



## Ready Schools, Safe Learners: Community COVID-19 Metrics

Returning to in-person instruction is one of Oregon's highest priorities, and so is providing safety for our students and school staff, as well as the families they return to each day. Schools not only provide the education that Oregon's children need to succeed, but schools also provide social/emotional growth and support, nutritious meals, and access to medical care. Whether this schooling is provided in person, will depend on many factors. The most important factor is the spread of COVID-19 in our local communities. Schools cannot operate on-site until it is safe, and we cannot create an arbitrary timeline. As Dr. Anthony Fauci has said, "the virus will make the timeline."

COVID-19 has highlighted long-standing inequities in Oregon. People of color have been disproportionately impacted by the illness. Closing schools and moving to distance learning in the spring impacted some families more than others. For example, some students could not fully participate because they didn't have internet. Some parents and caregivers struggled to find childcare while they had to continue working outside the home. Distance learning is more difficult for younger students and for some students experiencing disability. Equity must be the foundation for decisions. As Oregon moves beyond an emergency response to a planned response for school this fall, schools have an increased opportunity and responsibility to prioritize and target investments for students historically underserved by the system, and those most impacted by the closures this spring:

- schools can now plan ahead for Comprehensive Distance Learning and directly focus on closing persistent gaps and inequities while maintaining high expectations for students and staff;
- students will have access to standards-based, grade-level educational materials; and
- students will have daily interaction with one or more teachers who will guide their full educational experience.

Comprehensive Distance Learning will meet all federal and state laws, as well as provide additional supports for mental, social, and emotional health, as well as family engagement.

### Increased Risk

Any in-person model risks spreading COVID-19. Re-opening salons, in-person dining and large gatherings all added to the risk of new cases. Modeling shows that closing schools could prevent 2-4% of deaths from COVID-19<sup>1</sup>, less than other social distancing measures. However, a July 13, 2020 [study](#)<sup>2</sup> by the Institute for Disease Modeling,

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<sup>1</sup> Lancet Child Adolescent Health. 2020 May;4(5):397-404.

<sup>2</sup>[https://covid.idmod.org/data/Schools\\_are\\_not\\_islands\\_we\\_must\\_mitigate\\_community\\_transmission\\_to\\_reopen\\_schools.pdf](https://covid.idmod.org/data/Schools_are_not_islands_we_must_mitigate_community_transmission_to_reopen_schools.pdf)



Bellevue, Washington demonstrated that, **unless community spread is reduced, reopening schools to in-person instruction, even with protective measures like physical distancing and face coverings, will cause significant growth of the epidemic.** A June 2020 [study](#)<sup>3</sup> by REL Mid-Atlantic noted that opening schools to in-person instruction, “...*is likely to result in increased infection among children, teachers and support staff, although several of the mitigation strategies can substantially reduce the number of infections.*” The study also noted that certain critical factors must be included in the decision to return to in-person instruction, including, “...*the rate of infections in the local community, the size of the school, and the age of students (and corresponding ability to learn at home).*”

New data suggest that children under 10 years old get the virus at lower rates, get less sick when they get COVID-19 and seem to spread the virus less than older children or adults. However, for any in-person instruction plans, we must consider the safety of staff because they are at a much higher risk of both infection and potentially severe disease due to age and other risk factors, [according to the CDC](#)<sup>4</sup>.

### How to Re-Open Successfully

Many countries have re-opened schools. They did so cautiously, and only when rates of new cases were low, and when testing with quick turnaround was widely available to support isolating people with COVID-19 and self-quarantining close contacts.

The American Academy of Pediatrics has endorsed school re-opening, but only with low rates of infection and adequate safeguards. Adequate physical distancing, face coverings and infection control safeguards will support the safe return of students and staff to in-person education.

In addition to the specific metrics on recent rates of COVID-19, restarting in-person education should also consider community factors such as availability of testing, health care system capacity and readiness of the public health system to partner in response to cases of COVID-19 associated with schools.

We all have a part to play. Opening schools to in-person instruction is not a one-way journey. If cases increase in local communities, schools may need to move back to Comprehensive Distance Learning to mitigate further spread. Widespread community commitment to physical distancing, face coverings, handwashing, and reducing group sizes will help open our schools to in-person instruction and keep them open.

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<sup>3</sup> <https://ies.ed.gov/ncee/edlabs/regions/midatlantic/pdf/ReopeningPASchools.pdf>

<sup>4</sup> <https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/older-adults.html>



**Approximate COVID-19 Case Rates in Other Countries When They Re-Opened Schools**

<b>Country</b>	<b>Date</b>	<b>New cases per 100,000 per DAY</b>	<b>New cases per 100,000 per 7 days</b>
Denmark	4/15/20	2.6	18.2
Germany	4/29/20	1.3	9.1
Netherlands	5/11/20	1.5	10.5
France	5/11/20	0.9	6.3
New Zealand	5/15/20	<0.1	<0.7
Australia	5/11/20	<0.1	<0.7
Oregon*	5/25/20	0.8	5.6
Oregon*	7/20/20	6.9	48.3

\*Oregon data is included for comparison.

**How Oregon Compares**

These COVID-19 case rate thresholds are lower than Oregon’s current statewide rates, but they are not unattainable. In March and April, Oregon’s new case rates were high, but by May, the case rate fell to less than 1 new case per 100,000 people per day statewide (less than 6 cases per 100,000 people over a 7 day period), which was lower than many countries that safely and successfully reopened schools.

**Moving Forward**

Given that the current rate of new cases across Oregon is much higher than countries that have successfully reopened schools to in-person instruction, case rates will need to be lower to reduce the potential for spread of COVID-19 into school communities.

**To successfully reopen schools in Oregon, there are three levels of metrics:**

1. The first set of metrics represents the level of disease circulation that would be required for return to in-person instruction, with limited exceptions. Schools would need to begin transition planning as case rates and test positivity declines in counties in order to prepare the school community for the potential upcoming change.
2. The second set of metrics refers to indicators of increased COVID-19 spread in the community that would indicate the need to plan for transition back to comprehensive distance learning.
3. The third set of metrics indicate disease spread in the community that would prompt initiation of Comprehensive Distance Learning with limited exceptions.

As additional information about transmission and effective treatments of COVID-19 comes available, these metrics may be altered. These metrics will be reexamined, and reaffirmed or updated, on the same schedule as the Ready Schools, Safe Learners guidance.



## Returning to In-Person Instruction Through the On-Site or Hybrid Model

As additional information about transmission and effective treatments of COVID-19 are learned, these metrics may be altered. These metrics will also be reexamined, and reaffirmed or updated on the same schedule as the Ready Schools, Safe Learners guidance.

For a school to return to in-person instruction through the Oregon Department of Education's (ODE) On-Site or Hybrid instructional models, the metrics below, which consider local as well as statewide conditions, must be met:

### Metrics

- For a school district that draws substantial numbers of students or staff from multiple counties, the case rate and test positivity rate should be considered in each of those counties.
- Schools must be in a county that is no longer in baseline phase to consider in-person instructional models.

*County Metrics - metrics to be met three weeks in a row:*

- » Case rate:  $\leq 10$  cases per 100,000 population in the preceding 7 days\*
- » Test positivity:  $\leq 5\%$  in the preceding 7 days

- and -

*State Metric - metric to be met three weeks in a row*

- » Test positivity:  $\leq 5\%$  in the preceding 7 days

### Exceptions

The following exceptions should be prioritized, provided that:

- COVID-19 is not actively spreading among the school community;
- The case rate in the county is  $< 30$  cases per 100,000 population in the preceding 7 days for the past three weeks;
- The test positivity in the county is  $\leq 5\%$  in the preceding 7 days for the past three weeks; and
- Schools fully comply with sections 1-3 of the Ready Schools, Safe Learners guidance.
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*Exceptions:*

1. Providing in-person education for students in kindergarten through third grade. It is expected that schools will offer in-class options for students in grade K-3 to the extent possible. Younger students get the virus at lower rates, get less sick when they get COVID-19, and seem to spread the virus less than older children or



adults. Younger students also need access to in-person instruction to build literacy and numeracy skills critical to their continued learning.

2. Remote and rural school districts with  $\leq 100$  total students, and remote and rural private schools with  $\leq 100$  students
  - a. Remote is defined as a public or private school that is located more than 8 miles from any public school that serves any of the same grade levels. This is based on the definitions used in [ORS 327.077](#).
  - b. Rural is defined using the National Center for Education Statistics “Locale” codes. These are available through ODE.
3. As per ODE’s Comprehensive Distance Learning guidance, providing *limited* on-site instruction to meet the needs of specific groups of students based on needed educational, relational, curricular, instructional, and/or assessment supports. This includes, but is not limited to, provisions for supporting students experiencing disability, as well as programs such as career technical education (CTE) that may require hands-on demonstration of skills and the provision of secure assessment environments.

### Transition Planning

All schools must prepare transition plans for effectively and efficiently shifting between instructional models. These plans must include professional learning for staff, communication for students and families, and thoughtful timelines for staff and families to adequately prepare for shifts to new models.

### Planning for Comprehensive Distance Learning

For schools that have in-person instruction occurring, if one or more of the following metrics are met for more than one week in a row, *planning* for Comprehensive Distance Learning should occur, including training of all staff and communication with school communities.

#### *County Metrics:*

- » Case rate:  $\geq 20$  cases per 100,000 population in the preceding 7 days\*
- » Test positivity:  $\geq 7.5\%$  in the preceding 7 days

### Initiation of Comprehensive Distance Learning

For schools having in-person instruction, if one or more of the following metrics are met for more than one week in a row, Comprehensive Distance Learning should be initiated.

#### *County Metrics:*

- » Case rate:  $\geq 30$  cases per 100,000 population in the preceding 7 days\*
- » Test positivity:  $\geq 10\%$  in the preceding 7 days

\* This metric may exclude cases associated with corrections and detention facilities and other settings without direct association with community spread. Conversely, the

decision to open youth correctional and juvenile detention education programs to in-person instruction should be made based on the spread of COVID-19 within the specific correction or detention facility.

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