



COVID-19 Frequently Asked Questions for Schools

Taken from the Illinois State Board of Education (ISBE), Illinois Department of Public Health (IDPH), Centers for Disease Control (CDC), and Adventist Risk Management (ARM). These recommendations are subject to change based on updates to existing guidelines.

FACE COVERINGS

1. Are all individuals in a school building required to wear a face covering at all times? (Updated 8/10/2020)

Yes. As required by Illinois Department of Public Health (IDPH), except while eating and during band, face coverings must be worn at all times in school buildings, even when social distance is maintained. All individuals in a school building must wear a face covering unless they have a medical contraindication, are under 2 years of age, have trouble breathing, or are unconscious, incapacitated, or unable to remove the face covering without assistance. The CDC does not recommend the use of masks that have an unfiltered valve. Those that use a valve mask must demonstrate that the valve is filtered.

2. Are face coverings required when individuals are outside? (Updated 6/25/2020)

Face coverings are not required outside if social distance is maintained - if individuals always remain 6 feet apart from each other.

3. Can face shields be used in lieu of face coverings (e.g. masks)? (Updated 6/30/2020)

Generally, no. Because respiratory droplets may be expelled from the sides and bottom of face shields, they do not provide adequate 'source control' and should only be used as a substitute for face coverings in the following limited circumstances:

- Individuals who are under the age of 2
- Individuals who are unconscious, incapacitated, or otherwise unable to remove the cover without assistance
- Students who provide a physician's note as documentation that they have a medical contraindication (a contraindication or condition that makes masking absolutely inadvisable) to wearing a face covering
- Teachers needing to show facial expressions where it is important for students to see how a teacher pronounces words (e.g., English learners, early childhood, foreign language, etc.). However, teachers will be required to resume wearing face coverings as soon as possible. Preferred alternatives to teachers wearing face shields include clear face coverings or video instruction. There must be strict adherence to social distancing when a face shield is utilized.

4. Can staff use face shields for instruction? (Updated 6/30/2020)

In cases where individuals need facial visualization for instruction and communication, IDPH recommends video instruction to promote social distancing. If video instruction is not available or appropriate, face shields may be used with the understanding that they have not been deemed effective for source control. As such, heightened attention and adherence to 6-foot social distancing is critical for individuals using face shields. Examples of limited situations when face shields may be necessary, if video instruction is not possible, include for teachers of English Learners or world languages, whose students may need to see their mouths form words to facilitate language acquisition.

5. How should schools and districts verify a student meets an exception to the face covering requirements? (Updated 6/25/2020)

It is recommended that schools require physician's notes for students and staff who are not able to wear a face covering. It is the recommendation that students who are unable to wear a facemask opt for at-home connected learning.

6. How should schools and districts handle individuals who refuse to wear face coverings? (Updated 6/29/2020)

It is recommended that schools examine and communicate which policies apply to the requirement of wearing a face covering while in school buildings and handle violations in the same manner as other similar policy violations.

It is recommended that if students need to be asked to put their face coverings on properly several times a day, they may be asked to be moved to at-home connected learning for the following day.

7. Can dividers be placed around student and staff desks in lieu of face coverings? (Updated 6/25/2020)

No. Schools and districts may opt to utilize dividers around desks, especially for those individuals who have a face covering exemption; however, the dividers may not be used in lieu of face coverings for students without an exemption.

8. Are schools allowed to have a full class of students eat in their classrooms when they are not wearing their masks? (Updated 7/9/2020)

Yes. During planned meals, social distance should be maintained as much as possible. Weather permitting, the school will have students outside during mealtime, so they are safer when not wearing their masks.

It is recommended that students place their mask in a paper bag while they are not wearing it. This will help contain any spread of infection if it happens to be on the inside of the mask from student's breath.

9. Our gym does not have air conditioning. We are concerned with students and staff becoming overheated in their face coverings, how should we handle this? (Updated 7/9/2020)

ISBE encourages schools to consider opportunities for instruction and breaks outdoors, weather permitting. Individuals may remove face coverings outside when 6-foot social distance is maintained. Every classroom will have open windows to ensure correct ventilation.

10. How should cloth face coverings be cleaned and stored? (Updated 8/12/2020)

Personal cloth face coverings should be taken home, laundered daily, dried in a dryer, and reused. Personal cloth face coverings should be stored between uses in a clean sealable paper bag or breathable container.

11. When should a face covering be changed? (Updated 8/12/2020)

Face coverings must be changed immediately if soiled, wet, or torn.

12. Can face covering be removed at certain times? (Updated 8/12/2020)

Yes – face coverings may be temporarily removed at school:

- When eating
- When outdoors and physical distancing of at least 6 feet can be maintained
- When playing a musical instrument outdoors with at least 6 feet social distancing
- If using a face shield when other methods of protection are not available or appropriate (<https://www.isbe.net/Documents/IDPH-Update-Appropriate-Use-Face-Shields.pdf>)

Strict adherence to social distancing should be maintained when face coverings are removed in limited situations.

Schools are encouraged to hold some classes outside, so that students can remove their face covering while keeping 6 feet social distancing.

13. Can athletic face coverings, e.g., neck warmers be used as a substitute for cloth face coverings? (Updated 8/12/2020)

CDC recommends that people wear cloth face coverings in public settings and when around people who don't live in your household, especially when other social distancing measures are difficult to maintain. Cloth face coverings are recommended as a simple barrier to help prevent respiratory droplets from traveling into the air and onto other people when the person wearing the cloth face covering coughs, sneezes, talks, or raises their voice. This is called source control. It is not known if athletic face coverings/neck warmers provide any benefit as source control to protect others from the spray of from the spray of respiratory particles. CDC does not recommend use of athletic face coverings/neck warmers as a substitute for cloth face coverings.

14. What if a student or staff member is unable to tolerate wearing a face covering? (Updated 8/12/2020)

Individuals who have a condition or medical contraindication (e.g., difficulty breathing) that prevents them from wearing a face covering are required to provide documentation from the individual's physician. These persons may wear a face shield in lieu of a face covering; however social distancing must be strictly enforced. Measures to reduce risk of exposure for these persons should be implemented where possible.

SOCIAL DISTANCING

1. Are all individuals in a school building required to maintain social distance (remain 6 feet apart) at all times? (Updated 6/25/2020)

Social distancing must be observed. Desks need to be spaced 6 feet apart; it is recommended that excess furniture be removed from classrooms to allow for as much space as possible in between desks.

2. How should schools handle passing periods and allowing students to move from class-to-class? (Updated 6/25/2020)

Teachers will rotate through classes rather than requiring movement/mixing of student groups.

Recommendations are:

- Provide hallway supervision using hall and bathroom monitors to ensure a limited number of persons enter bathrooms at one time.
- Use marking to designate one-way paths in hallways.
- Place floor markings to delineate 6-foot distance between students in locations where they line up.
- Remove furniture or other items that may encourage congregating in certain areas.
- Suspend the use of lockers. Students will be given a tote to keep all their belongings in the one area.

3. How can the Adventist Schools open with in-person learning when many public schools are not?

Because of smaller class sizes, the Adventist Schools can follow all of the guidelines put forth from the state and CDC in order to reopen with in-person learning, such as having students spaced out with 6 feet distancing at all time. Public Schools can have hundreds or thousands of students attending, therefore, may not be able keep all of the state guidelines for reopening safely.

CAPACITY LIMITS

1. What does 'one space' mean? (Updated 6/25/2020)

While we are on phase 4, no more than 50 individuals can gather in one space. Examples of one space may include one classroom, or areas of a hallway, a gymnasium, etc.

2. What does 'one space' mean when outside? (Updated 6/25/2020)

Each group of 50 or fewer individuals must remain 30 feet apart. If individuals are 6 feet apart at all times, face coverings do not need to be worn.

SYMPTOM SCREENINGS/TEMPERATURE CHECKS

1. How should symptom screenings be administered? (Updated 6/25/2020)

Temperature and symptom screenings will be taken for all staff, students, and visitors before entering school buildings, as well as self-certification screening.

Students, staff, visitors (limited), etc. will be checked for a temperature greater than 100.4 degrees Fahrenheit and currently known symptoms of COVID-19, such as fever, cough, shortness of breath or difficulty breathing, chills, fatigue, muscle and body aches, headache, sore throat, new loss of taste or smell, congestion or runny nose, nausea, vomiting, or diarrhea. Individuals who have a temperature greater than 100.4 degrees Fahrenheit or one known symptom may not enter buildings. Individuals who exhibit symptoms should be sent home and referred to a medical provider for evaluation and treatment and be given information about when they can return to school.

2. Can schools and districts utilize self-certification to verify that individuals in a school building are symptom free? (Updated 7/9/2020)

Yes. Schools and districts can require individuals to self-certify that they are fever- and symptom-free before entering a school building each day, in lieu of conducting symptom and temperature checks at the school building. Self-certification could consist of a simple paper copy of electronic form that an individual must complete each day. A self-certification may not be completed at the beginning of the year for the entire year.

3. Who can perform symptom screenings? (Updated 6/25/2020)

Any staff member may perform in-person temperature checks and symptom screenings. If schools have established a self-certification process, parents, guardians, or other individuals can perform the temperature and symptom checks.

4. Can students under the age of 18 self-certify? (Updated 7/9/2020)

Legally emancipated students under the age of 18 may self-certify. For students who are not legally emancipated, parents/guardians or the individual who enrolled the student may certify on behalf of the student.

5. If my child has symptoms how long do they need to stay home before returning to school? (CDC 8/11/20)

According to the CDC, people with COVID-19 have had a wide range of symptoms reported – ranging from mild symptoms to severe illness. Symptoms may appear 2-14 days after exposure to the virus. People with these symptoms may have COVID-19:

- Fever or chills
- Cough
- Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches
- Headache

- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea

If your child has any one or more of these symptoms they, as well as any siblings attending the school, they must stay home. Follow care instructions from your healthcare provider and local health department. (If you have a potential exposure your local health authorities may give instructions on checking your symptoms and reporting information.) Student(s) (and siblings) may return to school based on the evaluation of a physician. If they visit a doctor and they tell you your student has something other than COVID-19 (such as influenza or strep throat) then you should:

- Follow your doctor's guidelines
- Provide a doctor's note outlining return to school recommendations
- If your student has received any fever-reducing medicine (examples are Tylenol, Advil, or Aleve) for ANY reason, they may not come to school for 24 hours after the medication is given.

MANAGEMENT OF ILL STUDENT OR STAFF

1. What actions should be taken by students/staff sent home with COVID-like symptoms? (Updated 8/12/2020)

All students and staff sent home with COVID-like symptoms should be diagnostically tested. Student and staff should remain home from school until they receive the test results.

Students and staff who are confirmed or probable cases of COVID-19 must complete 10 calendar days of isolation from the date of first symptom onset and be fever-free for 24 hours without use of fever-reducing medications and other symptoms have improved before returning to school. Students and staff returning to school after experiencing COVID-like symptoms but being diagnosed with a non-COVID illness must meet the criteria for returning to school for the illness with which they have been diagnosed.

At a minimum, the individual must be fever-free for 24 hours without the use of fever-reducing medication and have had no diarrhea or vomiting in the previous 24 hours. Other diseases have specific criteria for when a student or staff member can return to school. Follow school health policies and communicable disease guidance for those illnesses. A doctor's note documenting the alternative diagnosis and a negative COVID-19 test result should accompany a student or staff member returning to school with an alternative diagnosis after experiencing COVID-like symptoms.

Schools and districts should assist families in locating free or reduced cost medical clinics for assistance where needed.

Students and staff with COVID-like symptoms who do not get tested for COVID-19 and who do not provide a healthcare provider's note documenting an alternative diagnosis, must complete 10 calendar days of isolation from the date of first symptom onset and be fever-free for 24 hours without use of fever-reducing medications and other symptoms have improved before returning to school.

Medical evaluation and COVID-19 diagnostic testing is strongly recommended for all persons with COVID-like symptoms.

2. How many symptoms does a person need to have to be considered suspect COVID-19? (Updated 8/12/2020)

Students and staff exhibiting one or more COVID-like symptoms should be immediately isolated and evaluated. Schools should evaluate each student/staff to determine if this symptom is new or if it is part of an existing condition for this student/staff.

3. If the sick person has a known condition causing the symptoms, e.g., allergies, migraine, etc., can this be taken into consideration? (Updated 8/12/2020)

Every symptomatic person should be evaluated by their healthcare provider on a case-by-case basis and decisions to test for COVID-19 should be based on their personal health history. Diagnostic testing is strongly encouraged whenever an individual experiences COVID-like symptoms as it is possible to have COVID-19 and other health conditions at the same time. Early diagnosis can prevent further transmission. Individuals who have undergone testing should remain home away from others while waiting for COVID-19 test results.

4. If a student is sent home sick with suspected COVID-19 symptoms (e.g., runny nose, fever, diarrhea, etc.), must all their siblings/household members be sent home as well and quarantined for 14 calendar days? (Updated 8/12/2020)

Yes, if one of the household members is being evaluated for COVID-19, the rest of the household must be quarantined until an alternative diagnosis is made or negative result received. If the sick student becomes a confirmed case (i.e., tests positive for COVID-19) or a probable case (i.e., has COVID-like symptoms and is epidemiologically linked to known case), the local health department (LHD) conducting contact tracing will place household contacts, including siblings, in quarantine for 14 calendar days. The health department also will provide guidance on how to safely quarantine and isolate within the household.

5. If there is a confirmed or probable case of COVID-19 within the school, what are the recommendations for school closures? (Updated 8/12/2020)

Decisions for temporary closure of a school will be made by school leaders in consultation with the LHD during its investigation of a case or cluster of cases. If the LHD determines that there is a risk to the school community, the school may be closed temporarily for cleaning and disinfection. This initial short-term dismissal allows time for the local health officials to gain a better understanding of the COVID-19 situation impacting the school. This also allows the local health officials to help the school determine appropriate next steps, including whether an extended dismissal duration is needed to stop or slow further spread of COVID-19.

6. Are there alternative strategies to school closure that may be considered? (Updated 8/12/2020)

Alternative strategies, less drastic than closure, might include:

- Quarantining the affected classroom where social distancing is challenging (e.g. early childhood).
- Suspending affected classes or closing playgrounds.
- Canceling non-essential activities and meetings.
- Keeping students in constant class groups or classrooms and moving teachers routinely between classes.
- Increasing spacing between students in classes.
- Shortening the school week.
- Staggering school start and lunch/break times across year groups or classes.

SELF-QUARANTINE

1. When must an individual self-quarantine? (Updated 6/25/2020)

Individuals and their siblings who have tested positive for COVID-19 or who are suspected of having COVID-19 infection should seek medical attention, self-isolate, and follow CDC guidelines for discontinuation of isolation. Individuals who have had close contact with an individual who has

tested positive for COVID-19 or is suspected of having COVID-19 infection should isolate at home and monitor for symptoms for 14 days. Individuals who did not have close contact can return to school immediately after disinfection.

2. What is the procedure if a student were to show symptoms mid-day? (Updated 6/25/2020)

The school will provide a supervised quarantine space for students/staff who are experiencing COVID-19-like symptoms and may be awaiting evaluation and/or pickup. Students will never be left alone and must be supervised at all times while maintaining necessary precautions within the quarantine space. Judgment of the administrator/designee must determine who is placed in the quarantine space and the level of supervision required for persons within the quarantine space.

3. If a student or staff member presents a note or negative COVID -19 test result, for how many days is that test result valid? (Updated 8/12/2020)

A negative polymerase chain reaction (PCR) test is valid only for the day on which it was reported. It denotes that on the day that the sample was collected, the individual being tested did not have any detectable virus in their system. Because the incubation period (time from exposure to infection) for COVID-19 is 2-14 calendar days, a person with a negative test may still develop infection at some point during the incubation period.

COMMUNICATION AND REPORTING

1. Are schools required to report information to the local health department including cases, type, and onset of symptoms, number of exposed persons, ect.? (Updated 8/12/2020)

Yes – schools must cooperate with the Local Health Department to provide relevant information needed for mitigating the spread of COVID-19 infection and must be reported to the LHD for use in surveillance and contacting tracing public health activities. Schools must be aware of records and confidentiality laws pertaining to school student records, including exceptions to release of information in the event of an emergency, and requirements to notify parents and create a record of emergency releases of information. (105 ILCS 10/6(a)(7); 23 Il. Admin. Code 375.60).

2. Does contact tracing violate the Health Insurance Portability and Accountability Act (HIPAA)? (Updated 8/12/2020)

No. The HIPAA Privacy Rule allows for reporting by covered entities to public health for the purpose of preventing the spread of infectious diseases. HIPAA recognizes the legitimate need for public health authorities, and others responsible for ensuring public health and safety, to have access to protected health information to carry out their public health mission.

3. Will I be informed if another student in my child's class becomes infected with COVID? (Updated 8/12/2020)

Families will be informed via email, similar to the lice alert email, that a student in their child's class has tested positive for or has a family member who is COVID positive. Student names will not be released for privacy reasons.

4. Are parents required to disclose if someone in their family or their students has contracted COVID? (Updated 8/12/2020)

Yes, for the safety of our community, the school must be informed immediately.

5. Can the school be notified of a confirmed or probable case as quickly as possible? (Updated 8/12/2020)

Schools should ask parents/guardians to notify the school as quickly as possible with any confirmed or probable COVID-19 cases. It is important that schools communicate this expectation to parents/guardians early and often. The local health department (LHD) will also receive a report of a confirmed or probable case from either a lab or provider. However, the report does not

necessarily include school information (unless the school was the test submitter). This means that the LHD must obtain this information by interviewing the case/parent/legal guardian. The LHD will notify the school as soon as they have acquired the school information. Schools should identify a point of contact for LHDs, including someone who can be reached after hours.

6. If we have a case of COVID-19 in a student at our school, what is our responsibility for notifying schools attended by siblings of the case? (8/2/2020)

There is no need to notify a school attended by siblings of a sick individual. If the sick individual tests positive for COVID-19 or becomes a probable case, the LHD conducting contact tracing will place siblings in quarantine for 14 calendar days and facilitate parental notification to the school(s) attended by siblings of the case.

CONTACT TO CASES

1. What is contact tracing? (Updated 8/12/2020)

Contact tracing is used by health departments to prevent the spread of infectious diseases. In general, contact tracing involves identifying people who have a confirmed or probable case of COVID-19 (cases) and people who they came in contact with (close contacts) and working with them to interrupt disease spread. This includes asking people with COVID-19 to isolate and their contacts to quarantine at home voluntarily.

2. Who is a close contact? (Updated 8/12/2020)

A close contact is anyone (with or without a face covering) who was within 6 feet of a confirmed case of COVID-19 (with or without a face covering), for at least 15 minutes throughout the course of a day. The period of close contact begins 2 calendar days before the onset of symptoms (for a symptomatic person) or 2 calendar days before the positive sample was obtained (for an asymptomatic person). If the case was symptomatic (e.g., coughing, sneezing), persons with briefer periods of exposure may also be considered contacts. Close contacts to a confirmed case of COVID-19 are required to remain in quarantine at home for 14 calendar days starting from the last day of contact with the confirmed case.

3. Who will do contact tracing? (Updated 8/12/2020)

Contact tracing will be performed by the Local Health Department (LHD), sometimes in partnership with Department of Public Health (DPH) or a community-based organization. However, schools can assist the LHD by identifying all close contacts with a confirmed case. Documentation of assigned seats and taking photos of assembled classes can be useful in helping schools determine who was within 6-feet of a given case.

Schools must be aware of records and confidentiality laws pertaining to school student records, including exceptions for release of information in the event of an emergency and requirements to notify parents and create a record of emergency releases of information. (105 ILCS 10/6(a)(7); 23 Il. Admin. Code 375.60)

4. Is contact tracing only performed with a positive test is received? (Updated 8/12/2020)

Contact tracing is performed for a confirmed case (laboratory confirmed positive) or a probable case (person with clinically compatible COVID-like symptoms and epidemiologically linked (known exposure) to a confirmed case or testing positive by an antigen test).

5. If a confirmed or probable COVID case is identified in a classroom, who will be considered close contact that need to be quarantined for 14 calendar days? Will this include the entire classroom? (Updated 8/12/2020)

Exposure in a classroom should be limited to everyone with whom the confirmed or probable COVID case had close contact, within 6 feet, for at least 15 minutes throughout the course of a day.

6. If the close contact and the COVID case were both wearing their cloth face coverings when the exposure occurred, is the close contact still required to be quarantined? (Updated 8/12/2020)

Yes. While there is strong evidence that face coverings significantly reduce the risk of infection, the likelihood for transmission cannot be ruled out.

7. Is a physician's note required to return to school after a 'close contact' to a case completes 14 calendar days in quarantine? (Updated 8/12/2020)

Persons who remain asymptomatic throughout 14 calendar days of quarantine do not need a physician's note to return to school. During the quarantine period, a contact tracer will be closely monitoring the contact to confirm they remain asymptomatic.

8. What is the definition of an outbreak in schools? (Updated 8/12/2020)

Two confirmed cases of COVID-19 infections occurring within 14 calendar days of each other in individuals in the same classroom would meet the case definition for an outbreak. This is because the cases would be epidemiologically linked (known exposure to) with respect to place (same classroom) and time (within 14 calendar days). This would prompt an investigation by the LHD that may result in recommendations for testing and quarantining all students/staff in the affected classroom.

TESTING

1. What is the average amount of time after receiving a COVID test that results will be received? (Updated 8/12/2020)

Turnaround time (TAT) for laboratory test results is dependent on laboratory capacity. Typically, the TAT for test results from the state lab is 2-3 calendar days. The TAT can increase when the demand for testing is high. Private reference labs may be able to offer a shorter TAT and should be considered as an option for testing.

2. If a student or staff member presents a note or negative COVID -19 test result, for how many days is that test result valid? (Updated 8/12/2020)

A negative polymerase chain reaction (PCR) test is valid only for the day on which it was reported. It denotes that on the day that the sample was collected, the individual being tested did not have any detectable virus in their system. Because the incubation period (time from exposure to infection) for COVID-19 is 2-14 calendar days, a person with a negative test may still develop infection at some point during the incubation period.

CLEANING

1. What kind of cleaning and disinfection should our school be doing routinely? (Updated 8/12/2020)

Schools should enhance their standard cleaning and disinfection practices. Increase the frequency of cleaning and disinfection with a focus on areas that are commonly touched, such as doorknobs, stairwells, light switches, faucets etc. Shared objects such as toys, games, art supplies, should be cleaned and disinfected between uses. Ensure cleaning and disinfection products are EPA-approved and used safely and in accordance with label directions.

2. How can difficult items to clean be disinfected, such as books, puzzles, or games?

Items that may be hard to clean, such as books in bookcases, should be covered to prevent the students from touching them. The teacher should select items such as books, center items, learning games, toys, ect. to be placed in bins for only one student to use. Then those items can be quarantined or set aside for a week to have time to self-disinfect before another student can use them.

3. What are the cleaning requirements for areas used by a suspected or confirmed COVID-19 case? (Updated 8/12/2020)

Areas used by an individual with COVID-like symptoms, should be closed off for as long as practical before beginning cleaning and disinfection to minimize potential for exposure to respiratory droplets. Outside doors and windows should be opened to increase air circulation in the area. If possible, wait up to 24 hours before beginning cleaning and disinfection. Staff should clean and disinfect all areas (e.g., offices, bathrooms, and common areas) used by the ill persons with COVID-like symptoms, focusing especially on frequently touched surfaces. For disinfection, most common EPA-registered household disinfectants should be effective. A list of products that are EPA-approved for use against the virus that causes COVID-19 is available at IDPH.

4. What kind of PPE is required for staff who clean areas used by a suspected or known COVID case? (Updated 8/12/2020)

Personnel responsible for cleaning areas used by an individual known or suspected to have COVID-19 should use appropriate personal protective equipment (PPE) including:

- Fit-tested N95 respirator
- Eye protection with face shield or goggles
- Gown
- Gloves

5. What procedure should be followed when the student gets home from school? (Updated 8/12/2020)

When they get home, students should wash their hands. Teach students to remove cloth masks by the ear loops or strings once at home or in their cars. Fold the outside corners together, wash the masks nightly, and wash hands immediately after removing them.

CONNECTED AT-HOME LEARNING

1. Can parents opt-in to full remote instruction for students? (Updated 7/9/2020)

The school is offering 3 learning options. In-person learning, remote/online learning, and blended remote learning plan for remote learning options to occur simultaneously with in-person instruction. Students receiving remote instruction count for attendance.

2. Is the whole school required to transition to remote instruction if an individual who was in the building tests positive for COVID-19? (Updated 6/25/2020)

No. Only those individuals with close contact with someone who tested positive or who is suspected of having COVID-19 are required to self-quarantine for 14 days. The school should provide remote instruction to students who are self-quarantining, if they are well enough to engage in learning. Teachers and staff who are self-quarantining may continue to work remotely if they are well enough to do so.

3. How will my child feel connected to the classroom if he or she is learning at home?

The Illinois Conference has purchased a swivl device for each classroom. This device will have a marker connected to it that the swivl will follow as the teacher moves about the classroom. The marker has a microphone on it so that the students at home who are zooming in to the instruction can hear the teacher clearly. There will also be two extra markers placed around the classroom so that the student learning at-home can see and hear what is happening in the classroom and learn at the same time as their classmates. The zoom sessions will be recorded in case a student cannot attend the in-class session.

FINANCES

1. Will there be a tuition variation depending on which option is chosen?

Regardless of whether students are in-class or at-home connected learning, the school will incur additional costs for each option such as additional cleaning for in-person classes, PPE equipment for staff and students, and new technology and programs for students who choose to be off-campus. These are only a few of the additional costs above and beyond a typical year. Beyond the additional costs for at-home connected learning, the school still has the same fixed costs at the school—educators, building, cleaning, supplies, internet, utilities, technology, etc. For these reasons, there will not be an increase or decrease in tuition for any style of learning.

2. If the school has to shut down at any time during the school year, do I have to continue making tuition payments or will they be modified?

The school is dedicated to making sure every student is receiving a great education with a caring, spiritual influence. Our teachers are working hard to make sure kids are not just on zoom for at-home connected learning. With the addition of the technology called Swivl, students at home will be able to receive an education that mirrors being in the classroom. We strive to provide the same level of education online as we do in the classroom, and with the additional programs we are adding, we will be able to accomplish this.

LIABILITY

1. What if a school didn't follow the regulations outlined by the CDC, Illinois Department of Health, and/or the State of Illinois Department of Education?

Adventist Risk Management states that liability becomes an issue when the school does not follow the guidelines or mandates set out by the above referred to entities. It is recommended for schools to plan in advance for prevention and safety, watch what public schools in the area are doing, follow guidelines and mandates from the Centers for Disease Control, State of Illinois Health Department, and Adventist Risk Management.

According to the governor's Executive Order 2020-40, in order to reopen all public and nonpublic schools in Illinois serving prekindergarten through 12th grade students - the guidelines must be followed.

PHYSICAL EDUCATION

1. Will my child have to wear a mask while participating in PE class? (Updated 8/12/2020)

If indoors, students will be required to wear a mask at all times. Please consider getting a mask that enables easier breathing when participating in P.E. activities indoors. If outdoors, a mask is not required; however, a 6-foot distance must be maintained at all times.

2. How will PE look different this year? (Updated 8/12/2020)

P.E. classes will take place both indoors and outdoors where students will all be required to maintain a 6-foot distance at all times. Markers will be used to mark appropriate distances between students.

3. How will students stay safe when sharing equipment? (Updated 8/12/2020)

Some P.E. activities may require the use of equipment. If so, this will be communicated to students ahead of time. If possible, students will need to bring their own equipment from home. All equipment used must and will be disinfected towards the end of each class period.

MUSIC

1. Playing of some music instruments and singing are recognized as ways COVID can be spread more easily by respiratory droplets. How can we prevent transmission in band or music classes? (Updated 8/12/2020)

Whenever possible, hold music classes outside. When possible, music classes held indoors should occur in well-ventilated spaces and if possible, with windows open. Ensure students (and teachers) are physically distanced from each other by at least 6 feet and consider increasing the amount of social distancing more than 6 feet if space allows. Have students in one line or stagger spacing to ensure maximum distancing. Students should not face each other. Instruments where air is blown into or through should be turned so that expelled air does not go towards others. Consider using instrument covers to prevent spread.

To read the "Illinois Conference Schools' Reopening Safety Guidelines" visit the Illinois Conference Education webpage at: <https://www.ilcsda.org/departments/education>