

CUYAHOGA COUNTY

BOARD OF HEALTH

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K-12 School Reopening Framework

As schools continue to review their plans and consider their approaches to the delivery of curriculum, extracurricular activities and sports, our agency offers the following evidence-based framework to assist in that process. This information should serve as a guide for decision making as schools attempt to balance the risks related to COVID-19 transmission with the need to resume normal educational and enrichment activities.

Evidence from around the world has demonstrated that the ability to safely resume in-person school depends heavily on the level of community transmission. Higher levels of transmission require greater precautions. Student age also appears to be an important driver of risk, with risk of both acquiring and transmitting infection increasing with age. Given these facts, this framework provides recommendations under four scenarios defined by the Ohio Public Health Advisory System and county-level test positivity rates.

This framework is not meant to be, nor should it be interpreted as, a Board of Health Order. We understand that school leaders must make difficult decisions based on the needs and resources of their respective school communities.

A central strategy in the framework is the use of cohorting for in-person learning. Cohorting serves multiple important purposes:

- Limits the opportunities for transmission
- Facilitates rapid contact tracing
- Minimizes the number of students and staff who may require quarantine when someone in the school community becomes infected

Additional information about COVID-19 and schools is available at:

www.ccbh.net/coronavirus

www.ccbh.net/covid-19-school-guidance

Scenario 1

Ohio Public Health Advisory System: Yellow for 4 weeks + Test positivity <3%¹

Learning Environment Considerations - Based on CDC Guidance*

A Hybrid Learning Model can be considered in which **most** students participate in in-person learning while some students participate in virtual learning:

- Cohorting into groups smaller than traditional class sizes if possible, alternating schedules, and staggered schedules are applied with some exceptions
- Some mixing of groups of students and teachers throughout/across school days
- Students and teachers minimally share objects
- Students, teachers, and staff follow all steps to protect themselves and others such as proper use of facial coverings, social distancing, and hand hygiene
- Regularly scheduled cleaning and disinfection of frequently touched areas based on [CDC recommendations](#)

Consideration for specific age groups[†]

Virtual learning may be the best option for Grades 9-12 if the Learning Environment considerations shown above cannot be fully met.

Onsite temperature and symptom screening for students attending in-person⁴

Not recommended.

Contact tracing

The school actively participates in contact tracing with the goal of contacting all cases within 24 hours if possible.¹

Resumption of extracurricular activities and sports

In addition to low-risk[§] extracurricular activities and sports, schools may consider resuming high-risk[¶] extracurricular activities and sports under the following conditions:

- Appropriate social distancing and masking can be maintained by spectators
- Viral testing results for symptomatic or exposed asymptomatic participants should be available within 48 hours⁵ of ordering test
- The school or sponsoring organization has the capacity to actively conduct contact tracing so that all contacts of cases are traced within 24 hours if possible⁵

* Based on CDC 'Continuum of risk by models of learning and implementation of proven mitigation strategies'⁶, with the 'Medium Risk' model applied to CCBH Risk Scenario 1, the 'Some Risk' model applied to Risk Scenario 2, and the 'Lowest Risk' model applied to Risk Scenarios 3 and 4

[†] Evidence suggests that children younger than 10 years are less likely to be infected with SARS-CoV-2 than older individuals⁷ and less likely to transmit the virus compared to older children⁸⁻¹², and that the potential for transmission is likely greater in high schools.⁷

[§] Low-risk extracurricular activities and sports – defined as those which can be done while maintaining appropriate social distancing by all participants and observers (e.g. clubs, tennis, certain track and field events).

[¶] High-risk extracurricular activities and sports – defined as those in which social distancing and wearing a face covering are difficult (including but not limited to contact sports)

Scenario 2

Ohio Public Health Advisory System: Orange for 4 weeks + Test positivity <5%² *No longer meeting Scenario 1*

Learning Environment Considerations (Based on CDC Guidance*)

A Hybrid Learning Model can be considered in which **some** students participate in in-person learning while others participate in virtual learning:

- Cohorting into the smallest number of students and staff that is feasible, alternating schedules, and staggered schedules are applied rigorously
- No mixing of groups of students and teachers throughout/across school days
- Students and teachers do not share objects
- Students, teachers, and staff follow all steps to protect themselves and others at all times including proper use of facial coverings, social distancing, and hand hygiene
- Aggressive (meaning between uses) cleaning and disinfection of frequently touched areas based on [CDC recommendations](#)
- All of these items should be strictly implemented

Consideration for specific age groups[†]

Virtual learning may be the best option for Grades 6-12 if the Learning Environment considerations shown above cannot be fully met.

Onsite temperature and symptom screening for students attending in-person⁴

Not recommended.

Contact tracing

The school actively participates in contact tracing with the goal of contacting all cases within 24 hours if possible.¹

Resumption of extracurricular activities and sports

Schools may consider resuming low-risk[§] extracurricular activities and sports, meaning those which can be done while maintaining appropriate social distancing by all participants and observers. Masks should be worn by spectators and, if feasible, by participants.

* Based on CDC 'Continuum of risk by models of learning and implementation of proven mitigation strategies'⁶, with the 'Medium Risk' model applied to CCBH Risk Scenario 1, the 'Some Risk' model applied to Risk Scenario 2, and the 'Lowest Risk' model applied to Risk Scenarios 3 and 4

[†] Evidence suggests that children younger than 10 years are less likely to be infected with SARS-CoV-2 than older individuals⁷ and less likely to transmit the virus compared to older children⁸⁻¹², and that the potential for transmission is likely greater in high schools.⁷

[§] Low-risk extracurricular activities and sports – defined as those which can be done while maintaining appropriate social distancing by all participants and observers (e.g. clubs, tennis, certain track and field events).

Scenario 3

Ohio Public Health Advisory System: Red + Test positivity <10%¹ *No longer meeting Scenario 2*

Learning Environment Considerations (Based on CDC Guidance*)

Consider a model where students and teachers engage in virtual-only classes, activities and events with the exception of children with special educational needs where virtual learning is not feasible. Children with special educational needs who are learning on-site should work in the smallest groups possible.

Consideration for specific age groups[†]

Virtual learning is encouraged for all students except those with special needs as described above.

Onsite temperature and symptom screening for students attending in-person⁴

Recommended

Contact tracing

The school actively participates in contact tracing with the goal of contacting all cases within 24 hours if possible.¹

Resumption of extracurricular activities and sports

Virtual activities only

* Based on CDC 'Continuum of risk by models of learning and implementation of proven mitigation strategies'⁶, with the 'Medium Risk' model applied to CCBH Risk Scenario 1, the 'Some Risk' model applied to Risk Scenario 2, and the 'Lowest Risk' model applied to Risk Scenarios 3 and 4

[†] Evidence suggests that children younger than 10 years are less likely to be infected with SARS-CoV-2 than older individuals⁷ and less likely to transmit the virus compared to older children⁸⁻¹², and that the potential for transmission is likely greater in high schools.⁷

Scenario 4

Ohio Public Health Advisory System: Purple

No longer meeting Scenario 3

Learning Environment Considerations (Based on CDC Guidance*)

Schools are **strongly encouraged** to implement a model where **all** students and teachers engage in virtual-only classes, activities, and events.

Consideration for specific age groups[†]

N/A

Onsite temperature and symptom screening for students attending in-person⁴

N/A

Contact tracing

N/A

Resumption of extracurricular activities and sports

Virtual activities only

* Based on CDC 'Continuum of risk by models of learning and implementation of proven mitigation strategies'⁶, with the 'Medium Risk' model applied to CCBH Risk Scenario 1, the 'Some Risk' model applied to Risk Scenario 2, and the 'Lowest Risk' model applied to Risk Scenarios 3 and 4

[†] Evidence suggests that children younger than 10 years are less likely to be infected with SARS-CoV-2 than older individuals⁷ and less likely to transmit the virus compared to older children⁸⁻¹², and that the potential for transmission is likely greater in high schools.⁷

Considerations for Families

If individual students live with others in any of the settings described here, families who have the option of choosing in-person or virtual learning are advised to strongly consider the virtual option:

- Elderly, pregnant, or otherwise medically vulnerable individuals
- Students or staff spending time onsite at other schools
- Those with high-risk occupational exposures (frontline health or service workers)

Looking Forward

Scientific understanding of the behavior of COVID-19 in populations has grown with remarkable speed in recent months. Soon we will learn the answers to additional questions that may change how we all respond to the threat.

As the county health authority, we will continue to monitor the trajectory of COVID-19 activity in the community, the state of testing, and the latest available science and evidence-based guidelines. We will continue to interpret this information in a manner that supports informed decision making by school leaders and will update this framework accordingly.

The exact circumstances that will allow for a move to a normal, or 'green scenario,' as defined by the Ohio Public Health Advisory System, are not yet clear. One likely criterion will consist of reaching CDC's 'low incidence plateau' which is defined as:

Below 10 new cases per 100,000 population over 2 weeks with only minimal change in daily cases.

We look forward to reaching this threshold and returning to a time when extensive mitigation steps are no longer necessary and students can resume more normal routines. Working together as a community, we ask for your cooperation to help us achieve that goal.

References

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