

Wynantskill Unified Free School District



Public Health Emergency – Continuation of Operations Plan

Date of Revision/Review: February 1, 2021

Purpose.....	4
Scope	4
Requirements.....	4
Essential Titles	4
Remote Work and Telecommuting.....	6
Staggered Work Shifts	7
Transportation	8
Driver/Monitor/Aide/Maintenance	8
Cleaning and Sanitizing	8
Personal Protective Equipment	9
Exposure and Response	10
Emergency Housing for a Public Health Emergency.....	12
Appendix I	13
Infectious Disease Preparedness and Response Plan.....	13
Appendix II	35
COVID-19 School Reopening Facilities Cleaning & Disinfection Protocol	35
Appendix III	37
Record of Updates/Revisions	37

This plan has been developed in accordance with the amended New York State Labor Law section 27-c and New York State Education Law paragraphs k and l of subdivision 2 of section 2801-a (as amended by section 1 of part B of chapter 56 of the laws of 2016), as applicable.

This plan has been developed with the input of the Wynantskill Teachers Association, as required by the amended New York State Labor Law.

No content of this plan is intended to impede, infringe, diminish, or impair the rights of us or our valued employees under any law, rule, regulation, or collectively negotiated agreement, or the rights and benefits which accrue to employees through collective bargaining agreements, or otherwise diminish the integrity of the existing collective bargaining relationship.

This plan has been approved in accordance with requirements applicable to the agency, jurisdiction, authority, or district, as represented by the signature of the authorized individual below.

As the authorized official of Wynantskill UFSD, I hereby attest that this plan has been developed, approved, and placed in full effect in accordance with S8617B/A10832 which amends New York State Labor Law section 27-c and New York State Education Law paragraphs k and l of subdivision 2 of section 2801-a (as amended by section 1 of part B of chapter 56 of the laws of 2016), as applicable, to address public health emergency planning requirements.

Signed on this day: February 1, 2021

By: Dr. Mary Yodis

Signature:

Title: Superintendent of Schools

Purpose

On September 7, 2020, Governor Cuomo signed into law Chapter 168 of the Laws of 2020 that requires public employers, including public school districts, to adopt a continuation of operations plan in the event that the governor declares a public health emergency involving communicable disease. The legislation (S.8617-B/ A.10832) amends subdivision 2 of section [2801-a of New York Education Law](#) to require that District Safety Plans include protocols for responding to a declared public health emergency involving a communicable disease that are “substantially consistent” with the provisions of section 27-c of the Labor Law.

Scope

The Public Health Emergency Continuation of Operations Plan (PHECOP) identifies the varied aspects of providing a safe work environment for continued education of students and district operations during a declared public health emergency. Essential roles and critical functions are outlined to assist in delivering required assets and support to instructional and non-instructional functions to effectively continue district operations during a declared public health emergency. Planning and response efforts ultimately support the whole school community: students, parents and staff of our district.

Requirements

Essential Titles

The following provides a list and description of positions and titles considered essential in the event of a state-ordered reduction of in-person workforce, as well as a justification for such consideration for each position and title. This anticipates how certain positions/titles may be necessary to assist in response to a pandemic or communicable disease outbreak.

- Per S8617B/A10832:
 - ‘essential employee’ is defined as a public employee or contractor that is required to be physically present at a work site to perform their job
 - ‘non-essential employee’ is defined as a public employee or contractor that is not required to be physically present at a work site to perform their job
 - Note that per NYS Department of Health COVID-19 toolkit guidance, school staff are not essential workers.

A list of district-identified essential job functions and workers can be found on the chart below. It is important to note that those performing essential job functions will abide by the staggered schedule, in order to maintain and ensure safety for all employees. Whenever possible, employees should work from home and only be on-site at district premises for the completion of the essential functions listed below.

Department	Essential Position or Title	Description
Operations and Maintenance	Supervisor of Building & Grounds Maintenance Workers Custodial Workers	Maintain the cleanliness and continued functioning and maintenance of school buildings. Deep clean as necessary based on state and local health department requirements for public health emergencies. Assist with building operations in the event of district provided childcare for fire responders/health care workers
District Administration	Superintendent Principal	Required to ensure continuity of the response efforts; coordinated response with state and local health departments; communication to families and staff; ensure all essential daily functions are completed
Information Technology	Network Engineer & Technicians	Maintain internet capability, including remote learning and working from home. Provide troubleshooting for internet and program access. Assist with internet connectivity to ensure Digital Equity.
Transportation	Director of Transportation Bus Drivers Bus Aides	To transport food to students who receive home meals and/or to transport students in the event they are attending in person instruction. Distribution of technology (laptops, hotspots, etc.) as necessary for Digital Equity
Food Service	Food Service Director Food Service Workers Support Staff (as needed)	To prepare and distribute meals to students. (for those at home with remote learning and at district childcare for first responders/health care workers)
Business Office	Business Official Payroll Clerk	Processing of payroll deposits and checks; timely payment of district bills; processing and approving

		purchase orders for emergency supplies related to the public health emergency
Faculty and Staff	Teachers Related Service Providers Teaching Assistants School Nurse	Assist with district provided childcare for first responders/health care workers as required. Assist with distribution of meals to students as needed. Should it become necessary to meet a student's needs under IDEA and/or Section 504 regulation (FAPE), teachers/related service providers may be deemed essential on an as needed basis.

Remote Work and Telecommuting

The following is a description of the protocols the district will follow in order to enable all non-essential employees and contractors to telecommute. This description is not limited to, facilitating or requesting the procurement, distribution, downloading and installation of any needed devices or technology, including software, data, office laptops or cell phones, and the transferring of office phone lines to work or personal cell phones as practicable or applicable.

To enable all non-essential employees and contractors to telecommute, the District will follow a contingency plan in a similar format as during the pandemic shut down with full remote instruction in March 2020.

Non-essential employees will complete telecommuting agreements prior to working remotely in the event that the district will need to close for an extended period of time. Staff required to work remotely will be provided with adequate district technology support to carry out their normal daily work functions. All district phones are able to be programmed to transfer to personal phone lines, which will be conducted to ensure continuity communications.

Non-essential employees will continue to have access to various digital platforms, including, but not limited to:

Remote Instructional Technology Platforms

Email and video conferencing technology and software	Google Classroom Suite- Learning Management System Grades Pre K-8
Student Management System – School Tool	

Journeys Reading K-6	Google Suite Tools (Docs, Slides, Forms, etc.)
Other digital instructional platforms programs required to support remote learning – MobyMax & MyOn	

Additional Remote District Technology Platforms

Envision	School Tool
IEP Direct	IT/Help desk technology, work order systems, remote access
Google Suite Tools (Docs, Slides, Forms, etc.)	

District Technology Hardware, Software, and Devices

Laptops and Chromebooks	Video/webcam hardware
Other computer hardware as needed (i.e. printers)	District issued cell phones for identified staff

Staggered Work Shifts

In the event of a public health emergency, the school district has determined that essential employees / outside contractors will follow a predetermined work shift schedule set by the district in an effort to minimize viral contact or employee overcrowding within the building.

Essential Employee Title / Outside Contractor	Building Name	Shift / Work Hours
Custodial	Gardner-Dickinson	<i>1st Shift: 6:00am - 2:00pm, 2nd Shift: 2:00pm – 10:00pm</i>
Faculty	Gardner-Dickinson	<i>1st Shift (In-person or Hybrid Learning): 8:00am - 2:30pm</i>
Cafeteria	Gardner-Dickinson	<i>1st Shift: 6:00am – 1:00pm</i>

Aides	Gardner-Dickinson	<i>1st Shift: 8:00am – 2:30pm</i>
Administration	Business Office / Superintendent's Office	<i>1st Shift: 8am – 4:00pm</i>
Questar III BOCES	Gardner-Dickinson	<i>1st Shift: 8:00am - 4:30pm</i>
TCL After School Program	Gardner-Dickinson	<i>2:30pm - 5:30pm</i>

*Outside contractors will coordinate with district officials to determine the best work shift schedules that will work within contractual agreements, maintain work productivity, and minimize the potential spread of viral contact.

Transportation

For transportation needs, in the event of a public health emergency, the school district will ensure all predetermined protocols and procedures as mentioned in the district's reopening plan are adhered to. All employees (bus drivers, aides, monitors, etc.) who operate or occupy a district owned vehicle are subject to social distancing, face coverings, and daily health screenings.

Driver/Monitor/Aide/Maintenance

- All employees will be provided all necessary PPE to perform their duties safely. Personnel operating school owned vehicles will be required to disinfect high touch surfaces periodically during the occupancy of their vehicle.
- Maintenance employees will operate their designated vehicles solo and passengers/coworkers are prohibited.
- All employees are encouraged to sanitize their hands frequently before and after operating vehicles.

Cleaning and Sanitizing

- Each bus will have all high traffic areas properly cleaned between each run.
- Each bus utilized in the school day will be sanitized at least once daily.
- Maintenance vehicles will be routinely cleaned and sanitized placing emphasis on high touch surfaces.

Personal Protective Equipment

The following protocols will be implemented by the district to procure personal protective equipment (PPE) for essential employees, based upon tasks and needs related to the public health emergency. Specific information related to required storage and accessibility can be found in **Appendix I**, Infectious Disease Preparedness and Response Plan

Procurement

1. The district will abide by the Board of Education Procurement Policy. In the event an Executive Order by the Office of the Governor indicates that schools may suspend their procurement policy temporarily due to the public health emergency, the district reserves the right to suspend the BOE Procurement Policy per Governor's directive. (i.e. [Executive Order 202](#) - 3/7/2020 for COVID-19)
2. The district will secure and provide PPE for employees.
3. Procurement of PPE, other than basic preliminary purchases, will be done on a consolidated basis.
4. The district will provide employees with an acceptable face covering at no-cost to the employee and have an adequate supply of coverings in case of replacement.
 - a. Staff will be allowed to wear their own face covering pending district approval.
5. Information shall be provided to staff and students on proper use, removal, and washing of cloth face coverings.
6. Masks are most essential in times when physical distancing is difficult.
7. The district will promote and reinforce the use of PPE among all staff.
8. Specialized PPE (N95s, face shields, gowns, gloves, etc.) may be required for specific work tasks and will be provided as deemed necessary by a hazard assessment.
 - a. Those individuals that are required to wear N-95 respirators will be medically screened and fit-tested prior to use to assure they are physically able to do so.

PPE Supply Management

The district will work with each department to determine the overall PPE needs of the district. Centralized purchasing will be used when possible.

All types of PPE must be:

- Selected based upon the hazard to the staff.
- Properly fitted and periodically refitted, as applicable (e.g., respirators).
- Consistently and properly worn when required.
- Regularly inspected, maintained, and replaced, as necessary.

- Properly removed, cleaned, and stored or disposed of, as applicable, to avoid contamination of self, others, or the environment.
- The district will maintain an inventory of PPE in accordance with the NYS Education Department, NYS Department of Health and CDC guidelines. PPE will be continually restocked as needed.
- Storage of personal protective equipment will be on campus and comply with the manufacturer's storage recommendations for each item.
- PPE equipment will be readily available to all employees through identified disbursement protocols.

Exposure and Response

Effective prevention and mitigation steps are required to prevent the spread and/or contraction of the virus/disease. In the event an employee or contractor is exposed to a known case of the identified virus/disease, exhibits symptoms of the virus/disease, or tests positive for the virus/disease, the district will follow the current guidance from the Center for Disease Control, the New York Department of Health and the local health department. Appropriate cleaning and disinfection protocols will be followed. Steps will be followed to isolate the positive case and contact trace exposed individuals for quarantine. Contact tracing protocols will be implemented and followed in accordance with the local health department requirements as the lead agency. Established protocols shall not violate any existing federal, state, or local law, regarding sick leave or health information privacy.

1. Detailed actions for both daily and emergency cleaning of work areas, common area surfaces and shared equipment can be found in **Appendix II**, COVID-19 School Reopening Facilities Cleaning & Disinfection Protocol.
2. The District will adhere to privacy, accommodation, and HIPAA laws, and any federal or state requirements relating to protection of identified individuals during the public health emergency.
3. The District will adhere to any federal or state paid / unpaid leave provisions regarding quarantine, testing, exposure, and treatment protocols during a declared public health emergency.
 - a. Represented employees will have access to contractual leave as outlined in their respective bargaining unit agreements.
4. Contact tracing protocols will be implemented and followed in accordance with the local health department requirements as the lead agency.

Onsite Documentation

The following are protocols to limit exposure and facilitate contact tracing during a public health emergency. These protocols are for documenting precise hours and work locations, including off-site visits, for essential employees and contractors will be established. They are designed only to aid in tracking of the disease and to identify

exposed employees and contractors for contact tracing and to facilitate the provision of any benefits which may be available.

On-Site Employee Contact Documentation

- Complete daily health screening questionnaire prior to arrival on site or immediately upon arrival on site. If symptomatic, do not enter.
- Employees should use a swipe badge or electronic access system if available. Such a system can be used to stagger access and limit staff numbers to reduce unnecessary interactions.
- Use district contact tracing forms
- Record person to person contacts (other than incidental contacts) as they occur
- Record accurate times of contact
- Masks must be worn at all times
- Social distance whenever possible, if a task limits social distancing re-examine the task to see if there is another way for it to be accomplished
- Conduct virtual meeting and interactions whenever possible
- Stagger task that involves multiple individuals to use the same space to improve social distancing
- Limit internal travel to location required by designed duties or tasks
- Limit number of staff in public location such as bathrooms or break rooms
- Turn all contact sheets in at the end of each workday

Vendor Contact Documentation

- Vendors must wear face covering at all times while on site
- Vendors must social distance wherever possible
- Deliveries should be scheduled in advance to minimize contact with staff.
- Establish a delivery drop zone where material can be dropped off at designated times contact free
- Vendors who must enter the facility and interact with staff will be screen with a daily health screening questionnaire
- If staff must interact with vendors, they must record the interaction on the district contact tracing form, including accurate times of interaction
- Clean/disinfect the delivery area(s) between uses.
- Vendor visits/meetings that do not involve delivery must be done remotely

Contractors - Construction project related Contact Documentation

- Contractors must complete a daily health screening questionnaire with their employer either prior to arrival on site or immediately upon arrival on site. If symptomatic do not enter.
- Contractors must wear face-coverings at all times while on district grounds
- Contractor tasks should be scheduled to reduce or eliminate interaction will all district staff. The use of closed off zones or after-hours work should be considered.

- If contractors are required to interact with district staff or work in a shared space the district staff must record this interaction on the district contact tracing form, including accurate times of contact
- Contractor and related project meeting must be remote whenever possible

Off-Site Employee Contact Documentation

(The following pertains to employees who work off site; not from home, or must leave the main location to conduct district business:)

- Complete daily health screening questionnaire prior to going to any off-site location
 - Complete screening survey at designated location as well
- Wear a mask at all times
- Social distance whenever possible
- Schedule virtual visits or meetings whenever possible
- Minimize the number of different locations visited in a day
- Record all person-to-person contacts (other than incidental contacts) as they occur
- Record accurate contact times
- Inquire about possible symptoms or exposure of individuals at locations that may need to be entered that are not business. If there are noted symptoms, or known exposure, do not enter these locations

Emergency Housing for a Public Health Emergency

Coordination with the local health department may be necessary in the event emergency housing is necessary during a public health emergency. The District will coordinate with the health department to lodge identified essential employee(s) at a local hotel, if available.

Appendix I

Infectious Disease Preparedness and Response Plan

Wynantskill Unified Free School District



Infectious Disease Preparedness and Response Plan

Date of Revision/Review: February 1, 2021

Infectious Disease Preparedness and Response Plan

This plan was developed to help identify risk levels at the Wynantskill Unified Free School District and to determine appropriate control measures to implement when faced with infectious diseases. This plan will assist in implementing engineering, administrative, and work practice controls including personal protective equipment (PPE) in order to prepare and respond to infectious diseases.

Risk Factors

Employee risk of occupational exposure to infectious diseases during an outbreak may vary from very high to high, medium, or lower (caution) risk. The level of risk depends on the individual's job requirements, including the requirement for social distancing. During pandemics, the Occupational Safety and Health Administration (OSHA), may issue guidance on occupational risks for workers. In addition to the levels of occupational risk, there are factors that can greatly affect mortality and certain individual's ability to fight specific infectious diseases.

The Occupational Risk Pyramid depicts the four exposure risk levels in the shape of a pyramid to represent probable distribution of risk. Most job functions within the district will fall in the **medium** exposure risk level.

(<https://www.osha.gov/Publications/OSHA3993.pdf>)

Occupational Risk Pyramid



- **Very high** exposure risk jobs with a high potential for exposure to known or suspected sources of infectious diseases during specific medical, postmortem, or laboratory procedures. Staff in this category include:
 - Healthcare and morgue staff performing aerosol-generating procedures on or collecting/handling specimens from potentially

infectious patients or bodies of people known to have, or suspected of having, an infectious disease at the time of death.

- **High** exposure risk jobs with a high potential for exposure to known or suspected sources of an infectious disease. Staff in this category include:
 - Healthcare delivery, healthcare support, medical transport, and mortuary staff exposed to known or suspected infectious disease patients or bodies of people known to have, or suspected of having, infectious disease at the time of death.
- **Medium** exposure risk jobs that require frequent/close contact with people who may be infected, but who are not known or suspected patients. Staff in this category include:
 - Those who may have contact with the general public (e.g., schools, high-population-density work environments, some high-volume retail settings), including individuals returning from locations with widespread infectious disease transmission.
- **Lower** exposure risk (caution) jobs are those that do not require contact with people known to be, or suspected of being, infected nor frequent close contact with (i.e., within 6 feet of) the general public.
 - Staff in this category have minimal occupational contact with the public and other coworkers.

Please refer to Appendix A of this document for OSHA's Occupational Risk Pyramid and individual factors affecting risk levels specifically for COVID-19.

Risk Control

Monitoring of current situations will be crucial. Federal and state, local department of health (LDOH) recommendations will be followed for situations that may arise as a result of outbreaks, such as:

- Increased rates of staff absenteeism.
- The need for social distancing, staggered work shifts, downsizing operations, delivering educational services remotely, and other exposure-reducing measures.
- Interrupted supply chains or delayed deliveries.
- Positive cases of infectious disease that require facility closures.

Conducting essential operations with a reduced workforce should be planned in advance through Continuity of Operations Planning (COOP). These mission critical functions would include at least:

- Payroll
- Benefits management for staff
- Accounts receivable/payable
- Delivery of educational services remotely
- Meal distribution programs and backpack programs
- Building cleaning and sanitization
- IT Support

Risk Reduction

Protecting staff will depend on emphasizing basic infection prevention measures. All staff should implement good hygiene and infection control practices. An aggressive communication plan in the school buildings and community help promote basic infection prevention measures should include:

- Promoting frequent and thorough hand washing by communicating to staff, students, contractors, visitors, and other individuals the importance of washing their hands.
 - Hand washing should last at least 20 seconds and include scrubbing all surfaces and under the nails.
 - If soap and running water are not immediately available, provide alcohol-based hand sanitizer containing at least 60% alcohol.
 - Handwashing should be conducted immediately when soap and running hot water is available.
- Encourage or enable staff to stay home if they are sick.
- Encourage respiratory etiquette, including covering coughs and sneezes.
 - Provide staff, students, and visitors with tissues and trash receptacles.
- Social distancing
- Discourage staff and students from using other's cell phones, desks, offices, or other work tools and equipment, whenever possible.

Regular housekeeping practices are also necessary in assisting in keeping facilities open. Proper cleaning, sanitizing, and disinfecting procedures are required to be completed by maintenance staff. Facility directors and staff must:

- Follow manufacturer's instructions for use of all cleaning and disinfection products must be followed at all times (e.g., concentration, application method, contact time and required PPE).
- Ensure selected disinfectant products are on the approved Environmental Protection Agency (EPA) List for use against emerging viral pathogens.

A comprehensive list of approved cleaning, sanitizing, and disinfecting products can be found in Appendix B of this document.

District policies and procedures should be written in advance to address the following needs:

- Reduction in essential workforce
 - Telecommuting
 - Job rotations
 - Staggered shifts
- Distance learning
- Meal/food preparation
- Childcare operations

Policies and Procedures for Prompt Identification and Isolation of Sick People

Prompt identification and isolation of potentially infectious individuals is a critical step in protecting staff, students, visitors, and others. The district must inform and encourage staff to monitor for signs and symptoms of any suspect contagions. Nursing staff must also have the proper resources to manage students presenting symptoms as school.

Federal, State, and LDOH guidance must be followed regarding protocols for:

- Stay at home,
- Self-quarantine,
- Mandatory isolation
- Return to school or work

Procedures for immediately isolating staff or students who have signs and/or symptoms of a contagious pathogen:

- Move potentially infectious people to a location away from staff, students, and other visitors. Isolation rooms or areas should be designated areas until potentially sick people can leave the building.
- Follow Federal, State and Local guidance to take steps to limit spread of the respiratory secretions of a person who may have a virus. This would include providing the infected person with a face mask.
- Restrict the number of personnel entering isolation areas.
- Protect staff in close contact with (i.e., within 6 feet of) a sick person or who may have been exposed to or have made contact with a person carrying an infectious disease using additional engineering and administrative controls, safe work practices, and PPE. Staff whose activities involve close or prolonged/repeated contact with sick people are addressed further in later sections covering workplaces classified at medium and very high or high exposure risk.

Develop, Implement, and Communicate about Workplace Flexibilities and Protections

When faced with a contagious disease outbreak, the district shall:

- Follow the recommendations of Federal, State, and Local authorities.
 - Maintain regular or routine proactive communication with these authorities
- Ensure that sick leave policies are flexible and consistent with state and local guidance and that employees are aware of these policies.
- Maintain flexible policies that permit employees to stay home to care for a sick family member. Employers should be aware that more employees may need to stay at home to care for sick children or other sick family members than is usual.
- Encourage staff to follow the guidance of their physician or LDOH for notification of illnesses and stay at home procedures.
- Monitor staff concerns about pay, leave, safety, health, and other issues that may arise during infectious disease outbreaks.
- Provide adequate and appropriate training regarding essential worker functions. Ensure protocols are in place for staff health and safety, including proper hygiene practices and the use of any workplace controls. Informed staff who feel safe at work are less likely to be unnecessarily absent.

Implement Workplace Controls

The best way to control a hazard is to systematically remove it from the workplace, rather than relying on staff to reduce their exposure. During an outbreak, when it may not be possible to eliminate the hazard, the most effective protection measures are (listed from most effective to least effective):

1. Engineering controls
2. Administrative controls
3. Personal Protective Equipment (PPE)

There are advantages and disadvantages to each type of control measure when considering the ease of implementation, effectiveness, and cost. In most cases, a combination of control measures will be necessary to protect staff from exposure.

Engineering Controls

Engineering controls involve isolating employees from work related hazards. In workplaces where they are appropriate, these types of controls reduce exposure to hazards without relying on staff behavior. Engineering controls may differ depending on the infectious disease. Controls may include:

- Increasing HVAC ventilation rates in the work environment.
 - The HVAC system will require an evaluation to determine if this control

method will be viable.

- Installing physical barriers, such as clear plastic sneeze guards.
 - Such barriers will require an evaluation prior to installation to maximize its efficiency.
- Utilizing exterior/outside methods for meal and schoolwork distribution.
 - Use of bags and boxes
- Isolation rooms and areas for sick students to use prior to being picked up or leaving the building(s).
 - If possible, select isolation rooms with secondary access so that compromised student(s) do not travel back into the shared space.

Administrative Controls

Administrative controls require action by the staff or employer. Typically, administrative controls are changes in work policy or procedures to minimize exposure to a hazard. Examples of administrative controls include:

- Encouraging or enabling sick staff to stay at home.
- Minimizing contact among staff, students, and visitors by replacing face-to-face meetings with virtual communications and implementing telecommuting when feasible.
- Establishing alternating days or extra shifts that reduce the total number of employees in a facility at a given time, allowing them to maintain distance from one another while maintaining a full onsite work week.
- Discontinuing nonessential travel to locations with ongoing outbreaks.
 - Please refer to Appendix A of this document for COVID-19 related travel restriction guidance.
- Developing emergency communications plans, including a forum for answering staff and family concerns and internet-based communications.
- Providing staff with up-to-date education and training on contagious disease risk factors and protective behaviors (e.g., cough etiquette and care of PPE, when necessary).
- Training staff who need to use protective clothing and equipment how to put it on, use/wear it, and take it off correctly, including in the context of their current and potential duties. Training material should be easy to understand and available in the appropriate language and literacy level for all staff.

Safe Work Practices

Safe work practices are types of administrative controls that include procedures for safe and proper work used to reduce the duration, frequency, or intensity of exposure to a hazard. Examples of safe work practices include:

- Providing resources and a work environment that promotes personal hygiene. For example, provide tissues, trash cans, alcohol-based hand sanitizer containing at least 60 percent alcohol, cleaners, disinfectants, and disposable

- towels for staff to clean, sanitize, and disinfect their work surfaces.
- Requiring regular hand washing and use of alcohol-based hand sanitizer when hand washing is not readily available. Staff should always wash hands when they are visibly soiled and before and after removing any PPE.
- Post age-appropriate hand washing signs in restrooms.

Personal Protective Equipment (PPE)

While engineering and administrative controls are considered more effective in minimizing exposure to contagions, PPE may also be needed to prevent certain exposures. While correctly using PPE can help prevent some exposures, it should not take the place of other prevention strategies.

Examples of PPE include gloves, goggles, face shields, face masks, and respiratory protection, when appropriate. During an outbreak of an infectious disease, recommendations for PPE specific to occupations or job tasks may change depending on job tasks, updated risk assessments for staff, and information on PPE effectiveness in preventing the spread of the disease.

All types of PPE must be:

- Selected based upon the hazard to the staff.
- Properly fitted and periodically refitted, as applicable (e.g., respirators).
- Consistently and properly worn when required.
- Regularly inspected, maintained, and replaced, as necessary.
- Properly removed, cleaned, and stored or disposed of, as applicable, to avoid contamination of self, others, or the environment.
- Storage of personal protective equipment will be on campus and comply with the manufacturer's storage recommendations for each item.
- PPE equipment will be readily available to all employees through identified disbursement protocols.

Employers are obligated to provide designated staff with PPE needed to keep them safe while performing their jobs. The types of PPE required during an outbreak will be based on the risk of being infected with the contagious disease while working and job tasks that may lead to exposure. This may be directed by the federal, state and or LDOH.

Staff, including those who work within 6 feet of patients known to be, or suspected of being, infected and those performing aerosol-generating procedures, need to use respirators per National Institute for Occupational Safety and Health (NIOSH) standards. These staff would be required to be in a respiratory protection program and follow the requirements to wear a respirator.

Information for Specific Viruses, Pathogens, or Infectious Diseases that are currently present or are an ongoing threat currently on a specific site will be

included within Appendix A of this document.

Information requiring the use of facemasks for COVID-19 is located in Appendix A of this document.

Annual Review

This plan should be reviewed annually and be updated as needed. Annual reviews and updates will be recorded in Appendix C of this document.

Appendix A

COVID-19 Specific Guidelines

COVID-19 Specific Guidelines Begin on the Following Page

OSHA Worker Exposure Risk to COVID-19

The Occupational Risk Pyramid depicts the four exposure risk levels in the shape of a pyramid to represent probable distribution of risk. *Most job functions within the district will fall in the **medium** exposure risk level for COVID-19.*

(<https://www.osha.gov/Publications/OSHA3993.pdf>)

Occupational Risk Pyramid



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 - Healthcare and morgue staff performing aerosol-generating procedures on or collecting/handling specimens from potentially infectious patients or bodies of people known to have, or suspected of having, an infectious disease at the time of death.
- **High** exposure risk jobs with a high potential for exposure to known or suspected sources of an infectious disease. Staff in this category include:
 - Healthcare delivery, healthcare support, medical transport, and mortuary staff exposed to known or suspected infectious disease patients or bodies of people known to have, or suspected of having, infectious disease at the time of death.
- **Medium** exposure risk jobs that require frequent/close contact with people who may be infected, but who are not known or suspected patients. Staff in this category include:
 - Those who may have contact with the general public (e.g., schools,

high-population-density work environments, some high-volume retail settings), including individuals returning from locations with widespread infectious disease transmission.

- **Lower** exposure risk (caution) jobs are those that do not require contact with people known to be, or suspected of being, infected nor frequent close contact with (i.e., within 6 feet of) the general public.
 - Staff in this category have minimal occupational contact with the public and other coworkers.

Individual Factors Affecting Risk Levels for COVID-19

Staff may also have individual factors that will impact risk levels depending on the infectious disease. These factors include, but are not limited to the following for COVID-19:

- Older age (65 years and older)
- Presence of chronic medical conditions, including immunocompromising conditions such as:
 - Chronic lung disease or moderate to severe asthma
 - Serious heart conditions
 - Individuals in cancer treatment, having recent transplants
 - HIV or aids
 - Prolonged use of corticosteroids
 - Severe obesity
 - Diabetes
 - Chronic kidney disease and undergoing dialysis
 - Liver disease
- Pregnancy
- Certain personal lifestyle choices (i.e. drug use)

Source: <https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/groups-at-higher-risk.html>

Current Executive Orders and Directives

Please visit the following website to view all current executive orders and directives issued by the NYS Governor's office: <https://www.governor.ny.gov/executiveorders>

COVID-19 Related Travel Restrictions

For COVID-19 related travel advisories for New York State, regularly check the following website for updated information: <https://coronavirus.health.ny.gov/covid-19-travel-advisory>

Centers for Disease Control and Prevention

Steps to Help Prevent the Spread of COVID-19 if you are Sick

Steps to help prevent the spread of COVID-19 if you are sick

FOLLOW THE STEPS BELOW: If you are sick with COVID-19 or think you might have it, follow the steps below to help protect other people in your home and community.

Stay home except to get medical care

- **Stay home:** People who are mildly ill with COVID-19 are able to recover at home. Do not leave, except to get medical care. Do not visit public areas.
- **Stay in touch with your doctor.** Call before you get medical care. Be sure to get care if you feel worse or you think it is an emergency.
- **Avoid public transportation:** Avoid using public transportation, ride-sharing, or taxis.



Separate yourself from other people in your home, this is known as home isolation

- **Stay away from others:** As much as possible, you should stay in a specific “sick room” and away from other people in your home. Use a separate bathroom, if available.
- **Limit contact with pets & animals:** You should restrict contact with pets and other animals, just like you would around other people.
 - Although there have not been reports of pets or other animals becoming sick with COVID-19, it is still recommended that people with the virus limit contact with animals until more information is known.
 - When possible, have another member of your household care for your animals while you are sick with COVID-19. If you must care for your pet or be around animals while you are sick, wash your hands before and after you interact with them. See COVID-19 and Animals for more information.



Call ahead before visiting your doctor

- **Call ahead:** If you have a medical appointment, call your doctor’s office or emergency department, and tell them you have or may have COVID-19. This will help the office protect themselves and other patients.



Wear a facemask if you are sick

- **If you are sick:** You should wear a facemask when you are around other people and before you enter a healthcare provider’s office.
- **If you are caring for others:** If the person who is sick is not able to wear a facemask (for example, because it causes trouble breathing), then people who live in the home should stay in a different room. When caregivers enter the room of the sick person, they should wear a facemask. Visitors, other than caregivers, are not recommended.



Cover your coughs and sneezes

- **Cover:** Cover your mouth and nose with a tissue when you cough or sneeze.
- **Dispose:** Throw used tissues in a lined trash can.
- **Wash hands:** Immediately wash your hands with soap and water for at least 20 seconds. If soap and water are not available, clean your hands with an alcohol-based hand sanitizer that contains at least 60% alcohol.



Clean your hands often

- **Wash hands:** Wash your hands often with soap and water for at least 20 seconds. This is especially important after blowing your nose, coughing, or sneezing; going to the bathroom; and before eating or preparing food.
- **Hand sanitizer:** If soap and water are not available, use an alcohol-based hand sanitizer with at least 60% alcohol, covering all surfaces of your hands and rubbing them together until they feel dry.
- **Soap and water:** Soap and water are the best option, especially if hands are visibly dirty.
- **Avoid touching:** Avoid touching your eyes, nose, and mouth with unwashed hands.



Avoid sharing personal household items

- **Do not share:** Do not share dishes, drinking glasses, cups, eating utensils, towels, or bedding with other people in your home.



cdc.gov/COVID19

- **Wash thoroughly after use:** After using these items, wash them thoroughly with soap and water or put in the dishwasher.

Clean all “high-touch” surfaces everyday

Clean high-touch surfaces in your isolation area (“sick room” and bathroom) every day; let a caregiver clean and disinfect high-touch surfaces in other areas of the home.



- **Clean and disinfect:** Routinely clean high-touch surfaces in your “sick room” and bathroom. Let someone else clean and disinfect surfaces in common areas, but not your bedroom and bathroom.
 - If a caregiver or other person needs to clean and disinfect a sick person's bedroom or bathroom, they should do so on an as-needed basis. The caregiver/other person should wear a mask and wait as long as possible after the sick person has used the bathroom.
- High-touch surfaces include phones, remote controls, counters, tabletops, doorknobs, bathroom fixtures, toilets, keyboards, tablets, and bedside tables.
- **Clean and disinfect areas that may have blood, stool, or body fluids on them.**
- **Household cleaners and disinfectants:** Clean the area or item with soap and water or another detergent if it is dirty. Then, use a household disinfectant.
 - Be sure to follow the instructions on the label to ensure safe and effective use of the product. Many products recommend keeping the surface wet for several minutes to ensure germs are killed. Many also recommend precautions such as wearing gloves and making sure you have good ventilation during use of the product.
 - Most EPA-registered household disinfectants should be effective. A full list of disinfectants can be found [here](#).

Monitor your symptoms

- **Seek medical attention, but call first:** Seek medical care right away if your illness is worsening (for example, if you have difficulty breathing).
 - **Call your doctor before going in:** Before going to the doctor's office or emergency room, call ahead and tell them your symptoms. They will tell you what to do.
- **Wear a facemask:** If possible, put on a facemask before you enter the building. If you can't put on a facemask, try to keep a safe distance from other people (at least 6 feet away). This will help protect the people in the office or waiting room.
- **Follow care instructions from your healthcare provider and local health department:** Your local health authorities will give instructions on checking your symptoms and reporting information.



If you develop **emergency warning signs** for COVID-19 get **medical attention immediately**.

Emergency warning signs include*:

- Difficulty breathing or shortness of breath
- Persistent pain or pressure in the chest
- New confusion or inability to arouse
- Bluish lips or face

*This list is not all inclusive. Please consult your medical provider for any other symptoms that are severe or concerning.

Call 911 if you have a medical emergency: If you have a medical emergency and need to call 911, notify the operator that you have or think you might have, COVID-19. If possible, put on a facemask before medical help arrives.

How to discontinue home isolation

- People **with COVID-19 who have stayed home (home isolated)** can stop home isolation under the following conditions:
 - **If you will not have a test** to determine if you are still contagious, you can leave home after these three things have happened:
 - You have had no fever for at least 72 hours (that is three full days of no fever without the use medicine that reduces fevers)
 - AND
 - other symptoms have improved (for example, when your cough or shortness of breath have improved)
 - AND
 - at least 7 days have passed since your symptoms first appeared
 - **If you will be tested** to determine if you are still contagious, you can leave home after these three things have happened:
 - You no longer have a fever (without the use medicine that reduces fevers)
 - AND
 - other symptoms have improved (for example, when your cough or shortness of breath have improved)
 - AND
 - you received two negative tests in a row, 24 hours apart. Your doctor will follow CDC guidelines.



In all cases, follow the guidance of your healthcare provider and local health department. The decision to stop home isolation should be made in consultation with your healthcare provider and state and local health departments. Local decisions depend on local circumstances.

More information is available [here](#).

Additional information for healthcare providers: [Interim Healthcare Infection Prevention and Control Recommendations for Persons Under Investigation for 2019 Novel Coronavirus](#).

Source: <https://www.cdc.gov/coronavirus/2019-ncov/downloads/sick-with-2019-nCoV-fact-sheet.pdf>

New York State Department of Health

Interim Guidance on Executive Order 202.16 Requiring Face Coverings for Public and Private Employees Interacting with the Public during the COVID-19 Outbreak



Department
of Health

ANDREW M. CUOMO
Governor

HOWARD A. ZUCKER, M.D., J.D.
Commissioner

SALLY DRESLIN, M.S., R.N.
Executive Deputy Commissioner

Interim Guidance on Executive Order 202.16 Requiring Face Coverings for Public and Private Employees Interacting with the Public During the COVID-19 Outbreak

April 14, 2020

Background:

In December 2019, a new respiratory disease called the novel coronavirus (COVID-19) was detected. COVID-19 is caused by a virus (SARS-CoV-2) that is part of a large family of viruses called coronaviruses. Recently, community-wide transmission of COVID-19 has occurred in the United States, including New York where the number of both confirmed and suspected cases is increasing. To reduce the community-wide transmission of COVID-19, Governor Andrew M. Cuomo has taken aggressive action through [Executive Order 202](#), as amended, to combat the spread of this infectious disease, reducing the density of people in areas of common congregation by closing the in-person operations of non-essential businesses and prohibiting all non-essential gatherings of individuals of any size for any reason.

Executive Order:

[Executive Order 202.16](#), issued on April 12, 2020, provides the following directive:

For all essential businesses or entities, any employees who are present in the workplace shall be provided and shall wear face coverings when in direct contact with customers or members of the public. Businesses must provide, at their expense, such face coverings for their employees. This provision may be enforced by local governments or local law enforcement as if it were an order pursuant to section 12 or 12-b of the Public Health Law. This requirement shall be effective Wednesday, April 15 at 8 p.m.

Guidance:

Essential businesses, as well as state and local government agencies and authorities, must procure, fashion, or otherwise obtain face coverings and provide such coverings to employees who directly interact with the public during the course of their work at no-cost to the employee.

- Businesses are deemed essential by the Empire State Development Corporation (ESD), pursuant to the authority provided in Executive Order 202.6. Please visit the ESD [website](#) for specific information on essential businesses. For the purpose of this guidance, essential businesses shall also provide face coverings to contractors, including independent contractors.
- Face coverings include, but are not limited to, cloth (e.g. homemade sewn, quick cut, bandana), surgical masks, N-95 respirators, and face shields. Please visit the Centers for Disease Control and Prevention's "Coronavirus Disease 2019 (COVID-19)" [website](#) for [information](#) on cloth face covers and other types of personal protective equipment (PPE), as well as instructions on use and cleaning.

- Direct interaction with the public shall be determined by the employer, but, at a minimum, shall include any employee who is routinely within close contact (i.e. six feet or less) with members of the public, including but not limited to customers or clients.
- Employees are allowed to use their own face coverings, but shall not be mandated to do so by their employer. *Further, this guidance shall not prevent employees from wearing more protective coverings (e.g. surgical masks, N-95 respirators, or face shields) if the individual is already in possession of such PPE, or if the employer otherwise requires employees to wear more protective PPE due to the nature of their work (e.g. healthcare).*
- Employees are required to wear face coverings when in direct contact with members of the public, except where doing so would inhibit or otherwise impair the employee's health. *Employers are prohibited from requesting or requiring medical or other documentation from an employee who declines to wear a face covering due to a medical or other health condition that prevents such usage.*
- Employees who are unable to wear face coverings and are susceptible to COVID-19 based on the "Matilda's Law" criteria (i.e. individuals who are 70 years of age or older, individuals with compromised immune systems, and individuals with underlying illnesses) should consult with their employer to consider [reasonable accommodations](#), including but not limited to different PPE, alternate work location, or alternate work assignment with fewer interactions with the public. Employers should work with their employees to see if they can be accommodated to ensure the employee can continue to deliver essential services in the safest manner possible.
- If an employer is unable to procure, fashion, or otherwise obtain face coverings for their employees, they may consult with their local office of emergency management to determine if extra supplies exist within the municipality for this purpose and, if so, they may submit a request for face coverings. Please note that quantities are extremely limited and are prioritized for health care workers and first responders. *Not being able to source face coverings does not relieve an employer's obligation to provide such face coverings to their employees.*
- Nothing in this guidance shall supercede the respiratory protection equipment requirements set forth by the United States Department of Labor's Occupational Safety and Health Administration (OSHA).

Additional Information:

New York State Coronavirus (COVID-19) Website

<https://coronavirus.health.ny.gov/>

United States Centers for Disease Control and Prevention Coronavirus (COVID-19) Website

<https://www.cdc.gov/coronavirus/2019-ncov/index.html>

**New York State Department of Health
Interim Cleaning and Disinfection Guidance
for Primary and Secondary Schools for COVID-19**



**Department
of Health**

ANDREW M. CUOMO
Governor

HOWARD A. ZUCKER, M.D., J.D.
Commissioner

SALLY DRESLIN, M.S., R.N.
Executive Deputy Commissioner

**Interim Cleaning and Disinfection Guidance for
Primary and Secondary Schools for COVID-19**

Background:

In December 2019, a new respiratory disease called Coronavirus Disease 2019 (COVID-19) was detected in China. COVID-19 is caused by a virus (SARS-CoV-2) that is part of a large family of viruses called coronaviruses. To help prevent spread of COVID-19, schools should continue to educate students, faculty and staff about proper hand and respiratory hygiene.

Hand hygiene:

- Regular hand washing with soap and water for at least 20 seconds should be done:
 - Before eating;
 - After sneezing, coughing, or nose blowing;
 - After using the restroom;
 - Before handling food;
 - After touching or cleaning surfaces that may be contaminated; and
 - After using shared equipment like computer keyboards and mice.

If soap and water are not available, use an alcohol-based hand sanitizer. School medical directors should approve and permit the use of alcohol-based hand sanitizers in their facilities without individual's physician orders as alcohol-based hand sanitizers are considered over-the-counter drugs. Student use of alcohol-based hand sanitizers should always be supervised by adults. Parents/guardians can inform the school that they do not want their child to use alcohol-based hand sanitizers by sending a written notice to the school.

Respiratory hygiene:

- Covering coughs and sneezes with tissues or the corner of elbow; and
- Disposing of soiled tissues immediately after use.

**What steps should schools
in NYS take for COVID-19?**

Now:

Schools should continue performing routine cleaning. Specific high-risk locations warrant cleaning and disinfection at least daily.

**If an individual with laboratory
confirmed COVID-19 was
symptomatic in a school-setting:**

Cleaning and disinfection throughout the school.

Routine Cleaning:

Soiled and frequently touched surfaces can be reservoirs for pathogens, resulting in a continued transmission to people. Therefore, for pathogenic microorganisms that can transmit disease through indirect contact (transmission through contaminated surfaces), extra attention must be paid to surfaces that are touched most often by different individuals. **As part of standard infection control practices in school settings, routine cleaning should be continued.**

In New York State, all primary and secondary schools are required to use green cleaning products. For additional information on the laws regarding the use of green cleaning products, see the [Policies, Guidelines and Report](#) section of NY's Green Cleaning Program website. Routine cleaning of school settings include:

- Cleaning high contact surfaces that are touched by many different people, such as light switches, handrails and doorknobs/handles.
- Dust- and wet-mopping or auto-scrubbing floors.
- Vacuuming of entryways and high traffic areas.
- Removing trash.
- Cleaning restrooms.
- Wiping heat and air conditioner vents.
- Spot cleaning walls.
- Spot cleaning carpets.
- Dusting horizontal surfaces and light fixtures.
- Cleaning spills.

Specific high-risk locations within a school warrant cleaning and disinfection before a confirmed case of COVID-19 occurs in the school.

Examples of these locations include:

Health Office

- Clean and disinfect health cots regularly (after each student use)
- Cover treatment tables and use pillow protectors
- Discard or launder coverings after each use

Lunchrooms

- Clean and disinfect lunch tables regularly (at least once daily)

Athletic Rooms

- Establish a regular cleaning schedule for shared environmental surfaces such as wrestling mats or strength-training equipment
- Disinfect mats and other high-use equipment at least daily

Other Frequently Touched Surfaces

- Clean and disinfect frequently touched surfaces at least once daily after students have left for the day

Cleaning and Disinfection:

Cleaning removes germs, dirt and impurities from surfaces or objects, while disinfecting kills germs on surfaces or objects. **If a laboratory confirmed case of COVID-19 was symptomatic while in the school setting, custodial staff should perform cleaning and disinfection of frequently touched areas throughout the school.**

Step 1: Cleaning: Always clean surfaces prior to use of disinfectants in order to reduce soil and remove germs. Dirt and other materials on surfaces can reduce the effectiveness of disinfectants. For combination products that can both clean and disinfect, always follow the instructions on the specific product label to ensure effective use. In New York State, all primary and secondary schools, state agencies, and state authorities are required to use green cleaning products. For additional information on the laws regarding the use of green cleaning products, see the [Policies, Guidelines and Report](#) section of NY's Green Cleaning Program website.

Step 2: Disinfection: Cleaning of soiled areas must be completed prior to disinfection to ensure the effectiveness of the disinfectant product. **NYS Green Cleaning Program does not address the use of disinfection products. Disinfection products may be used in school settings as needed at any time.** If EPA- and DEC*-registered products specifically labeled for SARS-CoV-2 are not available, disinfect surfaces using a disinfectant labeled to be effective against rhinovirus and/or human coronavirus. If such products are unavailable, it is also acceptable to use a fresh 2% chlorine bleach solution (approximately 1 tablespoon of bleach in 1 quart of water). Prepare the bleach solution daily or as needed. EPA- and DEC*- registered disinfectants specifically labeled as effective against SARS-CoV-2 may become commercially available at a future time and once available, those products should be used for targeted disinfection of frequently touched surfaces.

Examples of frequently touched areas in schools:

- Classroom desks and chairs;
- Lunchroom tables and chairs;
- Door handles and push plates;
- Handrails;
- Kitchen and bathroom faucets;
- Light switches;
- Handles on equipment (e.g., athletic equipment);
- Buttons on vending machines and elevators;
- Shared telephones;
- Shared desktops;
- Shared computer keyboards and mice; and
- Bus seats and handrails.

Note: Computer keyboards are difficult to clean due to the spaces between keys and the sensitivity of its hardware to liquids. When shared, they may contribute to indirect transmission. Locations with community use computers should provide posted signs regarding proper hand hygiene before and after using the computers to minimize disease transmission. Also, consider using keyboard covers to protect the hardware against spills and facilitate cleaning.

- Label directions must be followed when using disinfectants to ensure the target viruses are effectively killed. This includes adequate contact times (i.e., the amount of time a disinfectant should remain on surfaces to be effective), which may vary between five and ten minutes after application. Disinfectants that come in a wipe form will also list effective contact times on their label.
- For disinfectants that come in concentrated forms, staff should carefully follow instructions for making the diluted concentration needed to effectively kill the target virus. This information can be found on the product label.

Disinfecting is the responsibility of school custodial staff. They are trained to use disinfectants in a safe and effective manner. Staff are reminded to ensure procedures for safe and effective use of all products are followed. Staff do not need to wear respiratory protection (e.g., masks) while cleaning. Safety instructions are listed on product labels and include the personal protective equipment (e.g., gloves) that should be used. Place all used gloves in a bag that can be tied closed before disposing of them with other waste. Wash hands with soap and water for at least 20 seconds immediately after removing gloves or use an alcohol-based hand sanitizer if soap and water are not available. Soap and water should be used if hands are visibly soiled.

*NYSDEC registration will not be listed on disinfection product labels. Information about disinfection product registration with NYSDEC can be found at: <http://www.dec.ny.gov/nyspad/products>. If you have any questions about NYSDEC pesticide registration, please call the NYSDEC Bureau of Pesticide Management at 518-402-8748.

More information:

New York State Department of Health's COVID-19 Webpage:
<https://www.health.ny.gov/diseases/communicable/coronavirus/>

Centers for Disease Control and Prevention Webpage:
<https://www.cdc.gov/coronavirus/2019-ncov/>

New York State Green Cleaning Program:
<https://greencleaning.ny.gov/>

Enhanced Green Cleaning Guidance To Reduce The Spread Of Communicable Disease:
https://greencleaning.ny.gov/DownloadCenter/Files/EnhancedGreenCleaningTrainingManual5_17_10.pdf

Source:

https://coronavirus.health.ny.gov/system/files/documents/2020/03/cleaning_guidance_schools.pdf

Appendix B

Approved Cleaning, Sanitizing, and Disinfectant Products

Below is a comprehensive list of approved cleaning, sanitizing, and disinfectant products that are currently in use at Wynantskill Unified Free School District.

Product Name	Manufacturer
E-15 Cleaner E-23 Disinfectant	Buckeye Buckeye
GC-2100 Cleaner/Disinfectant	Synthetic Labs Inc.
Foaming Germicidal Cleaner	Pro Link
Germicidal Ultra Bleach	Pure Bright

***Note:** Products shall be used in accordance with the manufacturers label and directions

Appendix C

Annual Review/Updates

Date	Reviewed by	Changes and/or Revisions
2/1/2021	Patrick Paratore, QIII BOCES H&S Specialist	None at this time.

Appendix II

Wynantskill Unified Free School District

COVID-19 School Reopening Facilities Cleaning & Disinfection Protocol

The following is the Wynantskill Unified Free School District's cleaning and disinfection protocol for reopening during the COVID-19 pandemic. This protocol meets the requirements of the New York State Education Department (NYSED) and New York State Department of Health (NYSDOH) as well as all applicable Federal, State, and local authorities.

- Requirements:
 - Adhere to current federal, state and local guidance regarding COVID-19 at all times.
 - Indoor cleaning and disinfection:
 - Clean and disinfect each space at least daily
 - Maintain daily logs that include the date, time, and scope of cleaning and disinfection. Cleaners and custodians will use this to track their daily/nightly cleaning and disinfection schedules.
 - Clean and disinfect high touch surfaces frequently based upon levels of use:
 - Tables, doorknobs, light switches, countertops, handles, desks, phones, keyboards, tablets, toilets and restrooms, faucets and sinks, etc.
 - Clean and disinfect shared equipment between each use by staff and/or students:
 - Desks, computers, copiers, office equipment, PE equipment, art supplies, etc.
 - School Health Offices
 - Required cleaning and disinfection after each use:
 - Cots, bathrooms, etc.
 - Health office equipment (blood pressure cuffs, otoscopes, stethoscopes, etc.) must be cleaned per manufacturer's directions
 - OT/PT Cleaning and Disinfection:
 - All equipment used is required to be cleaned and disinfected between each use.
 - Outdoor cleaning:
 - Outdoor areas require normal routine cleaning of high touch surfaces and do not require disinfection per Centers for Disease Control (CDC)
 - High touch surfaces:

- Grab bars, railings, hand holds, rings, chains on swings, etc.
 - High touch surfaces will be cleaned as needed based upon levels of use
- Procedures:
 - Cleaning:
 - Follow manufacturers recommendations for proper cleaning.
 - Cleaning procedures will be kept on hand in the buildings and grounds office.
 - Disinfecting:
 - Follow manufacturers recommendations for proper disinfecting.
 - Disinfecting procedures will be kept on hand in the buildings and grounds office.
- District approved disinfectants available for daily use:
 - EPA Approved Disinfectants:
 - The buildings and grounds department maintains a current listing of approved disinfectants.
 - EPA approved alternate disinfectants:
 - Bleach (1/3 cup to gallon mixture of bleach to water, Per NYSED and CDC guidance)
 - 70% or higher alcohol solutions, if available.
- Determining approved disinfecting products:
 - Refer to EPA List N for disinfectants for use against COVID-19
 - If a product is not on the list the CDC states “If you can’t find a product on this list to use against SARS-CoV-2, look at a different product's label to confirm it has an EPA registration number and that human coronavirus is listed as a target pathogen.”
 - Source: <https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2-covid-19>

Appendix III

Record of Updates/Revisions

Date	Reviewed by	Updates and/or Revisions
2/1/2021	Patrick Paratore, QIII BOCES H&S Specialist	None at this time.