|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Section** | **Essential Element** | **Sub- Element** | **Complete** | **Comments** |
| **I** | Purpose | Statement  Synopsis |  |  |
|  |
|  | Scope | States Scope of the Situation |  |  |
|
|  | Situation Overview | Why is this Plan Necessary? |  |  |
|
|  |  | Relative probability and impact of the hazards |  |  |
|
|  |  | Who and in what areas are likely to be affected by particular hazards |  |  |
|
|  |  | Planning Assumptions: For Planning purposes what is assumed to be true (Facts) |  |  |
|
| **II** | Concept of Operations | Organization (Org Chart) |  |  |
|
| **III** | Organization and Assignment of Responsibilities | Assignment of Responsibilities |  |  |
|
|  |  | Authorities |  |  |
|
|  |  | Oversight, Accountability and Enforcement |  |  |
|
| **IV** | Hazard/Threat | Description of the threat (Covid) |  |  |
|
|  |  | * Signs and Symptoms |  |  |
|
| * Projected Impacts in the School Setting |  |  |
| * Vulnerable Populations and Persons at Risk |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Section** | **Essential Element** | **Sub- Element** | **Complete** | **Comments** |
| **V** | Mitigation- Health and Safety Precautions | **Procedures and Processes** for reducing spread of disease and creating healthy environment |  |  |
|
|  |  | Health Screening: before leaving home or upon arrival using no touch thermometer and questionnaire |  |  |
|
| Masks and Face Covering Requirements for all |  |  |
|
| Hand Washing/ Hand Hygiene |  |  |
|
| **Cleaning and Disinfecting Processes -hi touch especially** |  |  |
|
| Supplies and Equipment |  |  |
|
| Restrooms |  |  |
|
| Classrooms -own supply/safe storage |  |  |
|
| Common Areas |  |  |
|
| Playground and Recreational Equipment |  |  |
|
|  |  | **Social Distancing and Physical Requirements** |  |  |
|  |  | Social Distance Requirements -6 ft.- all |  |  |
|
| Classroom Configuration |  |  |
|
| Cohorting- students and/or staff |  |  |
|
| Out of Classroom Considerations |  |  |
|
| Student Schedule: staggered Arrival/Dismissal/adjusted days |  |  |
|
| Restroom and Hallway Safety |  |  |
|
| Locker Use |  |  |
|
| Access to Drinking Water – Flushing of systems/ cleaning |  |  |
|
| HVAC and ventilation |  |  |
|
| Travel/Quarantine Requirements upon return to Maryland |  |  |
|
| Lunch/Cafeteria – space/process alteration/ cleaning |  |  |
|
| Transportation/Busses |  |  |
|

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Section** | **Essential Element** | **Sub- Element** | **Complete** | **Comments** |
| **VI** | Self-Exposure Identification and Confirmation: Students and staff | Self-reporting Exposures and Infections by family and staff |  |  |
|
| Notification of LHD by designee |  |  |
|
| Notification of Community |  |  |
|
| Cleaning and Disinfecting Requirements |  |  |
|
| Testing |  |  |
|
| Contact Tracing - participation |  |  |
|
| **VII** | Management of Ill Individuals during the school day | Quarantine and Isolation Procedures |  |  |
|
| Supplies, Equipment and appropriate PPE |  |  |
|
| Designated Isolation Space/room |  |  |
|
| Length of Quarantine/ isolation |  |  |
|
| Cleaning and disinfecting of affected space(s) |  |  |
|
| Notification process of LHD by designee |  |  |
|
| Notification of others as appropriate |  |  |
|
| Tracking of illness and absenteeism |  |  |
|
| Requirements for returning to School |  |  |
|
| **VIII** | Testing | Procedures |  |  |
|
| Frequency |  |  |
|
| **IX** | Contact Tracing (Schools) Process | Responsibility and cooperation in contact tracing |  |  |
|
| Timeframe |  |  |
|
| Notifications/Reporting to LHD |  |  |
|
| **X** | Cleaning Supplies and PPE | Cleaning Supplies |  |  |
|
| Personal Protective Equipment |  |  |
|