your child is showing symptoms of MIS-C:

- Fever
- Abdominal pain
- Vomiting
- Diarrhea
- Neck pain
- Rash
- Bloodshot eyes
- Feeling extra tired

Be aware that not all children will have all the same symptoms.

Seek emergency care right away if your child is showing any of these **emergency warning signs of MIS-C** or other concerning signs:

- Trouble breathing
- Pain or pressure in the chest that does not go away
- New confusion
- Inability to wake or stay awake
- Bluish lips or face
- Severe abdominal pain

How doctors will care for your child

Doctors may do certain tests to look for inflammation or other signs of disease. These tests might include:

- Blood tests
- Chest x-ray
- Heart ultrasound (echocardiogram)
- Abdominal ultrasound

Doctors may provide supportive care for symptoms (medicine and/or fluids to make your child feel better) and may use various medicines to treat inflammation. Most children who become ill with MIS-C will need to be treated in the hospital. Some will need to be treated in the pediatric intensive care unit (ICU).

Parents or caregivers who have concerns about their child's health, including concerns about COVID-19 or MIS-C, should call a pediatrician or other healthcare provider immediately. Healthcare providers can follow CDC recommendations to keep children and their parents or caregivers safe if an in-person visit is needed.

What we don't know about MIS-C

CDC is still learning about MIS-C and how it affects children, so we don't know why some children have gotten sick with MIS-C and others have not. We also do not know if children with certain health conditions are more likely to get MIS-C. These are among the many questions CDC is working to try to understand.

All CDC recommendations are based on the best data and science available at the time, and we will update them as we learn more.

How to protect your child from COVID-19

Based on what we know now about MIS-C, the best way you can protect your child is by taking everyday actions to prevent your child and the entire household from getting the virus that causes COVID-19.

Additional Resources

[Multisystem inflammatory syndrome in children \(MIS-C\)](#)

[What CDC Is Doing About MIS-C](#)

[Caring for Children](#)

[COVID-19 FAQ: COVID-19 and Children](#)

[Kawasaki Disease](#)

[CDC Health Advisory \(5/14/20\): Multisystem Inflammatory Syndrome in Children \(MIS-C\) Associated with Coronavirus Disease 2019 \(COVID-19\)](#)

Page last reviewed: May 20, 2020

Doctors may provide supportive care for symptoms (medicine and/or fluids to make your child feel better) and may use various medicines to treat inflammation. Most children who become ill with MIS-C will need to be treated in the hospital. Some will need to be treated in the pediatric intensive care unit (ICU).

Parents or caregivers who have concerns about their child's health, including concerns about COVID-19 or MIS-C, should call a pediatrician or other healthcare provider immediately. Healthcare providers can follow CDC recommendations to keep children and their parents or caregivers safe if an in-person visit is needed.

What we don't know about MIS-C

CDC is still learning about MIS-C and how it affects children, so we don't know why some children have gotten sick with MIS-C and others have not. We also do not know if children with certain health conditions are more likely to get MIS-C. These are among the many questions CDC is working to try to understand.

All CDC recommendations are based on the best data and science available at the time, and we will update them as we learn more.

How to protect your child from COVID-19

Based on what we know now about MIS-C, the best way you can protect your child is by taking everyday actions to prevent your child and the entire household from getting the virus that causes COVID-19.

Additional Resources

[Multisystem inflammatory syndrome in children \(MIS-C\)](#)

[What CDC Is Doing About MIS-C](#)

[Caring for Children](#)

[COVID-19 FAQ: COVID-19 and Children](#)

[Kawasaki Disease](#)

[CDC Health Advisory \(5/14/20\): Multisystem Inflammatory Syndrome in Children \(MIS-C\) Associated with Coronavirus Disease 2019 \(COVID-19\)](#)

Page last reviewed: May 20, 2020

Coronavirus Disease 2019 (COVID-19)

How to Protect Yourself & Others

Older adults and people who have severe underlying medical conditions like heart or lung disease or diabetes seem to be at higher risk for developing serious complications from COVID-19 illness. More information on [Are you at higher risk for serious illness.](#)



Know how it spreads

- There is currently no vaccine to prevent coronavirus disease 2019 (COVID-19).
- **The best way to prevent illness is to avoid being exposed to this virus.**
- The virus is thought to spread mainly from person-to-person.
 - Between people who are in close contact with one another (within about 6 feet).
 - Through respiratory droplets produced when an infected person coughs, sneezes or talks.
 - These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs.
 - Some recent studies have suggested that COVID-19 may be spread by people who are not showing symptoms.

Everyone Should



Wash your hands often

- Wash your hands often with soap and water for at least 20 seconds especially after you have been in a public place, or after blowing your nose, coughing, or sneezing.
- If soap and water are not readily available, **use a hand sanitizer that contains at least 60% alcohol.** Cover all surfaces of your hands and rub them together until they feel dry.
- **Avoid touching your eyes, nose, and mouth** with unwashed hands.



Avoid close contact

- **Avoid close contact with people who are sick, even inside your home.** If possible, maintain 6 feet between the person who is sick and other household members.
- **Put distance between yourself and other people outside of your home.**
 - Remember that some people without symptoms may be able to spread virus.
 - Stay at least 6 feet (about 2 arms' length) from other people.
 - Keeping distance from others is especially important for people who are at higher risk of getting very sick.



Cover your mouth and nose with a cloth face cover when around others

- You could spread COVID-19 to others even if **29** you do not feel sick.

- Everyone should wear a cloth face cover when they have to go out in public, for example to the grocery store or to pick up other necessities.
 - Cloth face coverings should not be placed on young children under age 2, anyone who has trouble breathing, or is unconscious, incapacitated or otherwise unable to remove the mask without assistance.
- The cloth face cover is meant to protect other people in case you are infected.
- Do NOT use a facemask meant for a healthcare worker.
- Continue to keep about 6 feet between yourself and others. The cloth face cover is not a substitute for social distancing.



Cover coughs and sneezes

- If you are around others and do not have on your cloth face covering, remember to always cover your mouth and nose with a tissue when you cough or sneeze or use the inside of your elbow and do not spit.
- Throw used tissues in the trash.
- Immediately wash your hands with soap and water for at least 20 seconds. If soap and water are not readily available, clean your hands with a hand sanitizer that contains at least 60% alcohol.



Clean and disinfect

- Clean AND disinfect frequently touched surfaces daily. This includes tables, doorknobs, light switches, countertops, handles, desks, phones, keyboards, toilets, faucets, and sinks.
- If surfaces are dirty, clean them. Use detergent or soap and water prior to disinfection.
- Then, use a household disinfectant. Most common EPA-registered household disinfectants will work.



Monitor Your Health

- Be alert for symptoms. Watch for fever, cough, shortness of breath, or other symptoms of COVID-19.
 - Especially important if you are running essential errands, going into the office or workplace, and in settings where it may be difficult to keep a physical distance of 6 feet.
- Take your temperature if symptoms develop.
 - Don't take your temperature within 30 minutes of exercising or after taking medications that could lower your temperature, like acetaminophen.
- Follow CDC guidance if symptoms develop.

Stop the Spread of Germs

COVID-19 Stop the Spread of Germs

Help stop the spread of COVID-19 and other respiratory illnesses by following these steps.

Handwashing Resources

- Everyone should wear a cloth face cover when they have to go out in public, for example to the grocery store or to pick up other necessities.
 - Cloth face coverings should not be placed on young children under age 2, anyone who has trouble breathing, or is unconscious, incapacitated or otherwise unable to remove the mask without assistance.
- The cloth face cover is meant to protect other people in case you are infected.
- Do NOT use a facemask meant for a healthcare worker.
- Continue to keep about 6 feet between yourself and others. The cloth face cover is not a substitute for social distancing.



Cover coughs and sneezes

- If you are around others and do not have on your cloth face covering, remember to always cover your mouth and nose with a tissue when you cough or sneeze or use the inside of your elbow and do not spit.
- Throw used tissues in the trash.
- Immediately wash your hands with soap and water for at least 20 seconds. If soap and water are not readily available, clean your hands with a hand sanitizer that contains at least 60% alcohol.



Clean and disinfect

- Clean AND disinfect frequently touched surfaces daily. This includes tables, doorknobs, light switches, countertops, handles, desks, phones, keyboards, toilets, faucets, and sinks.
- If surfaces are dirty, clean them. Use detergent or soap and water prior to disinfection.
- Then, use a household disinfectant. Most common EPA-registered household disinfectants will work.



Monitor Your Health

- Be alert for symptoms. Watch for fever, cough, shortness of breath, or other symptoms of COVID-19.
 - Especially important if you are running essential errands, going into the office or workplace, and in settings where it may be difficult to keep a physical distance of 6 feet.
- Take your temperature if symptoms develop.
 - Don't take your temperature within 30 minutes of exercising or after taking medications that could lower your temperature, like acetaminophen.
- Follow CDC guidance if symptoms develop.

Stop the Spread of Germs

COVID-19 Stop the Spread of Germs

Help stop the spread of COVID-19 and other respiratory illnesses by following these steps.

Handwashing Resources



Handwashing tips



Hand Hygiene in Healthcare Settings

More information

Symptoms

Healthcare Professionals

What to do if you are sick

10 Things You Can Do to Manage COVID-19 at Home

If someone in your house gets sick

10 Things You Can Do to Manage COVID-19 at Home (ASL Version)

Frequently asked questions

Social Distancing (ASL Video)

Travelers

ASL Video Series: What You Need to Know About Handwashing

Individuals, schools, events, businesses and more

Page last reviewed: April 24, 2020



Guidance on the Use of Cloth Face Coverings

Current as of April 6, 2020

What are cloth face coverings?

Cloth face coverings can be homemade or manufactured. However, the U.S. Food and Drug Administration (FDA) does not regulate cloth face coverings, and they are not considered Personal Protective Equipment (PPE), such as surgical/medical masks or N95 respirators.

Why should you wear cloth face coverings?

Recent studies suggest that the virus that causes COVID-19 spreads through droplets that are generated during coughing, sneezing and talking. These droplets can travel up to six feet and survive on surfaces for a long time. Because of this, social distancing is extremely crucial in slowing the spread of the virus by reducing exposure to the droplets.

Studies also indicate that some individuals with COVID-19 lack symptoms, but they can still be contagious up to 48 hours before the onset of symptoms. The Idaho Department of Health and Welfare (DHW) now recommends the use of cloth face coverings in public settings, such as grocery stores, pharmacies, etc., where there is high probability of encountering close contact with others, particularly in counties experiencing community-based transmission. This new recommendation is in addition to practicing social distancing by maintaining at least six feet of distance from others and regular hand washing.

Who should wear cloth face coverings?

Cloth face coverings serve two purposes: to protect the public from those that may be infected with COVID-19 and to protect those infected with COVID-19 from spreading the disease to others. Cloth face coverings should ***not be placed*** on young children under the age of two, anyone with difficulty breathing, anyone who is unconscious, incapacitated, or unable to remove the covering without assistance.

Which materials can be used to construct cloth face coverings?

- Bandanas (or square cotton cloth approximately 20"x 20")
- Coffee filters
- Rubber bands (or hair ties)
- Scissors (for cutting cloth)

How should a cloth face cover fit?

The face covering should:

- Fit tightly, enclosing the area around the nose and mouth from the bridge of the nose down to the chin, and it should extend beyond the corners of the mouth so that no gaps occur when talking or moving.
- Fit firmly, secured by strings attached to the covering and loop around both ears.



- Include multiple layers of fabric that can block droplets from entering the nose or mouth.
- Allow breathing without any restrictions.
- Be easy to wash and machine dry without causing any changes to the material.

Washing cloth face coverings

After each use, face coverings require washing in hot water with regular detergent and should be dried completely on a hot dryer setting.

Resource for making cloth face coverings

Videos:

- How to Make Your own Face Covering CDC - https://www.youtube.com/watch?v=tPx1yqvJgf4&feature=emb_title
- Face Mask Kit - <https://vimeo.com/399324367/13cd93f150>
- DIY: How to sew Face Mask | NO Sewing Machine! - <https://www.youtube.com/watch?v=xN0HH2Zb2hY>

Written Instructions:

- How to Wear a Cloth Face Covering CDC - <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/diy-cloth-face-coverings.html>
- How To Make A Face Mask - <https://www.allinahealth.org/-/media/allina-health/files/mask-sewing-how-to.pdf>
- Face Mask Directions - <https://www.leadingagewa.org/wp-content/uploads/sites/296/2020/02/Instructions.pdf>
- Taiwanese Doctor Teaches How To DIY Cloth Face Mask With Air Filter, So No Need To Scramble At Stores - <https://mustsharenews.com/cloth-face-mask/>
- Can DIY Masks Protect Us from Coronavirus? - <https://smartairfilters.com/en/blog/diy-homemade-mask-protect-virus-coronavirus/>
- What Are the Best Materials for Making DIY Masks? - <https://smartairfilters.com/en/blog/best-materials-make-diy-face-mask-virus/>
- DIY Cloth Face Mask - <https://www.instructables.com/id/DIY-Cloth-Face-Mask/>

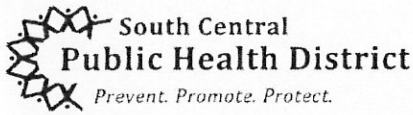
References -

1. Universal Masking in Hospitals in the Covid-19 Era: https://www.nejm.org/doi/full/10.1056/NEJMp2006372?query=featured_coronavirus
2. Simple Respiratory Protection—Evaluation of the Filtration Performance of Cloth Masks and Common Fabric Materials Against 20–1000 nm Size Particles: <https://academic.oup.com/annweh/article/54/7/789/202744>
3. Transmission of 2019-nCoV Infection from an Asymptomatic Contact in Germany - <https://www.nejm.org/doi/full/10.1056/NEJMc2001468>
4. SARS-CoV-2 Viral Load in Upper Respiratory Specimens of Infected Patients - <https://www.nejm.org/doi/full/10.1056/NEJMc2001737>
5. Asymptomatic cases in a family cluster with SARS-CoV-2 infection - [https://www.thelancet.com/journals/laninf/article/PIIS1473-3099\(20\)30114-6/fulltext](https://www.thelancet.com/journals/laninf/article/PIIS1473-3099(20)30114-6/fulltext)



IDAHO DEPARTMENT OF
HEALTH & WELFARE

6. Presumed Asymptomatic Carrier Transmission of COVID-19 -
<https://jamanetwork.com/journals/jama/article-abstract/2762028>
7. Asymptomatic and Pre-symptomatic SARS-CoV-2 Infections in Residents of a Long-Term Care Skilled Nursing Facility – King County, Washington, March 2020 -
<https://www.cdc.gov/mmwr/volumes/69/wr/mm6913e1.htm>
8. Recommendation Regarding the Use of Cloth Face Coverings, Especially in Areas of Significant Community-Based Transmission - <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cloth-face-cover.html>
9. Substantial undocumented infection facilitates the rapid dissemination of novel coronavirus (SARS-CoV2) -
<https://science.sciencemag.org/content/early/2020/03/24/science.abb3221/>
10. Study suggests new coronavirus may remain on surfaces for days -
<https://www.nih.gov/news-events/nih-research-matters/study-suggests-new-coronavirus-may-remain-surfaces-days>



South Central Public Health District
 1020 Washington Street North
 Twin Falls, ID 83301
 208-737-5900
 www.phd5.idaho.gov

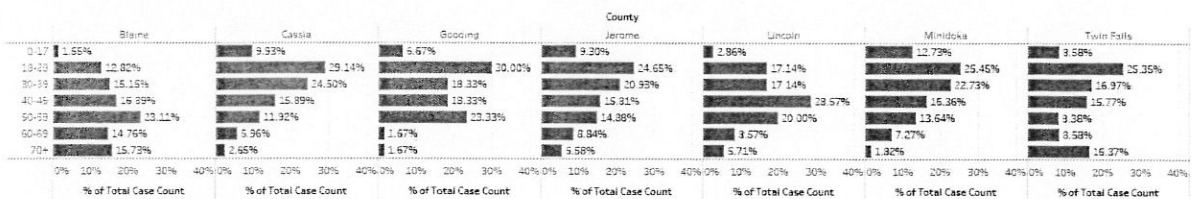
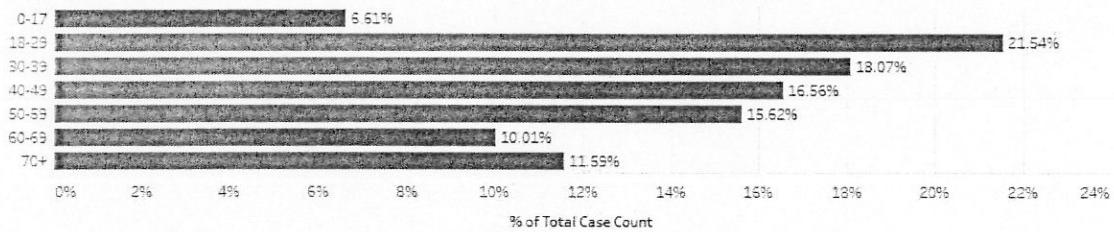


NEWS RELEASE--FOR IMMEDIATE RELEASE
 Date: June 18, 2020

Data show young adults have the highest percentage of COVID-19 infections in this region

SOUTH CENTRAL IDAHO – South Central Public Health District (SCPHD) sees case rates remain high among residents between the ages of 18-39 across the region and urges residents to take precautions to prevent exposure to our young adults.

Age when illness began



“These are often the people we see working in our essential jobs,” said Logan Hudson, SCPHD Public Health Division Director. “They are exposed to hundreds of people every day which puts them at greater risk of contracting COVID-19. We can protect them by wearing masks and urging the people around us to practice social distancing.”

Social distancing means keeping six feet between yourself and anyone who does not live in your household. Residents can also protect themselves and their

community by washing their hands regularly and disinfecting commonly touched surfaces.

"We are also calling on our young adults to be extra careful with their health. They are less likely to die from COVID-19 but that doesn't mean they can't get very sick. Cases of stroke, blood clots leading to amputation, and more severe symptoms have been reported in previously healthy and young people," said Melody Bowyer, SCPHD Director. "If you contract COVID-19 there is also the possibility of unintentionally passing the disease on to someone who won't fare as well, like a grandparent or loved one with a compromised immune system."

SCPHD urges residents to avoid areas, events, and businesses that don't prioritize their health.

"If an area becomes too crowded, go somewhere else. You have more power to protect your health than anyone else," said Bowyer.

SCPHD is also running two hotlines for information about COVID-19: one in Spanish at (208) 737-5965, and one in English at (208) 737-1138. These hotlines currently run from 8:00 a.m. to 5:00 p.m., Monday through Friday.

Please refer to <https://phd5.idaho.gov/coronavirus> for the latest local numbers, guidance and resources. Refer to <https://coronavirus.idaho.gov> for Idaho-specific information and guidance.