## Opening our Yeshivos- A Summary

December 8, 2020





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August 18, 2020

Dear Principal/Administrator,

The Governor's office and the State Education Department have produced hundreds of pages of guidance, requirements, and recommendations for nonpublic school reopening.

As schools finalize their plans for the school year, to streamline this information, below are key highlights of the NY requirements. Obviously, this brief document cannot fully describe the requirements (see <a href="here">here</a>, and <a href="here">here</a>, and <a href="here">here</a> for details).

## **Highlights of NY Requirements**

- **1.** Ensure staff, parents, and students are engaged, trained, and ready to implement the requirements and your school's plan.
- **2.** Post conspicuous signage in school of policies, and reminders of safe practices like staying home when sick, hand washing, social distancing, mask policy etc. Communicate this information to parents and faculty as well.
- **3.** NYS requires physical distancing: either 6 ft apart, or a physical barrier. Face masks are required if physical distancing is not possible, including on buses, with minimal exceptions.
- 4. Minimize touching one's face and sneezing or coughing unhygienically.
- **5.** Enhance frequency of sanitization of surfaces, especially high-touch surfaces. Log cleaning performed.
- **6.** Maintain hand washing stations with soap, water, and disposable paper towels, or hand sanitizer when washing is not feasible.
- 7. Sharing of food and beverages is prohibited.
- **8.** Faculty and staff must complete daily temperature checks and health questionnaires. Students must complete daily temperature checks, and "periodic" questionnaires (click here for contents of questionnaire).

- **9.** If one has COVID-19 symptoms, fever 100.0°F, or is exposed to COVID, he must be separated in a designated location, sent home immediately, and seen by a healthcare provider.
- **10.** If one tests positive for COVID-19, he must isolate at home for >10 days after symptoms resolve.
- **11.** Create a plan for informing parents and faculty of a positive case and working with the local health department to contact trace.
- **12.** Create a plan describing the circumstances and number of cases that will require the school to shift to remote learning and the conditions under which the school can reopen for in-person learning.

In addition, we all want our children to return to - and stay in - yeshiva to receive the chinuch they sorely need. While rates in NY are B"H currently low, we know that when yeshivos reopened in Eretz Yisroel, rates did spike. No school wants to appear in the news, be responsible for sick children or faculty, or be shut down. There is nothing we can do to eliminate risk, but we would rather take a few extra steps to significantly minimize risk of an outbreak, than too few. Thus, below are some practical, implementable suggestions from infectious disease doctors and a team of community pediatricians to significantly reduce risk.

## **Recommended Practical Steps**

- **1.** Does your school have a point person or team charged with preparing, making decisions, contact tracing, and following through with your school's COVID-19 safety plan? (strongly recommend/possibly required by law)
- **2.** Does your school have a trusted physician to guide it? Do it have a "doctor on call" when school is open? Recognize that some questions may have to be elevated beyond this doctor. (strongly recommend)
- **3.** Be on the lookout for children or faculty displaying COVID symptoms (i.e. fever, cough, breathing issues, loss of taste or smell, congestion, etc.). This will become difficult to distinguish between typical colds or flus (some are receiving flu shots this year for this reason even if they typically would not) as winter approaches. (strongly recommend)
- **4.** Traveling to areas with high COVID rates is not recommended. If done, students should quarantine at home for 14 days before returning school. (*strongly recommend*)
- **5.** Maintaining cohorts, where interaction of children is kept to a consistent, small group, can be critical. It will ensure that if there is a positive case, C"V, it is confined to the group. Meals, recesses, and school assemblies of mixed cohorts/classes defeat cohorting. Consider delivering meals to classrooms. Smaller cohorts further limit risk. (strongly recommend)
- **6.** It is better for children to stay in one classroom while faculty rotate (wearing a mask) than for entire cohorts to move classrooms. (*strongly recommend*)
- **7.** Parents and faculty should be informed in advance of the school year that according to the law symptomatic individuals must stay home. A child that was warm in the morning, was given Tylenol and now has no fever, is still "symptomatic." (*strongly recommend*)
- **8.** Use all available building space for classrooms so that maximum social distancing can occur. (as possible for facility)

- **9.** Increase ventilation. Hold classes and activities outdoors (e.g. tent) when practical. Otherwise, open windows, increase fresh air input on HVAC systems (avoid recirculating same air), and run HVAC fan longer to better filter. Some are upgrading filters, which is typically inexpensive. *(recommend)*
- **10.** Children like touchless hand sanitizer stations. Consider purchasing as they are inexpensive and more likely to be used than soap and water in a bathroom, especially if placed in classrooms or hallways. (*recommend*)
- **11.** Ensure that high risk children and (especially) high risk faculty take special precautions. (recommend)
- **12.** Consider staggering arrival and dismissal times to limit exposure. (recommend)
- **13.** Limit sharing of school supplies. If possible, disinfect between use. Consider removing equipment that is difficult to sanitize (e.g. plush toys). *(recommend)*

As always, please feel free to reach out to us at <a href="mailto:yeshivaservices@agudah.org">yeshivaservices@agudah.org</a>.

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