Navajo Nation School Reopening Readiness Assessment

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INTRODUCTION
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All schools will complete the Reopening Readiness Assessment (RRA) Checklist found on pages 3-8 in this document.

The readiness checklist is aligned with CDC guidelines and cross referenced with the Bureau of Indian Education's (BIE) Reopening and Continuity of School Operations School Year 2020-2021 Checklist for School Operations. The RRA Checklist aligns with the expectations provided by CDC, Navajo Nation, and BIE, which were included in the Navajo Nation School Reopening Plan and the Navajo Nation School Safety Guidelines. Each indicator within the RRA Checklist should have evidence based on either a schools' written plan or a walkthrough. If not, members of the assessment team will identify it as "no evidence". Also, throughout the checklist, "BIE" is written within the indicators, and should be used to reference BIE's Checklist for School Operations that schools must also address.

Below is an illustration of the three documents that are designed as the framework for reopening schools in a safe manner. This document specifically will cover the school safety guidelines.

Navajo Nation School Reopening Plan

Navajo Nation School Reopening Readiness Assessment Checklist

Navajo Nation School Safety Guidelines
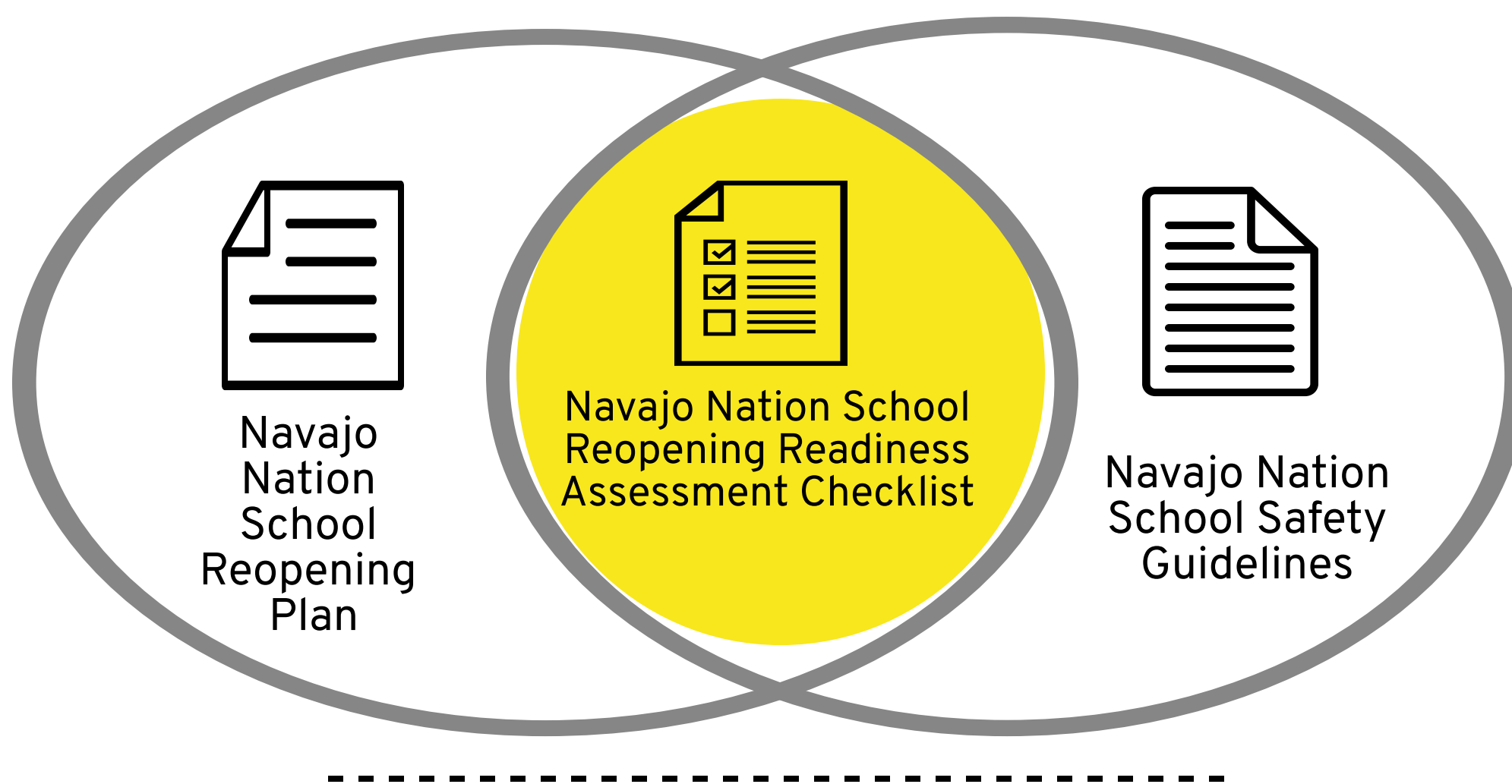
Guidance for schools that are housed in Bureau of Indian Affairs (BIA) facilities and buildings:

There are additional items that are not covered under this Navajo Nation School Reopening Readiness Assessment Checklist. For example, there is no section on playgrounds or water systems. However, The Department of Diné Education recommends that administrators work with their respective BIE facility maintenance person to ensure that all required indicators of the walk through are met by using both checklists. The readiness assessment checklist is influenced by the mitigation strategies that are aligned with relevant guidance and best practices as determined by the many Navajo Nation safety teams, including teams that work directly toward mitigating COVID-19 on the Navajo Nation (NHCOC, EPI, Testing, etc.) All efforts have been made to align both documents to ensure a school is safely prepared to reopen.

Process of Readiness Assessment

The school or district will assemble a Readiness Assessment review team, with the recommended composition of five individuals:

(1) administrator

(1) local health worker

(1) educator

(1) facility/maintenance representative

(1) parent/guardian or community member

See Appendix C- Glossary in Navajo Nation School Reopening Plan for definitions of each individual

The school may also invite additional members from their local IHS federal service unit or health facility, school board members, Department of Diné Education staff, Navajo Department of Health (NDOH), or Navajo Health Command Operations Center (NHCOC).

School creates a Reopening Readiness Team

Team reviews School Reopening Plans alongside checklist

Team completes physical walk through of building, documenting findings on checklist

Team debriefs and generates recommendations (based on review of plan and walk through) on checklist.

If other state or tribal entity, fire marshall, or other recognized safety team completed walk-through, schools may submit that documentation in lieu of walk through.

All team members sign attestation statement included with checklist. Team will come to a consensus for recommendation fo reopening.

Signed attestation statement and completed checklist with recommendations are submitted to DODE, school administration, and school board, no later than two weeks before planned reopening. *

Ongoing: School revisits recommendations and plans to implement changes

Checklist and recommendations require more time to meet criteria before reopening

Successful Readiness Checklist = Reopen to Students

Note: There is an exception of schools that have already met all criteria and can supply documentation and evidence to show readiness in all areas of readiness assessment.

Reopening Readiness Checklist

Preparation & Prevention Knowledge	Evidence in Written Plan	Evidence in Walk Through	No Evidence
Develop policies and update plans that include the identification and communication with local and regional public health experts in medicine, population health, Safety, and Navajo Nation Occupational Safety and Health Administration (NNOSHA). *BIE- Update Emergency Action and Communication Plan*	▉		
Develop resource lists of these professionals who provide training and support and can answer common questions about COVID-19 prevention practices. *BIE- Update Emergency Action and Communication Plan*	▉		
Include in plan the timeline to train staff on all safety protocols, including infection prevention and control (IPC) practices, psychological first aid, chemical and environmental health, etc. *BIE- Required Training*	▉		
Encourage staff to attend training opportunities such as Navajo Health Command Operations Center (NHCOC) IPC training, Environmental Protection Agency (EPA) school related training, CDC training, and others. *BIE- Required Training*	▉		

Recommendations

Behaviors that Prevent Spread of Covid-19: *Stay Home When Appropriate*	Evidence in Written Plan	Evidence in Walk Through	No Evidence
Incorporate in plan ways to Instruct staff, students, and their families to stay home if they have COVID-19 symptoms, are awaiting test results due to symptoms or exposure, or have been exposed to someone who has tested positive or is exhibiting symptoms. *BIE- Bus Transportation Guidelines*	▉	▉	
Develop policies that support and encourage employees and students to stay home when appropriate (including quarantine areas and change in attendance policy to reflect accommodations for increased absences). *BIE- Communication Plan*	▉		
Consider the pros and cons of health screenings prior to arrival to school facilities or school transportation vehicles. *BIE- Bus Transportation Guidelines*	▉	▉	
Plan "What to do if a Student Becomes Sick at School or Reports a New COVID-19 Diagnosis" *BIE- Bus/Seating Arrangements*	▉	▉	

Recommendations

Behaviors that Prevent Spread of Covid-19: *Handwashing and Respiratory Etiquette*	Evidence in Written Plan	Evidence in Walk Through	No Evidence
Teach and reinforce handwashing with soap and water for at least 20 seconds: • Ensure access to essential hygiene supplies including consistent running hot and cold water, soap, paper towels, tissues, hand towels. • Ensure handwashing stations are accessible. • Post visible signs as reminders and behavior change support. • Increase monitoring to ensure adherence among students and staff. • Provide hand sanitizer containing at least 60% alcohol if soap and water are not readily available *BIE- Faciliites/Restrooms; General School Health & Safety Guidelines , Personal Protective Barriers (PPB)*			

Recommendations

Behaviors that Prevent Spread of Covid-19: *Universal* and *Correct Use of Masks*	Evidence in Written Plan	Evidence in Walk Through	No Evidence
Teachers, staff, students, and visitors (ages 2 and above) who enter the school will consistently and correctly use face masks to prevent SARS-CoV-2 transmission through respiratory droplets. *BIE- General School Health & Safety Guidelines*			
Develop policies that indicate Masks are required in all classroom and non-classroom settings, including hallways, school offices, restrooms, gyms, auditoriums, etc. *BIE- Elevators and Stairs, Protective Barriers, PPB*			
Develop policies for exceptions and accommodations for: • Persons who, because of a disability, cannot wear a mask or wear a mask safely; • Settings such as accommodating those who are deaf or hard of hearing. • At times when mask wearing is not feasible (e.g., eating and drinking). Steps are needed to promote physical distancing during these times.			
Develop policies regarding: • Clean masks should be worn each day (reusable cloth masks should be washed when dirty or at least daily). Throw away disposable masks after wearing once. • Masks are the preferred and recommended simple barrier to prevent source control.			

Develop policies regarding:
• The use of clear masks for instruction for students who need to visually see the instructor's mouth.
   • Ensure there are no breathing difficulties or over heating problems for the wearer.
   • Clear masks are not face shields; face shields are not recommended			

Develop policies regarding: • If clear masks are not feasible, establish appropriate ventilation, more than 6 feet of physical distance, and plexi-glass or other clear dividers that are able to be cleaned and sanitized. • The frame should not be made of wood as wood is porous, will expand when wet, and is hard to disinfect. If wood is used, it will need to be painted by impermeable paint to be wiped down. • For DIY plexiglass dividers, all construction plans should be reviewed and approved by individual(s) identified by school administration who can identify the hazards.			

Recommendations

Maintain Healthy Environments: *Physical Distancing*	Evidence in Written Plan	Evidence in Walk Through	No Evidence
In Policies: Take steps to ensure that people who do not live together remain 6 feet away from others • All staff should consistently communicate, explain, model, and reinforce appropriate physical distancing practices in ways that are developmentally appropriate for students, teachers, staff, and parents. • Consider CDC recommended seating patterns. **BIE- Personal Protective Barriers**	▓		
Outfit buildings with highly visual and visible physical distancing demarcations: • Markers and physical guides on floors/walls to communicate where students and staff should stand or stay in order for all parties to stay 6 feet apart. **BIE- Protective Barriers**		▓	
Use physical barriers, approved by individual(s) identified by school administration who can identify the hazards, in lieu of distance if unable to accommodate 6 feet of distancing. **BIE- Protective Barriers**		▓	
In Policies: Whenever 6 feet of physical distance is not realistic, strongly reinforce correct mask wearing. **BIE- Personal Protective Barriers, Required Training**		▓	
Recommendations			

Maintain Healthy Environments: *Clean and Maintain Healthy Facilities.*	Evidence in Written Plan	Evidence in Walk Through	No Evidence
Ensure cleaning and disinfectant supply inventories are: • Readily available and safely stored (locked and/or out of reach) according to the Safety Data Sheets (SDS) that are provided by the vendors.used to follow schedules of increased routine cleaning and disinfection of frequently touched surfaces per CDC and EPA. **BIE- COVID- 19 Hygienic Supplies**		▓	
In policies and walk through: Ensure chemical hazards safety per NNOSHA, NN Safety, and related protocols (not accessible by children, following the recommended use, and adequate ventilation to avoid exposure. **BIE- Storage of cleaning chemicals and hand sanitizers**	▓	▓	
In policies and walk through: Determindation what needs to be cleaned, and how areas will be disinfected. • *Cleaning and Disinfecting schedule* that includes: • Surfaces and objects in public or shared areas • High touch surfaces include: Tables, doorknobs, light switches, countertops, handles, desks, phones, keyboards, toilets, faucets, sinks. • Post visible cleaning check sheets in restrooms, kitchens, classrooms, and high traffic areas. **BIE- School Cleaning Guidelines**	▓	▓	
In Policies and walk through: minimize shared Objects • Discourage sharing objects that are difficult to clean or disinfect. For example, sharing of soft toys, stuffed animals, crayons and art supplies, sponges, clay, etc. • Ensure adequate supplies (e.g., assign each student art supplies or equipment). • Avoid sharing electronic devices if possible. **BIE- Protective Barriers**	▓	▓	
Recommendations			

Maintain Healthy Environments: *School Building Considerations*	Evidence in Written Plan	Evidence in Walk Through	No Evidence

In walk through: Assess ventilation within all rooms and areas and review current air quality.
• Consult Safety and HVAC professionals regarding each school's ventilation status. The ASHRAE guidance for schools resource offers improvement strategies such as:
  • Increase ventilation and update ventilation systems to ensure acceptable indoor air quality for the current occupancy level for each space.
  • Install or update filtration systems with adequate particle specifications (e.g., MERV 13 or HEPA).
  • Ensure there is routine maintenance of HVAC.
BIE-Heating ventilation & air conditioning
		█	

In building and classrooms, increase outdoor air ventilation when possible: • Open windows and doors (assess safety to children first). • Use child-safe fans to increase effectiveness of open windows. • Decrease occupancy in areas where outdoor ventilation cannot be increased. • Increase use of outdoor spaces when safe and possible (audience should be upwind of speaker). *BIE- HVAC/Other actions to consider*		█	

Recommendations

Maintain Healthy Operations: *General Preparations and Safety Planning*	Evidence in Written Plan	Evidence in Walk Through	No Evidence
Implement protections for staff and students at higher risk of severe illness. • School safety plans should be revised to reflect Covid-19 hazards. • Offer options for students at higher risk that limit their exposure (e.g. virtual learning, smaller student cohorts, or other). *BIE- Update Emergency action and communication plan*	█		
Incorporate into school plans ways to follow Navajo Nation Department of Health, Health Command Operations Center and NN Government policies related to group gatherings to determine if events can be held • Assess group gathering size limits. • Determine allowable types of activities (e.g. is singing or cheering permitted?) *BIE- General*	█	█	
Create plans for gatherings, visitors, and field trips: • limit nonessential activities and visitors; • limit cross-school transfer for special programs; • consider staff who travel between schools. *BIE- General, Communication Plan*	█	█	
Create transportation plans that follow physical distancing and ventilation practices. *BIE- Communication plan, Bus transportation guidelines*	█		
Promote flexible staff leave policies (e.g., allowing leave to care for a sick family member): • Staff may telecommute where feasible, especially those with increased risk for severe illness. • Implement flexible work schedules	█		
Reduce the number of staff at the school building and on campus at any given time based on student schedules • Conduct virtual staff meetings as much as possible. *BIE- General School Health & Safety Guidelines*	█		

Recommendations

Maintain Healthy Operations: *Personal Protective Equipment Determined by Safety Planning*	Evidence in Written Plan	Evidence in Walk Through	No Evidence
Identify elevated COVID-19 exposure hazards ([Safety Assessment Plan](#)) for all staff and determine any need for Personal Protective Equipment (PPE). • Develop context specific school safety Plans. • PPE may include N-95 respirators, gloves, gowns, and eye protection. • PPE should be used by those caring for or transporting staff or students who may have active COVID-19 illness. *BIE- COVID- 19 Hygienic Supplies*	🟨		
In general, PPE as defined above is not a requirement for safe classroom or school activities.	🟨	🟧	
Recommendations			

Maintain Healthy Operations: *Accommodations, Modifications, and Assistance for Students with Disabilities*	Evidence in Written Plan	Evidence in Walk Through	No Evidence
Collaborate with parents and/or guardians of students with disabilities or special health needs to ensure appropriate implementation of any accommodations and modifications that are needed for students to access the general or modified curriculum, as stated in their Individual Education Programs (IEPs). *BIE- Update Emergency action plan and communication plan*	🟨		
Recommendations			

Prepare for when someone has COVID-19: *Identify those who become sick or those who have close contacts with someone who is sick.*	Evidence in Written Plan	Evidence in Walk Through	No Evidence
Implement sign in logs for all individuals who enter the building. • Information should include, at minimum: name, phone number, and time in and out.		🟧	
Advise students, teachers, staff, and families of home isolation and quarantine criteria. Develop policies that include quarantine protocols, CDC isolation protocol. Safety plans should closing off areas after cleaning and disinfection and cleaning until after 24 hours or as long as possible following safety practices.	🟨	🟧	
Schools must report all COVID-19 cases and close contact to local health officials and to the [HCOC COVID-19 Reporting Portal](#). For questions about reporting cases, schools may call the Health Command Operations Center at (928) 871-7014.	🟨		
Inform those who have had [close contact](#) (see checklist available with definition) to stay home and self-monitor for symptoms, get tested, and follow CDC guidance if symptoms develop.	🟨		
Recommendations			

Prepare for when someone has COVID-19: *School COVID-19 Testing*	Evidence in Written Plan	Evidence in Walk Through	No Evidence
Provide clear guidance and support for any staff or students with symptoms of COVID-19.	▮		
Incorporate into plans how all newly symptomatic individuals will be directed to receive immediate COVID-19 testing and to follow isolation protocols above (this is called "diagnostic testing"). All close contacts of COVID-19 cases also need diagnostic COVID-19 testing and to follow quarantine protocols. This might be seen in an isolation area.	▮	▮	
Incorporate into plans how diagnostic testing may be done: • At the school-by-school personnel using a CLIA waived test (e.g., rapid antigen test) if a CLIA Certificate of Waiver is in place • At the school by a rapid response team deployed from the local health center/clinic • On a referral basis at local health centers/clinics	▮		
Incorporate into plans how screening testing will be handled. Screening testing is testing that is done to detect infection even when there is no reason to suspect infection (e.g., there are no symptoms and no exposures). Screening testing can help prevent silent spread of SARS-CoV-2 from asymptomatic people. • Schools may consider screening testing of faculty, staff and/or students on a weekly or twice weekly basis, using school-based or home-based approaches to testing. • Considerations for screening testing include:	▮		
Plans should discuss feasibility, including cost, personnel, physical space, ability to obtain informed consent, ability to maintain confidentiality, and ability to follow up all test results with recommended actions	▮		
Schools with the following factors are encouraged to consult directly with HCOC POCs to develop and implement school testing plan: • Contextual elements such as geographic mobility of student population, presence, or absence of residential or dorm facilities, and background community COVID-19 transmission patterns.	▮		

Recommendations