



## PUBLIC HEALTH REOPENING PROTOCOL PUBLIC AND PRIVATE SCHOOLS AND SCHOOL-BASED PROGRAMS TK-12

**Effective Date: 12:01 AM Monday, March 15, 2021**

Recent Updates: (Changes are highlighted in yellow)

3/15/21

- Effective March 15, 2021, Health Officer orders for the City of Pasadena allow for sector reopenings consistent with **Tier 2, Substantial (Red)** of the State of CA Public Health Order Blueprint for a Safer Economy.
- Allows reopening of grades 7-12 for all schools as long as schools comply with all state and local requirements.
- Expands discussion and provides clarity on creating stable groups of students.

***"Schools" include all public, private, and charter schools from grades Transitional Kindergarten TK through 12. This protocol does not apply to community colleges, universities, childcare facilities, or preschools.***

### **General Reopening Guidance for All Schools**

At this time when the City of Pasadena is in **Tier 2, Substantial (Red)**, all schools are permitted to reopen if approved by the CA Department of Public Health (CDPH) and the Pasadena Public Health Department (PPHD) for all students in any grades TK – 12. Note that CDPH (and PPHD) defines an open or reopened school as one that offers in person instruction at least one day each week to all students in at least one of the grades served by the school.

Schools open for in person learning must also continue to offer 100% distance learning as an option for those families that prefer it.

Schools that are eligible for reopening based on state and county criteria are not required to open, and they may not open until prepared to comply with all requirements in this protocol. Adherence to all applicable public health protocols minimizes risk of COVID-19 transmission for all members of the school community. However, schools should be aware that a prolonged delay in reopening may impact eligibility if community transmission rises and the Los Angeles County adjusted case rate exceeds the thresholds that permit school reopening. Any school that has reopened per the definition above may stay open even if the adjusted case rate rises and/or the City is reassigned back to a more restrictive tier. If a school has not reopened per the definition above, and the City is reassigned back to Tier 1, Widespread (Purple), schools that serve any grades 7 – 12 and have not yet reopened will not be permitted to open for those grades until the City again meets criteria for Tier 2, Substantial (Red). If the Los Angeles County adjusted case rate rises above 25 cases per 100,000 population, schools that have not yet

reopened will not be permitted to do so for any grade served until the adjusted case rate again falls below 25, at which time schools are permitted to reopen for grades TK – 6. The only exception to this rule is that schools have a minimum three-week window for reopening after the City reaches a reopening threshold. If the adjusted case rate were to quickly rise again above the permissible threshold within three weeks of reaching the threshold, schools still have the full three weeks to reopen before eligibility is withdrawn.

Schools that are still preparing for reopening or electing to remain closed at this time, may still initiate or continue the in-person on campus activities listed below. These activities may occur regardless of whether the school has reopened or remains closed, and regardless of the City's Tier placement or LA County's adjusted case rate:

#### **Day care for school-aged children and/or child care programs located in schools**

- Local Education Agencies (LEAs) and schools that offer day care services for children at schools must be in compliance with the protocol for Programs Providing Child Care – Public Health Reopening Protocol. Programs that wish to provide day care for school-aged children at schools should communicate with their Community Care Licensing [Regional Office](#) to inquire regarding the availability of waivers for licensed child care facilities and license-exempt providers due to COVID-19. For additional information see [PIN 20-22-CCP](#).
- As in the case of specialized services, use of outdoor space is strongly recommended for learning as well as for meals, recreation and other activities in the course of the day.

#### **Specialized services for defined subgroups of children who need in person services and supports**

- LEAs and schools are not required to provide specialized, in-person services, but those that do so may serve students with IEPs, students who are English Language learners, and students with needs that cannot be met through a virtual instruction platform. These students may be served as needed, provided that the overall number of students present on-site does not exceed 25% of total student body at any one time. Schools that have reopened for one or more of the grades served, but not for all grades served by the school, may also deliver these special services to a limited number of students in the grades not yet opened for full in-person instruction. In that situation, the school may bring up to 25% of student enrollment in the grades not currently open on to campus at any one time for specialized support and services for high need students in those grades, as long as the school can adhere to distancing, infection control, and cohorting requirements.
- Specialized services may include but are not limited to occupational therapy services, speech and language services, other medical services, behavioral services, educational support services as part of a targeted intervention strategy, or assessments, such as those related to English Learner status, Individualized Education Plans and other required assessments.
- No child may be part of more than one cohort. Students who are part of a cohort may leave the cohort for receipt of additional services. Any additional services, however,

must be provided one- on-one by the appropriate specialist in a secure space that is apart from all other people.

- Schools must agree to cooperate with the Pasadena Public Health Department with regard to reporting and documentation that will be required to permit careful monitoring of health outcomes associated with this initial period of expansion.
- To the extent consistent with specialized needs of students in a given cohort, use of outdoor space for at least 50% of the school day is strongly encouraged.
- LEAs and schools that choose to implement these on-site services for students with specialized needs while schools are otherwise closed to in-person instruction, must inform the Pasadena Public Health Department of their plans prior to start of services. A [Document Submission for K-12 Schools Offering Limited In-Person Services for Students with Special Needs](#) is available on the Pasadena Public Health Department website. If a school has already been approved for a waiver to reopen for students in grades TK – 2, the school still is required to file a notification to provide services to students with special needs if the school intends to bring students back to campus in addition to those in grades TK – 2.
- Further information from the State concerning specialized services may be found at [Specialized Support and Services](#).
- All of the TK-12 protocols must be implemented in order to conduct this specialized service

**Students may come on campus for supervised administration of college admission tests, including PSAT, ACT, and SAT exams.**

- College admission tests, including PSAT, ACT, and SAT exams, may be conducted at schools as long as students are appropriately cohorted for the entire duration of the assessment (no more than 14 students in each classroom with a distance of at least 6 feet between students and between students and teachers).
- All students and staff must wear face **masks** for the entire time on campus, and all infection control protocols must be in place.
- Arrival and dismissal times are staggered between cohorts, and no gathering is permitted at any time, including at arrival and dismissal times or during test breaks.
- All of the TK-12 protocols must be implemented in order to conduct this specialized service.

## **COHORTING**

For the three types of on-site programming described above (day care for school-aged children, specialized services for defined subgroups of children, and administration of college admission tests), students must be organized and proceed through the day within small cohorts, defined as stable groups of no more than 14 children or youth and no more than two supervising adults in a supervised environment in which supervising adults and children stay together for all activities (e.g., meals, recreation, etc.), and avoid contact with people outside of their group in the setting.

- Note that if a cohort has fewer than 14 children or if a child stops attending a previously full cohort other children who are not already assigned to a cohort can be added to the

group to reach the maximum of 14, provided all the children, once assigned remain with the same cohort at all times.

- If some children are assigned to a stable cohort but only attend part-time, they must be counted as full members against the maximum of 14. Part-time members cannot “share” their slot with other part-time students. Other children cannot be added in order to reach the maximum of 14 participants at all times.
- Aides assigned to individual children do not have to be counted as supervising adults. They must, however, be counted against the maximum of 16 individuals who can be included in a cohort.
- Supervising adults may be assigned to work with two different cohorts if the two cohorts are present at school on different days of the week or different sessions during the day, for example an AM and PM session. Assignment to more than two cohorts is not permitted.
- Deployment of substitute providers who are covering for short-term absences is allowed, but they must work with no more than 2 cohorts of children per day. Essentially, the substitute will adopt the assignment of the absent employee for whom they are covering and work exclusively with the same cohort(s) to which the permanent employee is assigned.
- “Floaters,” who cover for supervising adults during the day for employee breaks, may constitute a third supervising adult in the cohort, but may not provide coverage for more than two different cohorts during a day and should be spending limited time with any one cohort as needed to provide coverage for the permanently assigned supervising adults.

Important additional details for implementation of cohorts are available from the CA Department of Public Health [Guidance Related to Cohorts](#).

## LIMITED ON-CAMPUS DENSITY

While Local Education Agencies (LEAs) or schools may configure as many cohorts as are appropriate to meet student needs for specialized services, the total on-campus population may not exceed 25% of the total student body at any one time for this particular purpose. The 25% limit does not apply to school age children on campus receiving day care while engaged in distance learning activities, nor does it apply to students in grades that have reopened for full in person instruction. Schools that have reopened some of their grades and not others may bring additional students onto campus for specialized services in grades that remain closed but not up to 25% of total student enrollment. In that situation the school may bring additional students onto campus for specialized services and assessments up to a maximum of 25% of the student enrollment in the grades that are still closed, as long as the school can adhere to distancing, infection control, and cohorting requirements.

## SUPERVISING ADULTS

A supervising adult is an adult assigned to one cohort of children or youth, who does not physically interact with any other cohorts. Supervising adults may be child care staff, certificated or classified school staff, volunteers, participating parents or caregivers, or other designated supervising adult(s). An aide who is present to provide support to an individual child

should be counted as a member of the cohort but not as a supervising adult. A supervising adult may be assigned to 2 different stable cohorts if they offer specialized services/support that cannot be provided by any other supervising adult.

## **SUPERVISED ENVIRONMENTS**

A supervised care environment is an environment where multiple children or youth, from multiple families or households, are supervised simultaneously by an adult. This includes, but is not limited to, licensed child care facilities, licensed exempt child care programs, supervised programs on a school site while a school is not in session or is providing curriculum in a distance-learning format, or where some educational services are being offered to a subgroup of students defined by a local educational agency on a school.

### **Stable Learning Groups in Schools and Grades that Have Reopened**

For grades that have returned for full in person instruction, complying with the specific cohorting guidance above including the maximum number of 16 individuals total is not required. Nevertheless, applying the same principles to the creation of stable learning groups can provide a key mitigation layer in schools. A stable group is a group with fixed membership that stays together without mixing with any other groups for any activities. Implementing stable groups of students and staff reduces the numbers of exposed individuals if COVID-19 is introduced into the group; decreases opportunities for exposure to or transmission of the virus; facilitates more efficient contact tracing in the event of a positive case; and allows for targeted testing and quarantine of a small group instead of potential school-wide closures in the event of a positive case or cluster of cases.

Creating and maintaining stable groups is required for return to in-person instruction in elementary schools. The size of these stable groups in elementary schools is not limited to a specific maximum number but is dependent on utilization of the available classroom space to allow physical distancing of 6 feet between all students and staff.

Because middle and high school curricula differ from elementary school curricula, groups are likely to be larger in the upper grades compared to elementary where a single classroom of students usually remain together all day with the same teacher. Due to logistical challenges of creating stable groups in middle and high school, PPHD is not requiring stable grouping of students in that setting but does strongly recommend it as a best practice that middle and high schools should consider when planning for reopening.

For example, by using block scheduling that reduces the number of courses/periods students take during the school day, along with creating teams of teachers and support staff from different content areas that share the same group of students, the size of stable groups can be minimized. Under these parameters, groups consisting of 60 to 80 members that do not interact with members of other groups during the instructional day may be feasible and stable groups numbering no more than 100-120 members maximum are preferred. Again, this approach to structuring the school day is suggested as a best practice that adds another layered mitigation strategy to promote school safety; it is not required.

Other considerations that may assist in creating stable groups in middle and high schools:

Consider keeping students together in their respective classrooms throughout the day and have educators rotate between the classrooms that make up a stable group to eliminate the remixing of classroom membership and reduce exposure that might occur during period switches and hallway passing. Alternatively, classroom groups may move together in staggered passing schedules to other rooms they need to use (e.g. science labs).

Part of the school day could include virtual instruction to reduce the number of in-person groups that a teacher will be exposed to. This is recommended for providing electives, where only one or a few specialized elective teachers may be available to the entire student body. Offering electives virtually or staggering the taking of the electives throughout the term so that an elective teacher is not working with more than one or two groups at a time are lower risk approaches.

Schools will be asked to provide information on their approach to stable groups in completing this protocol.

Note: The best practice recommendation to have each student assigned to one stable group during the school day does not preclude students participating in other cohorts outside of school hours, such as before or after school programs or a team sport.

**Schools should be in compliance with the California State Health Officer Orders and guidance, Pasadena Health Officer Orders and guidance, California Department of Education, and additional applicable public health guidance.**

This document may be updated as new information and resources become available. Go to <https://www.cityofpasadena.net/covid-19/> for updates to this document.

### Steps to Reopen

- ✓ Complete and implement the Public Health Reopening Protocol Checklist and the Exposure Management Plan.
- ✓ Follow additional protocols relevant to operations:  
<https://www.cityofpasadena.net/covid-19/#guidance-faq-protocols>
  - Office Workspace – Public Health Reopening Protocol
  - Restaurants – Public Health Reopening Protocol
  - Fitness Facilities – Public Health Reopening Protocol
  - Places of Worship – Public Health Reopening Protocol
  - Public Pools – Public Health Reopening Protocol
  - Outdoor and Indoor Youth and Recreational Adult Sports – Public Health Reopening Protocol

- Programs Providing Child Care – Public Health Reopening Protocol
  - ✓ Provide a copy of the Public Health Reopening Protocol to each staff member and family and conduct education.
  - ✓ Post a copy of Public Health Reopening Protocol in conspicuous locations visible to staff, parents, students, and visitors and post to your website.
  - ✓ Ensure compliance with other oversight or regulatory agencies, such as the California Department of Education and the California Department of Public Health. Regularly review updated guidance from state agencies, including the [California Department of Public Health](#) and [California Department of Education](#).
  - ✓ Ensure your designated COVID-19 School Compliance Task Force and School Compliance Officer are trained and prepared to implement the [Exposure Management Plan](#).

### **Guiding Principles for Your School Community to Keep in Mind**

These protocols are provided for school administrators, faculty, staff, and parents to implement measures that may reduce the risk of disease transmission in the school setting, based on the current scientific evidence available for COVID-19 virus.

**Any setting that brings people together poses a risk for COVID-19 transmission, so schools must be prepared to implement mitigation strategies to protect school community members.** The more people a student or staff member interacts with, and the longer that interaction, the higher the risk of COVID-19 spread. The risk of COVID-19 spread increases in school settings across a risk continuum with helpful examples described by the [US Centers for Disease Control and Prevention \(CDC\)](#).

### **Key Practices**



COVER YOUR COUGH WITH YOUR  
ELBOW OR TISSUE (THEN DISPOSE  
AND WASH YOUR HANDS)



STAY HOME IF  
YOU ARE SICK



PRACTICE PHYSICAL  
DISTANCING OF 6 FEET  
OR MORE



WASH YOUR HANDS WITH  
SOAP AND WATER FOR 20  
SECONDS, FREQUENTLY



COVER NOSE AND  
MOUTH WITH CLEAN  
FACE COVERING



PERFORM DAILY  
HEALTH SCREENINGS

## Resources

- California Department of Public Health – [CA Safe Schools for All Hub](#)
- California Department of Public Health – [COVID-19 and Reopening In-Person Instruction Framework](#)
- Centers for Disease Control and Prevention (CDC) – [Schools Decision Tree to Reopening](#)
- Centers for Disease Control and Prevention (CDC) – [Guidance for Schools and Childcare](#)
- [Additional resources, including a printable COVID-19 Business Toolkit Signage](#)
- California Department of Education – [Stronger Together: A Guidebook for the Safe Reopening of California's Public Schools](#)
- California Department of Public Health – [Vendor list to purchase personal protective equipment](#)

## PUBLIC HEALTH REOPENING PROTOCOL CHECKLIST

### PUBLIC AND PRIVATE SCHOOLS AND SCHOOL-BASED PROGRAMS TK-12

#### REDUCING RISK OF COVID-19 TRANSMISSION

*Schools and school-based programs must implement all applicable measures listed below and be prepared to explain why any measure that is not implemented is inapplicable to the campus. Designate one individual to be in charge of planning and implementation of all items. Submission of Protocol to a City Department is not required unless explicitly requested.*

PERSON RESPONSIBLE FOR IMPLEMENTING PROTOCOLS	
School/Campus Name:	
St. Gregory A&M Hovsepian School	
Person in Charge:	
Mr. Shahe Mankerian	
Title:	
Principal	
Phone Number:	Date:
(626)578-1343	3/18/2021

I, Mr. Shahe Mankerian, (PRINT NAME and  
*TITLE of person attesting that all protocols have been implemented)*

**do attest that all public health protocols have been implemented at**

St. Gregory A&M Hovsepian School (name of school)

on this date, 3/18/2021.



(signature)

Estimated total number of administrators, teachers, and other employees that will be returning to support resumption of all permitted in person services for students: 28

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Estimated total number of students that will return per grade (if none, enter 0):

TK: 0 K: 19 1: 15 2: 20 3: 18 4: 21 5: 14

6: 15 7: 18 8: 19 9: 0 10: 0 11: 0 12: 0

Number of separate stable groups that will be present on campus on an average day: 9

Maximum number of members in stable groups present on campus on an average day: 21 from one group, 159 total

Please describe briefly your school's approach to creation of stable groups:

Each grade will stay with the same cohort all day. No cohort will mix. The classrooms have

enough space to have all the students properly distanced with plexiglass barriers.

Schedules will be staggered, and play areas will be separated to ensure that no two groups are

mixing.

*The terms "employees" and "staff" are used in these protocols to refer to individuals who work in a school facility in any capacity associated with teaching, coaching, student support, provision of therapies or personal assistance to individual students, facility cleaning or maintenance, administration, or any other activity required for the school to function. "Employees" or "staff" may include individuals who are: paid directly by the school system, paid by entities acting as contractors to the school, paid by outside entities acting in collaboration with the school to serve students, paid by third parties to provide individual student services, or unpaid volunteers acting under school direction to carry out essential functions. The term "parents" is used in these protocols to refer to any persons serving as caregivers or guardians to students.*

If you have questions, or if you observe a violation, you can request information or submit a complaint through the Citizen Service Center. Call 626-744-7311 or visit <https://www.cityofpasadena.net/CSC>.

## PROTECTION OF STUDENTS, VISITORS AND STAFF FROM COVID-19

- Connect staff and families to resources to access health insurance, a primary care doctor, and COVID-19 testing prior to reopening, such as calling 211 or 626-744-6068 for information on health insurance and primary care physicians, or visiting <https://www.cityofpasadena.net/public-health/>.
- Notify all employees that they are not to come to work if sick or if they are exposed to a person who has COVID-19. Employees who are fully vaccinated for COVID-19 (2 or more weeks after a 2-dose vaccine series OR 2 or more weeks after a single dose vaccine) do not need to quarantine after exposure to someone with COVID-19 if asymptomatic, and may come to work if asymptomatic. The local Health Officer Order requires everyone to self-isolate when sick with COVID-19. It also requires individuals to self-quarantine for 10 days from last contact with someone with COVID-19, unless fully vaccinated. Anyone who is a close contact with someone with COVID-19 must check for symptoms for 14 days regardless of vaccination status. The employee must isolate from others immediately if symptoms develop within 14 days of exposure. Quarantine must be maintained for 10 days, even if test results are negative (no virus detected).
- Institute a plan in the event that one or more employees is diagnosed (by a physician or lab test) with COVID-19. The plan should include immediate isolation of the employee at home and self-quarantine of everyone that came into contact (within 6 feet for a cumulative total of 15 minutes or more over a 24-hour period, regardless of whether a mask was worn) with the ill employee, except fully vaccinated individuals who are asymptomatic. The plan should also include options for all employees identified as contacts to be tested for COVID-19 with an FDA-approved PCR test (not a blood test) if they are not fully vaccinated. However, contacts must still maintain quarantine for 10 days, even with a negative test, if they are not fully vaccinated.
- Implement the **COVID-19 Exposure Management Plan** to limit the spread of COVID-19 among students and staff. The plan must designate a **COVID-19 School Compliance Task Force** responsible for establishing and enforcing all COVID-19 safety protocols and ensuring that staff and students receive education about COVID-19. Designate one member of the team as the School Compliance Officer, who acts as the liaison to the Pasadena Public Health Department in the event of an outbreak on campus. The plan identifies steps that will be taken immediately upon notification of school officials that any member of the school community (faculty, staff, student or visitor) tests positive for, or has symptoms consistent with COVID-19, including but not limited to:

- Sending staff home immediately if they arrive sick or become sick during the day, ensuring physical distancing, that they are wearing a face mask (provide with a surgical mask if possible), and privacy is maintained. Encourage sick staff to contact their medical provider. If the illness is work-related, the employer should facilitate appropriate care for the staff member, the worker's compensation process, leave time, and California Occupational Safety and Health Administration (OSHA) record keeping.
- For anyone who is waiting to be picked up from school due to symptoms of COVID-19, or coming into close contact with someone with COVID-19, place that person in an isolation room with monitoring, preferably in an area where others do not enter or pass. Provide divided spaces for those who are asymptomatic, separated from those who are symptomatic. Make sure that the person keeps a face mask on (provide with a surgical mask if possible). When a parent/guardian arrives to pick up a student, have the student walk outside, supervised, to meet them, if possible, instead of allowing the parent or guardian into the building since the parent may also have COVID-19.
- Providing fact sheets/information, in an appropriate language, on maintaining isolation and quarantine in accordance with Health Officer Orders and CDC guidance.
- Making an immediate report to the Pasadena Public Health Department any time a student or staff member with COVID-19 (confirmed by a lab test or physician diagnosis) was at the campus while sick or up to 2 days before showing symptoms **or receiving a positive test (if asymptomatic)**. The COVID-19 Compliance Officer must call (626) 744-6089 or email [nursing@cityofpasadena.net](mailto:nursing@cityofpasadena.net) and provide all information requested by the Health Department. The school is expected to provide or ensure testing for all staff that have had a possible exposure and must follow the US Centers for Disease Control and Prevention (CDC) [guidance](#) for cleaning and disinfecting the campus. Testing resources can be found by calling the individual's physician, and also at <https://www.cityofpasadena.net/covid-19/> and <https://covid19.lacounty.gov/>.
- Working with the Pasadena Public Health Department to investigate any COVID-19 illness. The COVID-19 School Compliance Task Force should designate trained staff to compile student and personnel records, campus floor plans, and staffing/student attendance logs to provide information as quickly as possible to the Health Department, including accurate contact information (phone, address, email) of all staff, students, and visitors and who had close contact (within 6 feet of the infectious person **for a cumulative 15 minutes or more in a 24 hour period**). The COVID-19 School Compliance Officer should submit the completed [COVID-19 Exposure Investigation Worksheet to PPHD](#).

- Schools must enroll staff in the free, state-provided contact tracing training course prior to reopening.
  - Implementing communication plans for exposure at school and potential school closures to include outreach to students, parents, teachers, staff and the community.
  - Providing guidance to parents, teachers and staff reminding them of the importance of community physical distancing measures while a school is closed, including discouraging students or staff from gathering elsewhere outside of school, **and following current state travel advisories that require quarantine after travel.**
  - Maintaining regular communications with the Pasadena Public Health Department.
- Develop and implement a flu vaccination program (vaccine education, promotion, and documentation of completed, current vaccination) with the goal of influenza immunization for all students and staff unless contraindicated by documented medical exemption for flu vaccine, prior to or at the beginning of the flu season (typically November 1 – April 30) to help:
- Protect the school community from influenza, and co-infection with influenza and COVID-19 viruses
  - Reduce demands on health care facilities
  - Decrease illnesses that cannot be readily distinguished from COVID-19 and would therefore trigger extensive measures from the school and public health authorities.
- Develop a plan for continuity of education. Current levels of community transmission mean schools should expect cases of COVID-19 in the school setting. Because each case will trigger mandatory 10-day home quarantine for every close contact even if face masks are worn, in-person classes will be disrupted. No test result will shorten the 10-day quarantine when staff or students cannot return to campus. The plan should delineate how nutrition and other services provided in the regular school setting will continue.

## Health Screening

- Conduct daily symptom checks for all persons entering the building or campus before or upon arrival (fever of 100°F or above, cough, shortness of breath or difficulty breathing, fatigue, sore throat, chills, headache, muscle or body aches, a new loss of taste or smell, congestion or runny nose, nausea, vomiting, or diarrhea). Consult the CDC website for the most current list of COVID-19 [symptoms](#). These checks can be done remotely or in person upon arrival. The screening must include asking if the person (adults and middle and high school-age students, and for younger students, ask the parent) has had contact

with a person known to be infected COVID-19 in the last 14 days, and whether the individual is currently under isolation or quarantine orders. Quarantine (send home) everyone who came into close contact (within 6 feet for a cumulative 15 minutes or more over a 24-hour period, regardless of whether a mask was worn) with someone with confirmed COVID-19 within the past 14 days. They must maintain quarantine at home for 10 days, regardless of any interim test results.

- These screenings can be done in-person upon arrival at the site or remotely before arrival using a digital app or other verifiable approach.
  - A temperature check with a no-touch thermometer at entry is recommended as part of the screening, especially for visitors who may not be part of a systematic at-home screening process.
- Notify the COVID-19 School Compliance Task Force of any positive screening result and initiate the COVID-19 Exposure Management Plan.
- Require any sick staff or student to stay home for at least 10 days or until 24 hours after fever and symptoms resolve (without use of fever-reducing medications), whichever is longer.
- A case is considered to be infectious from 2 days before their symptoms first appeared (or a positive test, if asymptomatic) until the time they are no longer required to be isolated (i.e., no fever for at least 24 hours, without the use of medicine that reduces fevers AND other symptoms have improved AND at least 10 days have passed since symptoms first appeared).
- Review and modify workplace leave policies to ensure that staff are not penalized when they stay home due to illness.
- Students who screen positive are given a surgical mask and accompanied to a pre-selected isolation space where they can remain while a determination is made on exclusion and arrangements are made for their return home, where indicated.

### Reduced Contact

- A cohorting approach has been adopted school-wide for elementary school grades, in which supervising adults and children stay together for all activities (e.g., meals, recreation, etc.), and avoid contact with people outside of their group in the setting, throughout the school day. The maximum size for stable groups will be the number that allows appropriate physical distancing within the available instructional space. The creation of stable groups in middle and high school grades is recommended as a best practice with groups not to exceed 120 students in total. However, stable groups in middle and high school is not a requirement but an additional layer of mitigation for schools to consider.
- Campus tours for prospective students are permitted if the tour is limited to one family or household unit only; the tour is held outside of regular school hours (evening or weekend) when enrolled students and staff are not present; and all social distancing

strategies are observed including proper physical distancing, face masks worn by all parties at all times, and other infection control measures as applicable.

- Require staff and students not to use handshakes and similar greetings that break physical distance.
- Offer any transactions or services that can be handled remotely online.
- Equip the front desk area with plexiglass or other impermeable barriers, if feasible, to minimize the interaction between reception staff and students. Implement virtual, touchless check-in tools, if possible, so that students do not have to utilize the reception space.
- Assign each staff member individually-assigned tools, equipment, and defined workspace, and minimize or eliminate shared, held items.
- Install hands-free devices wherever possible such as trash cans, soap and paper towel dispensers, door openers, and light switches.
- Remove all unpackaged food and beverages that may be offered to staff and students.
- Consider making water fountains available for filling water bottles only, and disinfect frequently.
- Prop doors and gates open where possible and applicable to reduce touching of handles, consistent with fire codes and accessibility standards.
  - Doors and gates that lead to a pool, or that exist as part of a pool enclosure, may not be propped open at any time.
- Remove amenities, including magazines, books, self-serve water stations (unless touchless), and other items for students and visitors from reception areas and elsewhere within the campus.
- Restrict non-essential visitors
  - Allow only visitors essential to school operation, including only essential volunteers, and require appointments and pre-registration with name, phone number, and email address. Essential visitors should arrive alone. If a visitor must be accompanied by another person (e.g., for translation assistance, or because the visitor is a minor) record the name, phone number, and email address.
  - All visitors must wear a face mask, and children must stay next to an adult.
  - Restrict visitors to designated areas such as the reception or lobby area, offices, conference or meeting rooms, and public restrooms to the extent feasible.
  - Discourage parents and other family members from entering the school. Avoid allowing family members into classrooms and other student areas.

## Scheduling

- Limit the number of employees who are on-site to the minimum number necessary, and institute alternate or staggered shift schedules to maximize physical distancing.
- Allow employees who can carry out their work duties from home to continue to work from home, especially those at higher risk (65 or older or with underlying medical conditions). Reconfigure work processes to the extent possible.

- Stagger employee breaks, in compliance with wage and hour regulations, to maintain physical distancing.
- Provide time for employees to implement enhanced cleaning practices during their shift. Procure options for third-party cleaning companies to assist with the increased cleaning demand, as needed.

### Face Masks\*

- All individuals, including staff and students of older than 2 years, are required as indicated below to wear face masks over both the nose and mouth while at school/on campus except when eating or drinking. Notify parents and staff prior to school opening and provide frequent reminders. Face masks are optional when alone in a room or private office, unless it is a space that serves the public in which case face masks are required regardless of whether the public is present (as specified in the [State Order](#)).
- Persons younger than two years old, anyone who has trouble breathing, anyone who is unconscious or incapacitated, and anyone who is otherwise unable to remove the face mask without assistance are exempt from wearing a face mask. Students with documented medical or behavioral contraindications to face masks are exempt. They should be seated at least 6 feet away from other students, when possible to do so without stigmatizing the student.  
Staff with a documented medical contraindication to a face mask may be allowed to wear a face shield with a cloth drape on the bottom tucked into the shirt.
- Students and staff should be frequently reminded not to touch the face mask and to wash their hands frequently.
- Parents of younger children are encouraged to provide a second face mask for school each day in case the one a child is wearing gets soiled. This would allow for a change of the face mask during the day.
- Speech and language therapists and staff working with hard-of-hearing students may also use a face shield with a cloth drape tucked into the shirt, if a face mask interferes with their ability to work with students. This may also be considered for teachers of younger students in order for young children to see their teacher's face and avoid potential barriers to phonological instruction. A clear face mask, or clear portable barrier such as a plexiglass barrier may also be used. Staff should wear a face mask at all other times.
- Face shields should not be used in place of face masks in other situations, as face shields have not been shown to keep the wearer from infecting others. Face shields do provide additional protection for the wearer.
- If possible, provide a face mask for all employees and students at no cost.
- Prohibit employees from eating or drinking anywhere inside the workplace other than designated break areas (staying at least 6 feet apart) to ensure face masks are worn consistently and correctly.

- All staff must wear face masks at all times, except when working alone in private offices with closed doors or when eating or drinking.
- Alternative protective strategies may be adopted to accommodate students who are on Individualized Education or 504 Plans and who cannot use or tolerate a face mask. Students who cannot wear a mask should not be placed with a cohort or group of students in the classroom, without alternative layers of risk mitigation measures in place. Other measures must include surveillance testing at a higher cadence at least weekly, smaller cohort size with no mixing with other groups, limited in-person hours, increased use of outdoor instruction, and optimized PPE for staff. Students may be able to tolerate a face shield with drape at the bottom which does not provide the same extent of source control or personal protection as use of a properly fitted, multi-layered face mask, so consider offering a student who cannot wear a mask can receive necessary services in a one-to-one setting with staff wearing appropriate PPE. They may also need to be accommodated via distance learning.

\* Individuals with chronic respiratory conditions, or other medical conditions that make use of a face mask hazardous are exempted from this requirement. Children under age 2 years should not wear a face mask. Refer to the [CDC guidance on masks](#) document for additional information on use and care of the face mask.

## Hand Hygiene

- Provide access to handwashing sinks stocked with soap, paper towels, and hands-free trash receptacles.
- Designate a staff person to check handwashing stations frequently and restock as needed.
- Allow staff and students time to wash their hands frequently. Schedule younger students for frequent mandatory handwashing breaks.
- Place portable handwashing stations near classrooms to minimize movement and congregations in bathrooms, to the extent practicable.
- Make ethyl alcohol-based (contains at least 60% ethanol) hand sanitizer available to students and staff at strategic locations throughout the school where there is no sink or portable handwashing station (in or near classrooms, rooms in which support services are provided, music and art rooms). Ethyl alcohol-based hand sanitizer is preferred and should be used in school environments. Hand sanitizers with isopropyl alcohol as the main active ingredient should not be used in the school, as it is more irritating and can be absorbed through the skin. WARNING: Never use hand sanitizers with methanol due to its high toxicity to both children and adults. Teach students and remind staff to use a tissue to wipe one's nose and to cough/sneeze inside a tissue or one's elbow.

- Students and staff should wash their hands upon arrival and at departure; before and after eating; after coughing or sneezing; after being outside; before and after any group activity; and before and after using the restroom, and as otherwise necessary.
- Students and staff should wash their hands for 20 seconds with soap, rubbing thoroughly after application, and use paper towels (or single use cloth towels) to dry hands thoroughly.
- Swallowing alcohol-based hand sanitizers can cause alcohol poisoning. Children under age 9 should use hand sanitizer only under adult supervision. Call Poison Control if consumed: 1-800-222-1222.

### **Gloves and Other Protective Equipment**

- Provide disposable gloves to staff handling items used by students/public, to workers using cleaners and disinfectants, for staff who handle commonly touched items, and for staff who provide temperature screenings.
- Provide other personal protective equipment (PPE), such as eye and face protection, as necessary.
- Provide employees engaged in activities which may not permit physical distancing (such as physical therapy or personal assistance to individual students) with appropriate PPE (gloves, masks, gowns, etc.), as appropriate.
- Provide staff taking care of a sick student with a medical grade mask to wear, and a medical grade mask for the student to wear (if tolerated) until the student leaves the campus.

### **Restrooms**

- Place a trash can near the door if the door cannot be opened without touching the handle, so restroom users may use a paper towel to cover the doorknob. Maintain compliance with accessibility standards and fire code.
- Increase frequency of cleaning and disinfection of restrooms.
- Ensure that restrooms stay operational and stocked at all times.

## **PHYSICAL DISTANCING**

### **In the Classroom**

- Limit in-person class size to as few students as possible and to adhere to physical distancing requirements.
- Divide the school day into shifts to permit fewer students per class, where applicable.
- Stagger attendance to reduce the overall number of students in classrooms on a given day.
- Offer online class attendance as an option for students for whom it is feasible and for students who may be at elevated risk in a regular classroom.

- Move some classes entirely online, as needed.
- Use alternative spaces to reduce the number of students within classrooms (library, cafeteria, auditorium, gymnasium, etc.). Consider ways to move instruction to outdoor spaces, weather permitting, with adequate sun protections for students and staff.
- Staff should stay at least 6 feet from other adults as much as possible.
  - Set up staff workspaces so that staff do not work within 6 feet of each other.
  - Consider virtual meetings using video conferencing apps for parent-teacher meetings and staff meetings, even if all staff are on campus.
- Staff should stay at least 6 feet away from students when feasible. Arrange staff desks at least 6 feet away from student desks, regardless of space limitations.
- Students should stay 6 feet apart from one another at all times.
  - Remove furniture like bookshelves, sofas, and play areas to allow maximal spacing between student desks.
  - Consider ways to establish separation of students through multiple means if practicable, such as, at least six feet between students seated at desks or elsewhere, partitions between desks, markings on classroom floors to promote distancing, or arranging desks in a way that minimizes face-to-face contact.

**N/A** Space students in nap or rest areas in classrooms at least 6 feet apart and alternating feet to head.

- Under no circumstances should distance between student seating be less than 4 feet.
- Modify teaching methods to avoid close contact between students in laboratories and other classes that may usually involve group activities.
- Consider redesigning activities for smaller groups and rearranging furniture and play spaces to maintain separation.
- Develop instructions for maximizing spacing and ways to minimize mixing in both indoor and outdoor spaces that are easy for students to understand and are developmentally appropriate.
- Implement procedures that minimize contact when turning in assignments.

## Outside the Classroom

- Limit communal activities. Stagger use of spaces, properly space occupants and disinfect in-between uses.
- Limit occupancy of bathrooms, elevators, locker rooms, staff rooms and similar shared spaces to allow at least 6-foot distancing. Post signs with occupancy limits.
- At places where students congregate or wait in line, mark spots on the floor or the walls at least 6 feet apart to indicate where to stand.
- Consider eliminating use of lockers in hallways and other shared spaces. If used, ensure at least 6 feet between students accessing lockers.
- Consider suspending uniform requirements for physical education so that students do not need to use the locker room to change.

## **Limit Sharing**

- Limit sharing of art supplies, manipulatives, and other high-touch materials as much as possible. If feasible, have a separate set of supplies for each student. Keep each student's supplies and belongings in separate, individually labeled boxes or cubbies.
- Avoid sharing electronic devices, sports equipment, clothing, books, games and learning aids when feasible.
- Limit use of shared playground equipment in favor of activities that have less contact with shared surfaces.
  - High-touch playground equipment may be taken out of use and replaced with no-touch playground games, etc.
- Clean and disinfect shared supplies and equipment between students.

## **SPECIFIC SITUATIONS**

### **Transportation**

#### **N/A School Buses**

- Consider screening students for COVID-19 symptoms and exposure before allowing them to board.
  - Drivers and passengers must wear face **masks** over their nose and mouth, unless a student has a documented medical or behavioral contraindication. Drivers should have a supply of face **masks** in case a student does not have one.
  - Have students sit at least 6 feet away from the driver.
  - Maximize space between students. Students from the same household may sit together.
  - Have students sit in the same seat each day when feasible.
  - Keep vehicle windows open when weather and safety permit.
  - Clean and disinfect buses daily. Drivers should be provided disinfectant wipes and disposable gloves to wipe down frequently touched surfaces.
  - A maximum of one child is permitted per bus seat.
  - Seat students in alternating rows, as practicable.
- Implement measures that make it easier for parents to drive students to school, such as availability of early opening with staff presence, expanded short-term parking at schools, and presence of staff at drop-off areas to assure safe movement of students from drop-off to school entry.

**N/A** Public transportation: Consider staggering school start time to allow students and staff who use public transportation to do so when buses and trains are less crowded. This will decrease exposure risk and help reduce barriers to getting to school.

- Carpools and shared rides: Advise staff and families to carpool with the same stable group of people. Open windows and maximize outdoor air circulation when feasible. Everyone in the vehicle should wear a face **mask**.

- Implement measures that facilitate safe, age-appropriate student travel to school including physically distanced walking groups, use of school crossing guards, bicycle safety and bike route programming.

## Arrival and Departure

- Stagger arrival and dismissal times, using different entrances/exits for each **stable group**.
- Mark spaces at least 6 feet apart for students waiting to enter the building and for adults waiting to pick up students. Post signs to remind family members to stay at least 6 feet away from people from other households when dropping off or picking up their student.
- Face **masks** are required for adults who are dropping off or picking up children in person. Provide face **masks** for family members who have forgotten theirs.
- Designate routes for entry and exit, using as many entrances as feasible. Put in place other protocols to limit direct contact with others as much as practicable.
- Use multiple entrances and exits to avoid overcrowding at arrival and dismissals as long as all entrances and exits have adequate monitoring of arriving and exiting students and employees.

## Meals and Snacks

- To the extent possible, have students eat meals in classrooms or outdoors, without any mingling of **stable groups** from different classrooms.  
**N/A** If students line up to pick up food, use tape or other markings to ensure at least 6 feet between any two students. Assign staff during meals to maintain physical distancing and keep students from different classrooms from mingling.  
**N/A** If meals take place in a cafeteria, stagger meal times to the extent feasible to reduce the number of students in the cafeteria at one time; ensure **stable groups** from different classrooms are not mingling.  
**N/A** If meals take place in a cafeteria, increase space between tables/chairs to maintain at least 6 feet of physical distancing between **stable groups**.
- Redesign food preparation and service operations, where possible, to achieve physical distancing between employees. For example, kitchen and other back of house floors should be marked to reinforce 6 feet physical distancing requirements.
- Ensure infection control in the school cafeteria or other site where food is served or picked up.
  - Eliminate buffet and family style meals.
  - Allow prepackaged meals, hot meals served by cafeteria staff and/or food brought by students from home.
  - Install physical barriers where needed to limit contact between cafeteria staff and students.

## **Staff Break Rooms/Teacher Work Rooms**

- Post the maximum occupancy for the staff rooms, based on 6 foot distancing. Mark places on the floor at least 6 feet apart for staff to sit or stand.
- Post signage reminding staff to stay at least 6 feet apart, keep their face **masks** on unless eating, wash their hands before and after eating, and disinfect their area after using it.
- Discourage staff from eating together, especially indoors. Consider creating a private outdoor area for staff to eat and take breaks, alone.
- Open windows and doors to maximize ventilation, when feasible, especially if staff are eating or if the room is near maximum occupancy.
- To ensure that masks are worn consistently and correctly, staff are discouraged from eating or drinking except during their breaks when they are able to safely remove their masks and physically distance from others. At all times when eating or drinking, staff must maintain at least a six-foot distance from others, including fellow employees and visitors. Eating or drinking outdoors is preferred but eating or drinking at a cubicle or workstation is preferred to eating in a breakroom if eating in a cubicle or workstation permits greater distance from and barriers between staff.
- Occupancy is reduced and space between employees is maximized in any room or area used by staff for meals and/or breaks. This can be achieved by:
  - Posting a maximum occupancy that is consistent with enabling a distance of at least six feet between individuals in rooms or areas used for breaks;
  - Staggering break or mealtimes to reduce occupancy in rooms or areas used for meals and breaks; and
  - Placing tables six feet apart and assuring six feet between seats, removing or taping seats to reduce occupancy, placing markings on floors to assure distancing, and arranging seating in a way that minimizes face-to-face contact. Use of partitions is encouraged to further prevent spread but should not be considered a substitute for reducing occupancy and maintaining physical distancing.

## **Group Singing/Chorus, Band, Sports and Field Trips**

- ☒** Both indoor and outdoor choir and band rehearsals are prohibited at this time. However, in-person choir and band activities may be conducted if they do not include aerosol-generating activities such as singing or playing of wind instruments. In-person class time can be used for non-aerosol generating activities, such as rhythm study, music theory, music history, composition, analysis, and more.
- ☒** Schools should consider using Zoom or other video conferencing platforms so that students may participate in aerosol-generating activities (such as singing and playing of wind instruments) at home.
- Other activities where there is increased likelihood for transmission from contaminated exhaled droplets are not permitted.

**N/A** Move extracurricular activities (teams, clubs) online rather than in-person, to the extent feasible.

- Sports and PE activities, including team practice, games, or competitions, should follow the [Outdoor and Indoor Youth and Recreational Adult Sports protocol](#).
- Indoor physical conditioning or fitness facility operations should follow [Fitness Facilities Reopening Protocols](#), but this does not include team practice, games, or competitions.
- For sports that cannot be conducted with sufficient distancing or **stable groups**, only outdoor physical conditioning and training is permitted and ONLY where physical distancing can be maintained. Conditioning and training should focus on individual skill-building (e.g., running drills and body weight resistance training) and should take place outside, only.
- Avoid equipment sharing, and if unavoidable, clean and disinfect shared equipment between uses by different people to reduce the risk of COVID-19 spread.
- Activities that require heavy exertion should be conducted outside in a physically distanced manner, at least eight (8) feet apart, without face **masks**. It is preferable for participants to wear a face **mask** and maintain physical distancing, and modify activities to an exertion level that is safe for participants. Players should take a break from exercise if any difficulty in breathing is noted, and should change their face **mask** if it becomes wet and sticks to the player's face and obstructs breathing. Respirators that restrict airflow under heavy exertion (such as N-95 respirators) are not advised for exercise.
- Youth sports programs and schools should provide information to parents or guardians regarding this and related guidance, along with the safety measures that will be in place in these settings with which parents or guardians must comply.

**N/A** Avert unsupervised clustering of students in locker rooms.

- Offer access to locker rooms only when staff supervision is possible.
  - Stagger locker room access.
- Field trips are currently prohibited.

### **Equitable Access to Critical Services**

**N/A** A plan for updating Individualized Education Plans (IEPs) and 504 Plans of students with special needs has been developed to ensure that education can continue without undue risk to the student.

- This plan includes a method for proactive school contact with parents at the beginning of the school year to assure that issues related to the child's education and safety are being addressed.
- Modifications to individual IEPs and 504 plans may involve remote learning, modifications to the classroom to accommodate student needs, school attendance in a separate area with few students, or a hybrid approach combining in-class and remote learning.

- Steps taken to modify IEPs and 504 plans to assure student safety comply with relevant provisions of state and federal law.
- Make an option for remote learning or other alternative to in-class learning available for any student for whom school attendance poses elevated risk.
- Offer an option for “Grab and Go” school meals to any student who is eligible for the school meal program but would face elevated risk attending school in person.
- Move administrative services or operations that can be offered remotely (e.g., class registration, form submission, etc.) online.
- Additional accommodations may be needed for students to safely attend class. For example, a student who cannot tolerate a face **mask** due to a medical or developmental condition may need a desk with clear barriers.
- Nurses and therapists who are not school employees but work with students in schools, such as occupational therapists and physical therapists, are considered essential staff and should be allowed on campus to provide services.
  - When students are temporarily unable to attend school due to COVID-19 infection or exposure, consider setting up telehealth video sessions for therapy.

### **Guidance about School Closure/Quarantining**

- Individual school closure, after reopening, is recommended based on the number of cases, the percentage of the teachers/students/staff that are positive for COVID-19, and following consultation with the Pasadena Public Health Department.
  - Individual school closure may be appropriate when there are multiple cases in multiple **stable groups** at a school or when at least 5 percent of the total number of teachers/students/staff are cases within a 10-day period, depending on the size and physical layout of the school.
- The Local Health Officer may also determine school closure is warranted for other reasons, including results from public health investigation or other local epidemiological data.
- If an in-person school closes due to COVID-19, the school may typically reopen after 10 days and the following have occurred:
  - Cleaning and disinfection
  - Public health investigation
  - Consultation with PPHD

### **Surveillance Testing**

- Ensure a plan or protocol for incorporating COVID-19 testing into regular school operations.
  - At a minimum the plan should describe the strategy for ensuring access to testing for students or employees who are symptomatic or have known or suspected exposure to an individual infected with SARS-CoV-2.

- School staff are essential workers, and staff includes teachers, paraprofessionals, cafeteria workers, janitors, bus drivers, health clinic staff, or any other school employee that may have contact with students or other staff.
- Schools should implement periodic testing for asymptomatic individuals with no known exposure. If local epidemiological data indicates concern for increasing community transmission, schools should increase testing of staff to detect potential cases as lab testing capacity allows.
- Reference the California Department of Public Health (CDPH) recommended frequency (some schools receiving state funding may be required by the state to conduct surveillance testing). Schools are advised to access information and resources regarding school-centered testing at the state's Safe [Schools for All hub](#).

## MEASURES FOR FACILITIES

### Sanitization and Cleaning

- Develop a sanitization plan that identifies the surfaces to be disinfected, the frequency, and the person assigned to the task.
- Perform thorough cleaning in indoor high traffic areas and shared workspaces, when students are not in school and allow time for spaces to air out before the start of the school day.
- Frequently disinfect commonly touched surfaces (including but not limited to tables, doorknobs, light switches, countertops, handles, desks, phones, keyboards, elevator buttons, touch screens, printer/copiers, grab bars, and handrails) at least daily and more frequently as resources allow using appropriate products.
- Clean and sanitize shared equipment between each use.
- Equip workplace terminals with proper sanitation products, including hand sanitizer and sanitizing wipes and ensure availability.
- Provide hand sanitizer for visitors at high traffic areas, such as entrances, reception, stairway entrances, elevator entry (if applicable), classrooms, breakrooms, and offices.
- Use products approved for use against COVID-19 on the Environmental Protection Agency (EPA)-approved list ([List N](#)) and follow product instructions and Cal/OSHA requirements for worker safety. Consider List N products that are safer for those with asthma (hydrogen peroxide, citric acid, or lactic acid). When EPA-approved disinfectants are not available, alternative disinfectants can be used (for example, 1/3 cup of bleach added to 1 gallon of water, or 70% alcohol solutions). Do not mix bleach or other cleaning and disinfection products together – this causes toxic fumes that may be very dangerous to breathe.
- Provide time for workers to implement cleaning practices during shifts and consider third-party cleaning companies.

- Ensure all cleaning products are kept out of children's reach and stored in a space with restricted access.
- Install hands-free devices if possible, such as trash cans, soap and paper towel dispensers, door openers, and light switches.
- For additional details, refer to CDC guidelines on "Cleaning and Disinfecting Your Facility" at <https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html>

## **Building Safety**

- Stagnant water in pipes increases the risk for growth and spread of legionella bacteria. When reopening a building, it is important to flush both hot and cold water lines through all pipes and points of use including faucets and showers. Appropriate PPE including an N95 respirator must be worn. Information regarding this process can be found at the [CDC website](#).
- Consider HVAC upgrades to improve air filtration (targeted filter rating of at least MERV 13) and increase fresh air ventilation.
- Keep HVAC systems in good, working order, and set them to maximize indoor/outdoor air exchange unless outdoor conditions (recent fire, very high outside temperature, high pollen count, etc.) make this inappropriate.
- Prior to school reopening, the HVAC system should be evaluated by an appropriate engineer familiar with the Guidance for Reopening Schools as developed by the American Society of Heating, Refrigerating, and Air-conditioning Engineers (ASHRAE).
- If fans such as pedestal fans or hard mounted fans are used in the building, take steps to minimize air from fans blowing from one person directly at another individual.
- Keep doors and windows open where possible and safe during the school day to maximize air flow, only if consistent with fire codes and accessibility standards.

## **Deliveries and Vendors**

- Review work flows and make changes if needed to permit physical distancing during pickups and deliveries.
- When other parties (truck drivers, delivery agents, vendors) play a role in the work flow, instruct them to wear face **masks** and to comply with symptom checks and physical distancing.