

COVID-19 Response Toolkit for New Mexico's Public Schools

F O R S C H O O L Y E A R 2 0 2 1 / 2 0 2 2

The release of this updated toolkit replaces and supersedes the previously released Toolkit

REPORTING

Notify New Mexico Public Education Department (NMPED) of confirmed cases of COVID-19 who were infectious while on campus.

» CALL 505-476-5825

» WEB [Rapid Response Submission](#)

For all staff member cases of COVID-19, also report to the New Mexico Environment Department (NMENV) within 4 hours of notification by [completing the webform](#).

PREVENTION

- Get vaccinated
- Maintain physical distance
- Wear a face mask
- Wash your hands often with soap and water
- Clean regularly

TRANSMISSION

The virus spreads from person-to-person primarily:

- Through respiratory droplets produced when an infected person coughs, sneezes, or talks.
- When droplets land in the mouths or noses, or are inhaled into the lungs, of people who are nearby.
- By symptomatic and asymptomatic individuals.

INCUBATION

Individuals generally become ill between 2 and 14 days after exposure.

Please note that while Bureau of Indian Education schools may use NMPED's Rapid Response protocols, this Toolkit does not apply to them.

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Updates to this Toolkit from the previously published version on August 5, 2021 include:

- Alignment to new CDC guidance on mask usage indoors for everyone
- Update to surveillance testing requirements
- Update in managing individuals with chronic symptoms
- Update on when to test after being a close contact (five days)
- Alignment to CDC guidance on high risk sports in counties with high transmission rates
- Requirement for a plan to implement enhanced COVID-safe practices when infection levels are high (Rapid Response)
- Reduction to the wait period required before cleaning

Guiding Principles

The guiding principles of the of the New Mexico Public Education Department (NMPED) are to

- Prioritize health and safety of students, educators, school staff and families
- Maximize amount of safe in-person learning
- Make decisions based on science and data



The purpose of the updated COVID-19 Response Toolkit is to provide a framework, when implemented, that will allow for students and staff to safely attend school in person for the 2021–2022 school year as the COVID-19 pandemic continues to disrupt the lives of New Mexicans. The NMPED recognizes the importance of in-person public-school learning for the academic, social and emotional growth of students as well as for the livelihood of families and the economic growth of the community.

Schools are encouraged to supplement the requirements of the Toolkit with any additional CSPs that, based on the conditions of the COVID-19 virus locally, are required to keep schools open and safe for staff and students.

Vaccination against COVID-19 remains the most important CSP for those eligible to receive the vaccine, and the DOH is providing vaccination events for interested schools.

Successful implementation of CSPs is contingent on students and community members understanding and supporting their implementation. In addition to family and community outreach in support of school safety, schools will train students on CSP implementation and will post CSP signage for students and visitors to better understand the requirements.

Definitions

Asymptomatic Confirmed Case: A person who has tested positive for COVID-19 by laboratory testing but did not experience any symptoms of illness within 10 days of the test.

Close Contact: Someone who over a 24-hour period, has a cumulative exposure of fifteen minutes or longer within six feet of a confirmed COVID-19 case with or without a face covering.

- **Exception:** In the pre-K – 12 setting (including transportation), the close contact definition *excludes* students who were within 3 to 6 feet of an infected student (laboratory-confirmed or a [clinically compatible illness](#)) where
 - » both students were engaged in consistent and [correct](#) use of [well-fitting](#) face [masks](#); and
 - » other [K–12 school prevention strategies](#) (such as universal and correct mask use, physical distancing, increased ventilation) were in place in the K–12 school setting.
 This exception does not apply to teachers, staff, or other adults in the pre-K – 12 setting.

Confirmed Case: A person who has tested positive for COVID-19 by laboratory testing.

Confirmatory laboratory tests include Polymerase Chain Reaction (PCR) or antigen tests from respiratory or oral specimens.

Cohorting: The practice of keeping groups of students, and staff together over the course of the school day with the goal of limiting exposures to only those within the same cohort. This practice may help reduce the spread of COVID-19 by:

- Limiting exposure to an individual with COVID-19 to one particular cohort and not posing a broad risk to the rest of the school.
- Facilitating more efficient contact tracing in the event of a positive case.
- Allowing for targeted quarantine, testing, and/or isolation of a single cohort, instead of school-wide measures in the event of a positive case or cluster.

Contact Tracing Process: Contact tracing is the process of reaching out to individuals who have been exposed to a confirmed case of the virus in order to ensure they take the necessary precautions and receive any needed testing.

COVID Symptoms: Fever, chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of smell or taste, sore throat, congestion or runny nose, nausea or vomiting, and diarrhea. [See additional information from the Centers for Disease Control \(CDC\).](#)

Infectious Period: Time during which an infected person is contagious and most likely to spread disease to others. If students, staff, contractors or volunteers were at school during their infectious period, all of their close contacts must be identified and quarantined.

- For a confirmed symptomatic COVID-19 case, the infectious period starts two days prior to the illness onset date and continues 10 days after illness onset AND until patient is fever-free for 24 hours without the use of fever-reducing medications AND symptoms have improved.
- For a confirmed symptomatic COVID-19 case with severe illness or severe immunosuppression, the infectious period starts two days prior to illness onset date and extends to 20 days after illness onset date AND until patient is fever-free for 24 hours without the use of fever-reducing medications AND symptoms have improved.

- For a confirmed asymptomatic COVID-19 case, the infectious period starts two days prior to the specimen collection date and continues for 10 days after.
- If a confirmed asymptomatic COVID-19 case has severe immunosuppression, the infectious period starts two days prior to the specimen collection date and continues 20 days after.

Isolation: The act of keeping someone who is sick or who tested positive for COVID-19 away from others by staying home from school, work, and other activities while infectious.

- Isolation should last at least 10 days after the onset of symptoms, and until fever-free for 24 hours without the use of fever-reducing medications, and experiencing improvement of symptoms.
- For people who never had symptoms, the isolation period is 10 days after the date their first positive test was collected.
- If someone has a severe illness or severe immunosuppression, the isolation period should be extended to 20 days.
- A negative test is not required to determine when to end the isolation period. Nor does a negative test end the isolation period. When in doubt, the New Mexico Department of Health should be consulted.

Quarantine: Keeping individuals who were in close contact with someone who has COVID-19 away from others. Close contacts with a confirmed case of COVID-19, should stay home from school, work, and other activities for 10 days following their last exposure. Exposed contacts should be tested for the novel coronavirus (SARS-CoV-2) at 5 days following the last exposure to a confirmed case. If the close contact has a positive result, isolation should be implemented as described above.

For the first 90 days after a positive PCR or school-based BinaxNOW test, individuals who have had COVID-19 infections and who have completed their self-isolation periods, do not need to quarantine if they are a close contact of a COVID-19 infectious person. It is recommended that the individual get tested for COVID-19 five days after exposure if asymptomatic, and should isolate and test immediately if symptoms develop.

Individuals who are fully vaccinated against COVID-19 and who have had close contact with a COVID-19 infectious individual are not required to quarantine if they meet the following criteria:

- Are fully vaccinated (i.e., ≥ 2 weeks following receipt of the second dose in a 2-dose series, or ≥ 2 weeks following receipt of one dose of a single-dose vaccine)
 - Have remained asymptomatic since the current COVID-19 exposure
- It is recommended that the individual get tested for COVID-19 five days after exposure if asymptomatic, and should isolate and test immediately if symptoms develop.

Severe Illness: Indicated by hospitalization in an intensive care unit with or without mechanical ventilation.

Severe Immunosuppression: Severe suppression of immune response of an individual includes being on chemotherapy for cancer, untreated HIV infection with CD4 T lymphocyte count <200 , combined primary immunodeficiency disorder, and receipt of prednisone >20 mg/day for more than 14 days.

- Other factors such as advanced age, diabetes mellitus, or end-stage renal disease, may pose a much lower degree of immunocompromise and not clearly affect decisions about duration of isolation.

COVID-19 Preparation and Response for Schools

District Planning and Response Team

Assemble a COVID-19 District Planning & Response Team

1. Team Lead/Point Person
2. Leader & Deputies
3. Head Nurse
4. HR Director
5. Head of Operations & Facilities
6. Head of Security
7. Principals
8. An Educator (designated by the Union if educators are represented)
9. A Staff/Facilities Employee (designated by the Union if educators are represented)

At Each School. Prepare & Plan

Prepare a duty list and designate a backup for each team member.

Identify an isolation area for ill students or staff.

Plan for student pick up when one large area or the entire building needs to be evacuated at once:

1. Pick up of students
2. Sending staff home
3. Who stays last?
4. Will buses be used?

Plan for when a student cannot be picked up immediately.

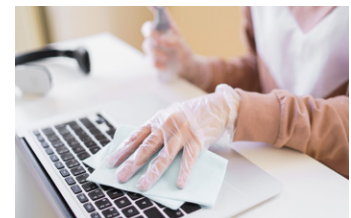
Responsibilities of the School COVID-19 Point of Contact

Collect and maintain all information about who is in each building:

1. Staff rosters including cell phone numbers
2. On-site contractor rosters
3. Classroom and cohort rosters
4. Class schedules
5. After school program rosters
6. Real-time sign-in sheets/visitor rosters
7. Real-time student attendance data from school administrators
8. Bus route rosters
9. Each student's emergency contacts authorized to pick up, authorized medical care, and household member information, etc.
10. Up-to-date student addresses

Have key contact information on hand for state agencies who can answer questions:

- » NMPED hotline for reporting all cases: 505-476-5825
- » NMENV/OSHA for recording staff cases: 505-476-8700
- » NMDOH COVID hotline for general questions: 1-855-600-3453
- » School Health Advocates contact information (available on page 26)



Communication for Schools

COVID-19 Point Person

Each school must identify a COVID-19 Point Person to liaise with the New Mexico Public Education Department (NMPED) Rapid Response Team. For many schools, the school nurse may be well-suited to serve in this role. In the event of a confirmed positive case in the school, the point person must be prepared to:

- Effectively communicate with NMPED and other state officials conducting case investigations;
- Provide up-to-date contact information for each student at the school;
- Identify close contacts of confirmed cases; and
- Ensure close contacts do not return to school until the appropriate isolation or quarantine period has passed.

Please provide the name and contact information of the designated Point Person to NMPED in this [online spreadsheet](#). You may appoint one point person for all of your schools. However, please assign a back-up Point Person in the event that your Point Person is absent or ill.

Communication with Families

Communication regarding positive cases should be handled in a timely and thoughtful manner. Every effort should be made to maintain confidentiality of the infected individual. Within four hours of the school being notified of a positive case, the close contacts (**see page 4 for the definition**) should be notified by the school of the requirement to quarantine for 10 days from the last exposure. Students and staff identified as close contacts are highly encouraged to be tested. Within four hours of the initial notification of the positive case, schools must also notify families and staff that a positive case has been identified at the school site. Please use the language contained in the **Notification Letter Template** for school communications regarding positive cases.

Notification of the school community is only required if the positive case was on campus while infectious.

Please see the **Staff & Student Individual Decision Tree** for additional information.

Confidentiality Considerations

An individual's right to privacy should always be considered. In sharing information with students, families, and staff members, report the fact that an individual in the school has been determined to have COVID-19, rather than specifically identifying the student or staff member who is infected.

However, in relation to the sharing of information with NMPED Rapid Response members or NMDOH School Health Advocates, the Federal Education Rights and Privacy Act (FERPA) permits non-consensual disclosures of Personally Identifiable Information (PII) from students' education records under the health or safety emergency exception to "appropriate parties" (such as public health officials) whose knowledge of the information is necessary to protect the health or safety of students or other individuals. Additional information regarding FERPA and COVID-19 may be found in the [U.S. Department of Education's FERPA & Coronavirus Disease 2019 \(COVID-19\) Frequently Asked Questions \(FAQs\)](#).



Rapid Response to a COVID-19 Case in an School Facility

RESOURCES:

- **NMPED Hotline:** 505-476-5825 (8am–6pm Monday-Sunday)
- [New Mexico Testing Sites](#)
- [COVID-19 Test Results](#) website indicates which NMDOH results tested negative
- [CDC Cleaning and Disinfecting Guidance](#)
- [COVID-19 Vaccination Registration System](#)

Reporting of a Positive COVID-19 Case is Required

ACTION STEP	RESPONSIBLE	TIMELINE
1. Ensure the positive individual has been isolated and sent home. Inform the positive individual and his/her parents/guardians (if a student), that the positive individual will need to self-isolate for 10 days from the specimen collection leading to the positive test result AND until fever-free for 24 hours without fever reducing medication AND until symptoms are improving.	School Administrator or District/School COVID-19 Point Person	Within 4 hours of notification
2. If a staff member, also report the positive case within 4 hours to NMENV at 505-476-8700.	School Administrator or District/School COVID-19 Point Person	Within 4 hours of notification
3. Report the positive case (if infectious while on campus) on the NMPED Rapid Response Submission website or call 505-476-5825 by the next business day of the school being notified. Be ready to provide information about the positive case.	School Administrator or District/School COVID-19 Point Person	By the next business day
4. Shut down impacted facilities/classrooms for a minimum of 2 hours (24 hours recommended) and perform enhanced cleaning, sanitizing, and disinfecting of facilities in accordance with CDC guidance.	School Administrator or District/School COVID-19 Point Person	Within 6 hours of notification
5. Provide COVID-19 Positive Case Letter to all staff and families in appropriate languages and on district/school letterhead. If the positive individual was not at school from two days prior to symptom onset (or if asymptomatic, two days before the specimen leading to the positive test result was collected) through the isolation period, there is not a school exposure and there is no need to notify the school community.	School Administrator	Within 6 hours of notification
6. Call your regional School Health Advocate for any guidance needed regarding testing, cleaning, closure, etc. See the School Health Advocate Contact List on page 26.	School Administrator or District/School COVID-19 Point Person	No time requirement

What to Report for Schools

Report all positive cases of COVID-19 to NMPED by the next business day.

- Case of COVID-19 who were infectious while on campus should be reported to NMPED on the **Rapid Response Submission website** or at **505-476-5825**. Be ready to answer the questions about the positive case and close contacts.
- If the case is a **staff member**, also report to NMENV within 4 hours of notification by one of these methods:
 - » **EMAIL** NMENV-OSHA@state.nm.us
 - » **CALL** 505-476-8700
 - » **FAX** 505-476-8734

Each district or school's COVID-19 Point Person must report positive cases of COVID-19 to NMPED for any student, staff, or contractor and NMENV (only if a staff member).

When your district or school's COVID-19 Point Person goes to the [Rapid Response Submission website](#) or calls NMPED, the Point Person will provide information about the positive case, such as name, date of birth as well as contact information for the point person. The Point Person will also be required to call NMENV if the positive case is an employee.

Your district or school's COVID-19 Point Person needs the information below to complete the NMPED report.

Incident Report Information:

1. Name and address of the school or district site that the infected person physically occupied
2. Date employer was notified of the positive test(s)
3. Last date each positive employee or student was at the school or district site
4. Date each positive employee/student began self-isolation
5. Name, email, and cell phone number of Principal or Director
6. Number of staff/contractors and all other persons who were in the building on the date of positive case notification
7. Number of students who were in the building on the date of positive case notification
8. Type of School: Public, Charter, State-supported, Bureau of Indian Education (BIE), or Private.
9. Role of the positive individual (for example: student, teacher, school administrator, food service, custodial, bus driver, counselor, librarian, school nurse, educational assistant, administrator, secretary)
10. If a student, the grade the positive student is in
11. If a student, was the student on campus for athletics
12. If a staff member, why was staff member on campus?



13. Positive individual's name and date of birth.
14. Home mailing address of the positive individual
15. Email address of the positive individual (or parent)
16. Phone number of the positive individual (or parent)
17. Have you notified NMENV for employee cases?
18. What date were families notified of the positive case? If they have not been notified yet, what date will they be notified? Please feel free to use the **Positive Case Letter template** provided on page 27 of this Toolkit, printed on your school/district letterhead (also available in Spanish).
19. On what date were staff notified of the positive case? If they have not been notified yet, what date will they be notified? Please feel free to use the Positive Case Letter template provided in this Toolkit, printed on your school/district letterhead (also available in Spanish).
20. What type of reentry model was the district or school in when notified of the positive case? (For example: Full Reentry; Hybrid (ES), (ES, MS), (ES, MS, HS) or Small Groups of PreK–3, and/or Students with Disabilities only)
21. Which parts of the school site or building have you closed or will you close? (classroom, wing, school, cafeteria)
22. Is the case related to an earlier case at your school that you know of?
23. If the case is related to an earlier case, on what date was the school notified of the earlier case?
24. How many individuals are in the cohort of the positive case?
25. How many student close contacts were identified?
26. How many staff close contacts were identified?
27. On what date did the school or impacted area reopen?
28. How long was the school (fully or partially) closed?
29. Has the case received one or more vaccine shots? If so, when and which one?

A “close contact” in a school is defined as:

- Anyone who came within six feet of the infected individual (even while wearing a mask) for a cumulative total of 15 minutes over a 24-hour period.
- **Exception:** In the pre-K – 12 setting (including transportation), the close contact definition *excludes* students who were within 3 to 6 feet of an infected student (laboratory-confirmed or a [clinically compatible illness](#)) where
 - » both students were engaged in consistent and [correct](#) use of [well-fitting](#) face [masks](#); and
 - » other [K–12 school prevention strategies](#) (such as universal and correct mask use, physical distancing, increased ventilation) were in place in the K–12 school setting.**This exception does not apply to teachers, staff, or other adults in the pre-K – 12 setting.**

Important Final Step: Check to see if the confirmed positive individual resides with any other district students or employees—for example, siblings or household members of a confirmed positive student who attend other schools, or students who are the children of employees or contractors at the district/school. If so, share confirmed positive case information among the appropriate schools through their COVID-19 Points of Contact so that impacted students and staff are quarantined.

Important Note: If you are notified that a household member of a student or staff member is infected with COVID-19, any unvaccinated students or staff members who reside in the same household of this confirmed case must quarantine.

They should quarantine for 10 days from the last date of contact with the infected individual or, if continuously exposed, 10 days from the last date on which the infected case is likely to have been infectious (10 days after symptom onset, or 10 days from specimen collection leading to positive test result) and the household members, are encouraged to get tested for COVID-19.



School Staff and Student Decision Tree

The following decision tree was created for families, students, and staff to better understand the steps that should be taken if an individual develops symptoms. Testing of close contacts (strongly encouraged) should happen five days into quarantine, or at onset of symptoms. A negative test for an unvaccinated close contact of a COVID-19 positive individual does not end the quarantine period.

UNVACCINATED PERSON

Are you experiencing any **symptoms of COVID-19**?

Fever, chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, loss of smell or taste, sore throat, congestion or runny nose, nausea or vomiting, diarrhea?

No

Continue going to school, unless close contact with an infectious individual (see Close Contacts – bottom right)

Yes AND NOT Tested

If at home, stay at home and get tested for COVID-19

If at school:

1. Tell your teacher or supervisor immediately
2. Go to isolation unit until you can leave school or get picked up as soon as possible

GET TESTED

(strongly encouraged)

Call your doctor. If you do not have a doctor, call the NMDOH hotline for help at **1-855-600-3453**

Test result is NEGATIVE

Stay home until 24 hours fever-free and with improved symptoms

Test result is POSITIVE (or no test result)

Yes AND POSITIVE test

Stay home until released from isolation (10 days after symptom onset, 24 hours fever-free, and with improved symptoms)

No BUT POSITIVE test

CLOSE CONTACTS

Have you been in CLOSE CONTACT* with a confirmed case during their infectious period, in school or out of school?

No

Continue going to school

Yes

Stay home for 10 days after last exposure to confirmed case (vaccinated individuals do not need to quarantine when they are in close contact with a confirmed positive case).

**See definition of Close Contact on page 4.*

Symptoms in a Recovered Individual: If a person is positive for COVID-19, completes their self-isolation, recovers, and then develops new COVID-like symptoms within 90 days of their first infection, they should stay home until fever-free for at least 24 hours without fever-reducing medication and with improvement in symptoms. They may consider consulting their healthcare provider for additional guidance. If a person who was positive for COVID-19 more than 90 days ago develops new COVID-like symptoms, they should follow the same guidance as for someone who was never previously a case.

Acute vs. Chronic COVID Symptoms in Schools

Acute Symptoms

Both vaccinated and unvaccinated students and staff with no known exposure to COVID-19 but with new onset COVID-19 symptoms, such as headache or runny nose, should be sent home to self-isolate and are encouraged to test. If the student or staff member provides proof of a negative PCR test result, they may return to school before the full 10 days of isolation. If they decide not to test, they must isolate for the full 10 days.

Symptomatic staff and students who have not provided evidence of COVID-19 vaccination are encouraged to get tested for COVID-19 with a PCR test (VAULT, Curative or Public Health Office testing site) and should remain in isolation until the results are available. A negative test result will discontinue the isolation and the student or staff member may be allowed to return to school provided that the symptoms do not interfere with the ability to work or learn at school. **If an unvaccinated symptomatic person has had a known exposure to COVID-19, the person should be tested at five days after exposure and must quarantine for the full 10 days regardless of a negative test.**

Chronic Symptoms:

Students who exhibit chronic, mild non-specific COVID-19 symptoms should have their symptoms assessed either by a school nurse or primary care provider. If there are no changes in symptoms from the baseline state, students would not need to be tested and may participate in school. If students have a change in symptoms from their baseline as assessed either by a school nurse or a primary care provider, then the students should be tested for COVID-19 and be placed

in isolation until the results are available. A negative result will discontinue the isolation. If a student has a change in their baseline state and the student does not get tested, the student must self-isolate for 10 days and be fever-free without fever reducing medication for 24 hours and have improving symptoms before returning to school.

Staff with allergies, asthma, or other non-infectious chronic disease which may present with mild non-specific COVID-19 symptoms should contact their primary care provider. The primary care provider may furnish the staff member with medical documentation stating that present, non-specific mild symptoms do not differ from the patient's baseline, indicating the individual may return to school without being tested for COVID-19.

Students or staff who have not provided evidence of COVID-19 vaccination, who have tested negative for COVID-19 in the past two weeks and who have no known exposure to COVID-19, should not be tested again in the presence of chronic symptoms that have not changed in a meaningful way during that interval. If those symptoms were to change from their baseline, then the student or staff should begin home isolation.

Students and staff with mild, chronic conditions, such as asthma or allergies, who have not provided evidence of COVID-19 vaccination and who receive a negative BinaxNOW COVID-19 antigen test, are not required to self-isolate and may participate in school and extra-curricular activities until such time as the individual has a positive COVID-19 test or has a change in symptoms. A note from a primary care provider is not required for reentry in such cases.

If I develop symptoms after vaccination, should I isolate myself and get tested for COVID-19?

Individuals who develop symptoms after vaccination may be unsure if their symptoms are related to the vaccination or if they are infected with the SARS-CoV-2 virus. The following approach should be utilized to determine next steps when post-vaccination symptoms occur and get better within three days of vaccination.

PRESENCE OF ANY SYMPTOMS AFTER VACCINATION	SUGGESTED APPROACH
Injection site pain, swelling, and/or redness	These symptoms are consistent with the COVID-19 vaccination. Self-isolation is not recommended.
Cough, shortness of breath, runny nose, sore throat, and/or loss of taste or smell	These symptoms are unlikely to be from the COVID-19 vaccination. Self-isolate immediately and get tested for COVID-19.
Fever (100.0°F or higher), fatigue, headache, chills, myalgia, and/or arthralgia	<p>These symptoms are consistent with post-vaccination, SARS-CoV-2 infection, or another infectious pathogen.</p> <p>Self-isolate until all of the following conditions have been met:</p> <ul style="list-style-type: none"> • Feel well enough to perform normal activities, AND • Fever has resolved, AND • No additional symptoms are experienced (i.e. do not have other signs of COVID-19, including cough, shortness of breath, sore throat, and/or change in smell or taste) <p>Self-isolate and get tested for COVID-19* if symptoms are not improving or persist for more than three days.</p>

Positive viral (nucleic acid or antigen) tests for SARS-CoV-2, if performed, should not be attributed to the COVID-19 vaccine, as vaccination does not influence the results of these test.

TO REPORT POSITIVE CASES OF COVID-19 IN SCHOOLS, GO TO: [NMPED RAPID RESPONSE SUBMISSION WEBSITE](#) **11**

Face Coverings & Other Personal Protective Equipment for Schools

Everyone, including vaccinated individuals, must wear a face mask while in a school building, during school-sponsored activities, and on school transportation. Limited exceptions are described below.

Face Masks

Reasons for Wearing Face Masks

[Centers for Disease Control](#) (CDC) calls on Americans to [wear face masks to slow and stop the spread of COVID-19](#). Wearing face masks slows the spread of COVID-19 by reducing the distribution of respiratory droplets by the wearer. The most important function of masks is source control. When there is universal mask-wearing, people protect each other from getting the virus. Mask-wearing, coupled with social distancing, hygiene practices, and other transmission-reducing practices, are critical for reducing the contagion rate of COVID-19.

Face Mask Criteria

Face masks must cover the mouth and nose and fit snugly against the sides of the face in order to contain respiratory droplets. **The types of allowable face masks include:**

1. [Face masks made of two or more layers of cloth.](#)
2. [Face masks with a clear plastic window.](#)
3. Surgical, procedural, [N95 or KN95 face masks](#) that are approved by the federal Food and Drug Administration (FDA) for use by staff performing medical duties or similar close contact assignments.

The following face coverings are NOT substitutes for face masks:

- [Masks that have exhalation valves or vents](#)
- [Bandanas](#)
- Scarves
- [Neck gaiters](#) (also known as a neck fleece)
- Face shields (see further discussion below)

According to the CDC, [masks that have exhalation valves or vents cannot be used because they allow respiratory droplets to be expelled](#). Therefore, masks with exhalation valves or vents do not prevent the person wearing the mask from transmitting COVID-19 to others.

In addition, based on research that has emerged regarding the relative effectiveness of different types of materials and designs, bandanas, scarves, and neck gaiters are not permitted as substitutes for face masks because they are significantly less effective at containing the droplets that are expelled when a person speaks, sings, coughs, sneezes, etc.

Finally, the CDC states that “it is not known what level of protection a face shield provides to people nearby from the spray of respiratory droplets from the wearer. There is currently not enough evidence to support the effectiveness of face shields for source control. Therefore, [the CDC does not currently recommend use of face shields as a substitute for masks.](#)”

Using Face Masks

[Wearing the Face Mask Correctly](#)

- Wash your hands before putting on your mask.
- Put it over your nose and mouth and secure it under your chin.
- Try to fit it snugly against the sides of your face.
- Make sure you can breathe easily.
- Don't put the mask around your neck or up on your forehead.



- Don't touch the mask while it's on your face unless removing it to eat or drink, and, if you do, wash your hands or use hand sanitizer to disinfect before touching your mask.



Washing Cloth Face Masks

- Ideally, a cloth face mask should be washed and dried after each use (after a day at school).
- Masks may be washed in a washing machine or by hand. Optimally, the face mask is dried in a dryer at the hottest setting or is dried outside with sunlight.

Mask Requirements

Everyone is required to wear masks while in a school building, on school transportation, or at a school-sponsored event. The only time the face mask may be off is while eating and drinking during allowed times. It is recommended (not required) that unvaccinated students and staff wear masks while outdoors. Outdoors means being entirely outside the school building; if under a roofed or canopied structure, 25 percent or more of the structure's perimeter must be wholly open to the outdoors. Students and staff must adhere to the mask requirements (above) upon entering the school building.

"In general, you do not need to wear a mask in outdoor settings. In areas with high numbers of COVID-19 cases, consider wearing a mask in crowded outdoor settings and for activities with close contact with others who are not fully vaccinated."

-The Center for Disease Control, Guidance for Unvaccinated People: Your Guide to Masks.

Vaccination Verification

Existing laws and regulations require certain vaccinations for children attending school. Schools regularly maintain documentation of people's immunization records.

Since recommended prevention strategies vary by COVID-19 vaccination status, K-12 administrators who maintain documentation of students' and workers' COVID-19 vaccination status can use this information, consistent with applicable laws and regulations, including those related to privacy,

to inform physical distancing practices, testing, contact tracing efforts, and quarantine and isolation practices. Schools that accept voluntary submission of documentation of COVID-19 vaccination status should use the same standard protocols that are used to collect and secure other immunization or health status information from students.

The protocol to collect, secure, use, and further disclose this information should comply with relevant statutory and regulatory requirements, including Family Educational Rights and Privacy Act (FERPA) statutory and regulatory requirements. Policies or practices related to providing or receiving proof of COVID-19 vaccination should comply with all relevant state, tribal, local, or territorial laws and regulations.

There is currently no NMPED requirement for fully vaccinated individuals to disclose their vaccination status. However, students, staff, volunteers and visitors who want to enter a secondary school building or ride school transportation without maintaining social distance must provide evidence of being fully vaccinated.

Evidence of full vaccination includes:

- Original or copy (including photo) of a vaccination card indicating the individual completed a course of COVID-19 vaccination at least 14 days prior to the current date; or
- Print out or screen shot from NMVaxView indicating the individual completed a course of COVID-19 vaccination at least 14 days prior to the current date.

Replacement vaccination cards are available at regional public health offices. Family health providers can provide a print out from NMVaxView. In circumstances in which a family attests to a student being fully vaccinated but the family is unwilling or unable to provide documentation, a school may check vaccination status through the Healthcare Effectiveness Data and Information Set (HEDIS).

Enforcement

Schools will update their student discipline matrices, or add an addendum, for school year 2021–2022 to describe the consequences for violating mask-wearing requirements. Consequences for violating mask-wearing requirements will be supportive and instructional and will not include

suspension (except that no one can be in the school building without a mask) or expulsion.

School policy will set forth the number of times a student may remove a face mask and receive a warning prior to being sent home. A consequence for students with repeated violations of the mask-wearing requirement will include mandatory remote only, outdoor-only instruction, or other suitable instruction option. The number of violations triggering remote only (or outdoor only) instruction and the duration of the remote only (or outdoor only) instruction are at the discretion of the school or district. **Schools will implement and provide families with notice of the updated discipline matrices by September 8, 2021, which includes posting them on each school website.** Schools are highly encouraged to collect signatures from families, indicating receipt of the revised matrices.

Schools should provide masks to those students who need them (including on buses), such as students who forgot to bring their mask or whose families are unable to afford them.

If a student refuses to wear a mask and has exhausted all warnings per the school updated discipline matrix, then the student will have to be picked up from school and taken home. While waiting for pick up, the student should be supervised and quarantined from other students.

If an adult refuses to wear a mask in the building, at an indoor school-sponsored event during school hours, or on school transportation, then the individual must leave. For staff members who refuse to wear a mask, HR policy will dictate disciplinary actions and whether the individual may choose to take leave when required to vacate the school building. To support implementation of CSPs, schools will develop policies for visitors who violate mask policies.

Limited Exceptions to Wearing Face Masks

There are very limited circumstances under which a face mask cannot be worn. According to [CDC guidance](#), the following individuals should not wear a face covering: children under age two, or anyone who has trouble breathing, is unconscious, incapacitated or otherwise unable to remove the mask without assistance. In these cases, fully remote or fully outdoor learning are the best options to keep the student safe, as well as other students, staff, and the greater school community.

When wearing a face mask would obstruct breathing or exacerbate another medical condition for a student, then the student should be seen by a healthcare provider to discuss whether it is safe for the student to be in school during the public health emergency. [American Lung Association Chief Medical Officer Dr. Albert Rizzo](#) states that “cases of exemption are very few and far between,” and “people with supplemental oxygen or compromised respiratory status which become short of breath even when walking might meet [CDC] criteria, which in that case, going out in public is a health risk to the person.” For these students, fully remote learning is the safest option.

For students who cannot wear a face mask and have an Individualized Education Plan (IEP) or a 504 Plan, the IEP team or 504 committee should meet to make a determination about possible accommodations based on the totality of needs, including the student's needs and the community's public health needs. In most cases, the IEP team or 504 committee should consider fully remote or fully outdoor learning as the appropriate accommodation. In other cases, such as when the student has a breathing obstruction or other severe medical condition that would be exacerbated by mask-wearing, the IEP team or 504 committee may determine whether a face shield could be substituted for a face mask after receiving medical documentation that would support such a determination. In the event the IEP team or 504 committee allows a face shield to be substituted for a face mask, the face shield must be hooded, or start at the forehead, and wrap around the face from ear to ear and extend to the chin. In extreme cases when a face mask or a face shield cannot safely be worn, the IEP team or 504 committee shall convene to review medical documentation and consider whether individualized accommodations would allow the student to receive in-person instruction in such a way that staff and other students are kept safe. Additional personal protective equipment (PPE) for the student, other students in proximity to the student, and the staff serving the student should be considered.

When a student with an IEP or 504 Plan cannot wear a face mask due to a behavioral issue, then the IEP team or 504 committee should convene to develop a fully remote learning option and a plan for teaching the student to wear a face covering so the student may return to in-person learning as soon as possible.

When convening the IEP team or 504 committee to consider remote learning, face shields or other individualized accommodations, please meet with your legal counsel and Special Education Director or 504 coordinator to ensure that all state and federal laws are followed, including the Individuals with Disabilities Education Act (IDEA), the Rehabilitation Act of 1973, the Americans with Disabilities Act (ADA), and the New Mexico Human Rights Act, Section 28-1-1 NMSA 1978 et seq. In addition, please convene appropriate school staff to explore all options to include the student in whatever activities are feasible, including outdoor learning, in a safe manner to the greatest extent possible while minimizing and mitigating risks and making other possible accommodations.

Students who do not have and are not eligible for an IEP or 504 Plan must wear a face mask in order to attend school in-person. The alternatives are fully remote learning or wholly outdoor learning. Unvaccinated students who cannot wear a mask and are participating in wholly outdoor learning, must still wear a mask while on school transportation, or upon entering a school building.

Face Masks and Staff

[According to the Equal Employment Opportunity Commission of the U.S. Department of Labor, wearing a face mask is considered a lawful condition of employment.](#)

Staff who work with unvaccinated students not wearing facemasks due to the circumstances described above should wear a medical mask or a multi-layered cloth mask and face shield. For these situations, schools should provide staff with a medical mask (surgical, procedural, [N95, or KN95](#)) or a face shield with a multi-layered cloth mask.

Staff who work with students who need to lip read or face read in order to learn should wear a face mask that has a clear plastic window or is made of clear material. Discussion of [clear plastic mask features and where to buy clear plastic masks](#) may be found online. (NMPED does not endorse any particular face mask vendor.)

Mask-Wearing and the Americans with Disabilities Act

The need for public health and safety must be balanced with requirements under the Americans with Disabilities Act (ADA) to make reasonable accommodations for people with disabilities. Under the ADA, a public accommodation may not be required when it would pose a “direct threat” to the school community. [§ 36.208 \[Direct threat\]](#) of the ADA states as follows:

- a. This part does not require a public accommodation to permit an individual to participate in or benefit from the goods, services, facilities, privileges, advantages and accommodations of that public accommodation when that individual poses a direct threat to the health or safety of others.
- b. In determining whether an individual poses a direct threat to the health or safety of others, a public establishment must make an individualized assessment, based on reasonable judgment that relies on current medical knowledge or on the best available objective evidence, to ascertain: The nature, duration, and severity of the risk; the probability that the potential injury will actually occur; and whether reasonable modifications of policies, practices, or procedures or the provision of auxiliary aids or services will mitigate the risk.

Moreover, a reasonable accommodation also may not be required when it presents an “undue burden”. [§ 36.104 \[Definitions\]](#) of the ADA regulations defines “undue burden” as involving “significant difficulty or expense. In determining whether an action would result in an undue burden, factors to be considered include:

1. The nature and cost of the action needed under this part;
2. The overall financial resources of the site or sites involved in the action; the number of persons employed at the site; the effect on expenses and resources; legitimate safety requirements that are necessary for safe operation, including crime prevention measures; or the impact otherwise of the action upon the operation of the site;
3. The geographic separateness, and the administrative or fiscal relationship of the site or sites in question to any parent corporation or entity; and

4. If applicable, the overall financial resources of any parent corporation or entity; the overall size of the parent corporation or entity with respect to the number of its employees; the number, type, and location of its facilities.

During the COVID-19 public health emergency, all people's health and safety must be considered. To keep people safe by reducing community spread of COVID-19, wearing a face mask is a state mandate and must be enforced in schools. The following reasonable accommodations for students and staff who have a disability that precludes mask-wearing are permitted:

1. Students with an IEP or 504 Plan will have access to fully remote or fully outdoor learning as the accommodation that keeps the maximum number of people safe;
2. For students who have a breathing obstruction or other severe medical condition that would be exacerbated by mask-wearing, the IEP or 504 Plan team may consider whether to allow the student to wear a face shield after taking into account whether PPE and other additional precautionary measures could be used to keep everyone in the school community safe. In extreme cases when a face mask or a faceshield cannot safely be worn by a student with an IEP or 504 Plan, the IEP team or 504 committee shall convene to review medical documentation and consider whether individualized accommodations would allow the student to receive in-person instruction in such a way that staff and other students are kept safe;

Please note that the above discussions of legal considerations do not constitute legal advice and should not be relied upon in any individual case. It is critical that school districts and charter schools seek the advice of human resources staff and legal counsel about specific cases.

Mask and PPE Supplies Required at Each School

Schools may require families to provide masks for their students. Schools also must have on hand a sufficient quantity of masks for students who have left their masks at home, as well as PPE for staff whose duties include close contact assignments.¹

¹A close contact assignment includes any staffing assignment in which a staff member must be within six feet of distance from a student in order to fulfill their duties (such as staff who change student diapers, who change feeding tubes, or who provide services to students with behavioral needs necessitating closer contact).

If a school does not have medical masks and/or face shields on hand for staff with a close contact assignment, the school may still have students in school, but must not require a staff member to perform close contact duties until a medical mask or a cloth mask and face shield is provided. (Staff must wear the face shield with the face mask.)

Staff Assignments

Reasonable accommodations such as alternate work assignments may be available to an employee, including [high risk staff](#), under the Americans with Disabilities Act (ADA). Leave under the Family Medical Leave Act (FMLA) may be available to an employee who is unable to perform his or her duties due to the employee's or eligible family member's serious medical condition. ADA and FMLA requests may include consideration of the mitigating effects of the COVID-19 vaccine, which have been, and are being, made available to all school staff. Please consult with your Human Resources staff and legal counsel for advice about the process for making determinations about reasonable accommodations under the ADA and/or leave under the FMLA.

Emergency Paid Sick Leave

Districts and state-chartered schools must provide emergency paid sick leave to employees under House Bill 2 (signed April 9, 2021). The federal government renewed and expanded the Families First Coronavirus Response Act (FFCRA) as a voluntary program for the period April 1, 2021, through Sept. 30, 2021. However, House Bill 2 requires LEAs to implement the provisions of FFCRA through June 30, 2022. ([See House Bill 2](#), lines 22-25 on p. 169 and lines 1-2 on p. 170.) To pay for this mandate, you may use state-appropriated operational funds or available Elementary and Secondary School Emergency Relief funds. ([See House Bill 2](#), lines 1-2 on p. 170.) ESSER funds are also subject to federal statutory use requirements and applicable federal regulations. If using ESSER funds, such use must be listed under "other activities necessary to maintain operation and continuity of services" in the American Rescue Plan application.



COVID-19 Surveillance Testing in Public Schools

COVID-19 surveillance testing is required for all schools providing in-person student services, including athletics. The purpose of surveillance testing is to detect COVID-19 outbreaks as early as possible by screening asymptomatic individuals.

COVID-19 surveillance testing programs test unvaccinated asymptomatic individuals to discover undiagnosed cases and to better understand the rate of infection in the community. Staff and students who provide evidence of COVID-19 vaccination and those who have tested positive for COVID-19 in the past 90 days are not included in surveillance testing.

Districts and charter schools must ensure that any faculty and staff who have not provided evidence of COVID-19 vaccination and work onsite participate in COVID-19 testing each week that student services are provided at school.

Schools are required to provide student surveillance testing programs to all unvaccinated students on a voluntary basis. In alignment with CDC guidance, those who participate in athletics and other extra-curricular activities are strongly encouraged to participate in surveillance testing. Schools have a weekly goal of testing 25% of unvaccinated students.

"To facilitate safe participation in sports, extracurricular activities, and other activities with elevated risk (such as activities that involve singing, shouting, band, and exercise that could lead to increased exhalation), schools may consider implementing screening testing for participants who are not fully vaccinated. Schools can routinely test student athletes, participants, coaches, and trainers, and other people (such as adult volunteers) who are not fully vaccinated and could come into close contact with others during these activities."

[-CDC Guidance for COVID-19 Prevention in K-12 Schools](#)

Districts and charter schools are required to report the number of staff and students tested for COVID-19 each week through the [NMDOH Provider Portal for COVID-19](#).

Surveillance testing of school employees and students is to be provided using PCR testing through VAULT, Curative, the Department of Health's Public Health Office testing sites, through school-based BinaxNOW rapid antigen testing programs, or through pooled testing options sponsored by the DOH.

Private schools and Bureau of Indian Education schools are encouraged, but not obligated to participate in surveillance testing.



Access to COVID-19 testing is provided at no cost to the individual. Insurance information will be requested, but deductibles, copayments, or other out-of-pocket charges will not be incurred. Testing also will be provided to people without insurance. If payment is requested for COVID-19 testing, please notify [Ashley Garcia \(ashley.garcia@state.nm.us\)](mailto:ashley.garcia@state.nm.us).

Testing sites/companies will bill insurance for insured individuals who take the test. Please note that the goal of surveillance testing is to reduce the transmission of cases and that the cost of testing is less than the cost of treatment. Also, please note that VAULT testing requires access to UPS shipping.

The testing companies are subject to all HIPAA regulations and must comply with patient privacy laws.

Asymptomatic individuals who have not been exposed to COVID-19 and who participate in surveillance testing are not required to self-isolate/quarantine from specimen collection until their results arrive. However, asymptomatic individuals who test positive for COVID-19 must self-isolate for 10 days from the date of specimen collection.

At-Home Rapid Tests

At-home rapid COVID tests should not be used for surveillance testing. Students and staff members who test positive with an at-home rapid COVID test kit need to quarantine, and the school should notify close contacts of exposure. However, there is no need to report such a case to PED, and those individuals should not be included as surveillance test numbers. This guidance does not apply to VAULT testing, which is PCR testing. It is recommended that those who have a positive at-home rapid test confirm the result with a test performed by a healthcare provider. A negative PCR test with a sample collected within 48 hours of the positive at-home rapid COVID test would negate the positive test and would not require continued self-isolation or quarantine based off of the at-home rapid COVID test.

Air Filtration in Schools

High-quality air filtration is one aspect of a multi-pronged strategy for ensuring healthy school environments. To address issues and concerns surrounding air quality, NMPED will work with each district and school to ensure installation of high-quality air filters. In addition, each district shall have an established and written protocol on inspecting, repairing and providing maintenance on ventilation systems within all school facilities.

Ventilation system upgrades and improvements will increase the delivery of clean air and dilute potential contaminants within each classroom and school facility. The NMPED will be deploying the [American Society of Heating, Refrigerating and Air-Conditioning Engineers \(ASHRAE\) recommendation](#), which states the target level for filtration in schools is minimum efficiency reporting value (MERV) 13 or higher. On average, this will remove 75 percent of particle size of 0.3 to 1.0 μm .

This higher standard of filtration is more effective at removing viral particles from the air. The ASHRAE document linked above provides additional guidance on determining compatibility of various types of HVAC systems with a MERV 13 filter.

NMPED will work with those districts and schools to identify the highest quality compatible filters.

Additionally, districts and schools unable to immediately install MERV 13 or its equivalent must work with their operations staff to take the following actions in accordance with the [guidelines from the CDC](#):

1. Run the central air fan continuously;
2. Open dampers to increase air flow;
3. Open windows and doors (be mindful of possible safety considerations); and
4. Deploy box fans or other portable fans and air purifiers with high air circulation capacity in addition to prioritizing the use of these items in classrooms with higher ventilation needs.

Guidance on COVID-Safe Practices

All individuals will be required to wear masks inside all school buildings, on school transportation, and at all school sponsored events.

Vaccination Events

For those eligible for the COVID-19 vaccine, vaccination is the most important COVID-safe practice to protect the individual and community. Schools may consider hosting vaccination events as part of the back to school process. Schools (along with other organizations) may request on-site vaccination events through this [Department of Health webform](#). Schools should have at least 25 people to be vaccinated, which can include family and community members. Parents who have signed students' vaccine consent forms do not need to be present for vaccination. For questions about vaccination, please reach out to Maxine Otero at Maxine.otero@state.nm.us.

Seating Charts

For all in-person services, teachers will develop and maintain seating charts that ensure social distancing requirements are maintained and that limit the number of student interactions.

Papers and Shared Texts

Surface transmission of COVID-19 is not thought to be a main driver of transmission, but it can still occur. Previous studies have found that the virus was detectable on paper for 3 hours. As a precaution against transmitting the COVID-19 virus through shared texts, students should wash and/or sanitize their hands before and after using shared texts. As a precaution against transmitting the COVID-19 virus through shared papers, schools may consider having students submit papers directly into a receptacle, where the papers would sit for 3 hours before being touched.

Student Rest Breaks

Students, including preschool students, who rest or nap at school are not to wear masks during their rest breaks and must maintain social distance. Student mats must be spaced at least three feet apart and placed head-to-toe. Students must be supervised by adults during rest breaks.

School Transportation Guidance

NMPED's Transportation Guidance for the 2021–2022 School Year provides requirements, considerations, recommendations, and best practices to encourage a safe and successful school year.

The following are important minimum requirements:

1. Everyone must wear face masks.
2. To the greatest extent possible, a maximum of two students may sit together on a bus seat.

The following are recommendations, suggestions, and other options:

1. NMPED has updated the [School Bus Inspection Guide](#) to allow for the installation of aftermarket equipment on all school buses that enhance the safety of the driver and passengers due to COVID-19 as long as they meet all federal guidelines and regulations. Examples include:
 - a. Hand sanitizer dispensers
 - b. Driver shields
 - c. Passenger curtains.
2. Buses will be equipped with extra masks for those students who forget their masks.
3. Bus drivers and school bus assistants must implement loading and unloading procedures on a school bus, which will include assigned seating.
4. Bus drivers and school bus assistants must implement loading and unloading procedures on a school bus, which may include assigned seating. If possible, those students who board first should sit all the way to the back, and those who board last should sit in the front. When unloading, the front of the bus should unload first to prevent students from crossing the paths of one another.
5. Student temperature checks are not required. Temperature checking students may be done at school bus stops (or at school). This can be done by the bus driver or a school bus assistant. Policies will need to be developed on what to do with students who have COVID-19 symptoms.
6. Schools and districts should encourage families to have a parent or guardian present until the students are picked up to ensure no student is left unattended at a school bus stop. Implement clear policies and procedures for isolating students with symptoms and transporting them to their homes.

7. Sanitization of a school bus before and after students are transported may be required. Implement procedures for the sanitization of a school bus and determine what staff will complete this type of work.
8. Schools and districts must train all bus drivers and school bus assistants on updated policies and procedures related to COVID-19.

The following are FAQ's regarding School Transportation:

1. **Q:** In regulation, school districts are not allowed to cross district boundaries without an approved boundary agreement signed by the Secretary of NMPED. Can the district cross over district boundaries to deliver food?

A: Yes – 6.42.2.2 [SCOPE] provides that the “[p]rovisions of this rule apply to public school districts where temporary transportation boundaries are established to transport students from an adjoining district within a specified geographic area where it is impractical to transport such students to school within the district where they live.” (Emphasis added.) This rule pertains to the transportation of students, not meals or other goods.

2. **Q:** In regulation school districts are allowed to pay families a per capita reimbursement for transporting their children to school when it is impractical to send a school bus to transport the students. Can LEAs still pay families a per capita feeder reimbursement for transporting their children to pick up meals?

A: No – 6.43.2.15 [PER CAPITA FEEDER REQUIREMENTS] provide that “[t]he local board may provide per capita or per mile reimbursement to a parent or guardian in cases where regular school bus transportation services are not available or impractical because of distance, road conditions or sparseness of population or in cases where the local board has authorized a parent to receive reimbursement for travel costs incurred by having a child attend a school outside the child's attendance zone.” **In this instance, reimbursement is not available for travel costs incurred for picking up meals, since the rule addresses travel costs for students only.**

3. **Q:** In regulation, school districts are required to conduct bus evacuations once per semester. Will districts be required to conduct these evacuations due to COVID-19 or can NMPED give a waiver?

A: Bus evacuations under NMAC 6.41.4.9(11) are required. Waivers will be considered on a case by case basis.

4. **Q:** Can tribal leaders require school district bus drivers to be tested for COVID-19 before they deliver meals on tribal lands?

A: Bus drivers are subject to surveillance testing under [NMPED requirements](#). If tribal leaders require more stringent testing, then bus drivers are subject to tribal policies when traveling to tribal lands under the doctrine of tribal sovereignty.

5. **Q:** Does the same transportation guidance apply to athletic trips?

A: Yes.

6. **Q:** What is the guidance regarding transportation of students in SUVs?

A: Smaller vehicles pose more risk to unvaccinated individuals, therefore NMPED recommends the use of a school bus. If there is no other alternative, then SUVs should be used with as few unvaccinated passengers as possible and to the extent possible, keep one unvaccinated individual per bench and staggered, so the students are not directly in front of or behind each other. The windows should be open, and masks must be worn by everyone.



Procedural Considerations

Social Distancing

Social distancing is required for students and staff in schools who have not provided evidence of vaccination. Unvaccinated adults are to maintain 6 feet of social distance to the extent possible from other adults and from students. Unvaccinated students are to maintain 3 feet of social distance to the extent possible, except when eating, exercising, taking mask breaks, playing wind instruments, and singing or shouting, in which case 6 feet of social distance to the extent possible is required. If schools do not have a means of differentiating enforcement of social distancing requirements based on vaccination status, then all students, staff and visitors are to maintain social distancing requirements. Regardless, schools may require that everyone on campus maintains social distance.

Screening

All adults who have not provided evidence of being fully vaccinated and who enter school buildings during normal school hours are subject to COVID-19 screening, which includes a temperature check and questions relevant to COVID-19 exposure, travel and COVID-19 testing. This does not apply to spectators in school buildings outside of normal school hours. There is no requirement to screen students for COVID-19.

Attendance

The COVID-19 pandemic exacerbated student engagement issues, and during reentry may lead to poor attendance for some students. Prior to dropping a student for 10 consecutive absences, schools must provide interventions as required by the Attendance for Success Act including intensive specialized supports and referral to the probation services office.

Intensive specialized supports may include **referral to Engage NM** for students who meet Tier 3 and Tier 4 criteria for Attendance for Success Act. When LEAs refer students to ENGAGE New Mexico, a dedicated outreach team will reach out to the student/family through multiple modalities (phone, email, text message, social media, and US mail) to engage the family and offer them the on-going support of an academic coach throughout the school year.

Academic coaches work with students/families to support engagement and attendance, address academic performance issues, navigate academic resources in all learning modalities, and connect families with state and community resources. LEAs receive a weekly report identifying student's response to the intervention. Should an attendance referral become necessary in the future, documentation related to this intervention is provided directly to CYFD by ENGAGE New Mexico. For additional information, contact EngageNM@graduationalliance.com.

If after receiving intensive specialized supports, such as referral to Engage NM, a student continues to have unexcused absences a referral to the probation services office of the judicial district in which the student resides shall be made. Once a referral is received, the probation services office will contact the family and set up a meeting with the student and parents, school officials, and other individuals whom the family requests participate. These meetings may occur at the school, or during the pandemic, may be conducted over Zoom.

Before-school Procedures

A common time for students to socialize in groups is upon arrival at school and before the start of classes. This time period represents a high-risk time for transmitting COVID-19. Recommendations to reduce the risk of virus transmission before school include:

- Staggering arrival times such that there are fewer students entering the school at one time;
- Requiring students to enter classrooms immediately upon arrival at school;
- Requiring teachers to arrive prior to the arrival of buses;
- Providing space and supervision for students who arrive prior to the opening of classes;
- Providing adequate direction and procedural training to students and their families;
- Increasing the number of staff on morning duty (and during transitions) to ensure students maintain social distancing requirements, wear masks, and report directly to class.

Breakfast and Lunch Procedures

- Maximize physical distance as much as possible when moving through the food service line and while eating (especially indoors). Using additional spaces outside of the cafeteria for mealtime seating such as the gymnasium or outdoor seating can help

facilitate distancing. To the greatest extent possible, students should eat outside, sit on only one side of a table and maintain greater than six feet of distance from others.



- Given very low risk of transmission from surfaces and shared objects, there is no need to limit food service approaches to single use items and packaged meals.
- Clean frequently touched surfaces. Surfaces that come in contact with food should be washed, rinsed, and sanitized before and after meals.
- Promote hand washing before, after, and during shifts, before and after eating, after using the toilet, and after handling garbage, dirty dishes, or removing gloves.
- Improve ventilation in food preparation, service, and seating areas.

Duty schedules may need to be amended to ensure that unvaccinated students maintain social distance while in the cafeteria. Please note that districts and charter schools that serve breakfast and lunch to students in classrooms will still be fully funded for all appropriate federal and state food programs.

It is strongly recommended that grab and go meals be provided for students in remote only instruction.

Classroom Transitions (passing periods)

Cohorting practices will limit classroom transitions; however, it will remain important for schools to develop procedures and to train students and staff on how to move through campus safely.

Schools must:

- Provide adequate supervision during transitions to ensure students are wearing masks and maintaining social distancing requirements;
- Provide training to students and staff with opportunities to practice safe transitions.

Schools should also consider:

- Staggering transition times to limit hallway traffic;
- Limiting hallway traffic to one-way, or if allowing two-way traffic, erecting dividers to separate lanes of traffic;
- Using visual cues, such as tape on the floor, to encourage social distancing.

After-school Procedures

Another common time for students to socialize in groups is upon dismissal. This time period represents a high-risk time for transmitting COVID-19. Recommendations to reduce the risk of virus transmission after school include:

- Staggering dismissal times such that there are fewer students exiting the school at one time;
- Requiring students to embark buses directly upon dismissal;
- Providing a space and supervision for students who are awaiting pickup;
- Providing adequate direction and procedural training to students and their families;
- Increasing the number of staff on afternoon duty to ensure students maintain social distancing requirements, wear masks, and exit campus expeditiously.

Isolation Rooms

Schools will have isolation rooms where individuals who have tested positive, are exhibiting symptoms of COVID-19, or who refuse to wear a mask will wait to be transported home. Patients in an isolation room are to be supervised at all times, and supervising staff are to have appropriate PPE, including N95, KN95 or surgical mask, face shield or goggles and gloves.

Managing Individuals with COVID-19 Like Symptoms on Campus

An unvaccinated individual who begins exhibiting COVID-19 like symptoms, and who cannot immediately leave school grounds, should proceed (at the earliest possible time) to an isolation room and should not interact with other students or staff other than the isolation room monitor, until such time as an appropriate family member, school administrator with appropriate PPE, or health care provider with appropriate PPE, is able to transport the individual safely away from the facility. If the unvaccinated student or staff member with COVID-19 like symptoms were to receive an antigen test that provides a negative result, the student or staff member could return home on a bus but should still maintain social distance while on the bus.

Cleaning

In addition to the deep cleaning of spaces occupied by COVID-19 infectious individuals, schools are to maintain a daily cleaning schedule, particularly for

high-touch surfaces. Schools must ensure safe and correct application of disinfectants and keep out of reach of children. See [CDC guidelines for cleaning facilities](#).

Drinking Fountains

Drinking fountains may be used in schools and should be considered high touch surfaces for frequent cleaning.

Singing & Playing Wind Instruments

Music education is an important aspect of a well-rounded education; however, components of music education, such as singing and playing wind instruments, present a higher probability of COVID-19 transmission than other school subjects do.

The following COVID safe practices (CSPs) are required for singing and playing wind instruments as part of an instructional class such as band and choir, and as part of co-curricular activities such as band attendance at athletic events.

Key safety requirements (CSPs) to allow for students singing and playing wind instruments include:

- Prohibiting unvaccinated students from sharing of instruments and supplies.
- Ensuring students each have their own instrument-specific multi-layered cloth mask for singing or playing a wind instrument.
- Ensuring students have their own instrument-specific multi-layered cloth bell cover for playing wind instruments. Students are to be solely responsible for cleaning and maintenance of masks and bell covers.
- Implementing and training unvaccinated students on protocols to ensure that students maintain social distancing (6 feet) while playing and singing, and 3 feet at all other times, especially when assembling and disassembling instruments.
- Using disposable absorbent pads or other receptacles, where possible, to catch the condensation expelled from water keys that will be discarded or cleaned properly after use.



School-related Events

School-related events, including assemblies, dances, award ceremonies, academic competitions and extra-curricular events should be limited to only the most

essential events; however, school-related events are permissible.

COVID-safe practices such as social distancing and mask wearing are required for individuals at all school events. Spectators are allowed at school-related events.

School Board/Governing Council Meetings

Gatherings and events continue to present opportunities for spread of the COVID-19 virus. School boards and governing councils may meet in person (subject to current public health order) or may continue to meet virtually (so long as the public has access to the meeting platform) in order to better protect community members.

Staff Meetings/Professional Development

In-person staff meetings are allowable school events. Staff who have not provided evidence of being fully vaccinated must maintain 6 feet of social distance. If the meeting is indoors during a time when student are on campus everyone must wear a mask.

Travel

Overnight and out-of-state travel are allowed for students and staff for field trips, athletics, professional development and other important school business. Quarantine is not required upon return (subject to current public health order). Unvaccinated individuals, who are not household members, may not share sleeping quarters. Vaccinated students and students who are household members may share sleeping quarters.

Field trips should be limited to essential purposes, such as a culminating event to a unit of study, or a field application of theoretical concepts learned in the classroom. COVID-safe practices are to be enforced during the field trip, including social distancing (for unvaccinated individuals) to the extent possible. It is recommended that field trips be limited to outdoor destinations and that eating and drinking be limited to the outdoors.

COVID-19 Reporting for Interscholastic Events

Each school at an interscholastic event manages its own positive case reporting and rapid responses for

students who were at the event and later tested positive, regardless of which school was hosting the event. All positive cases would be reported to the NMPED and to the hosting facility such that relevant areas of the facility can be closed and cleaned as appropriate.

Visitors

Schools should limit nonessential visitors, volunteers, and activities involving external groups or organizations with people who are not fully vaccinated, particularly in areas where there is moderate-to-high COVID-19 community transmission.

Adults that come on campus during school hours and who have not provided evidence of vaccination are required to complete a COVID-screening, including temperature check, upon entry. All visitors must follow relevant COVID-safe practices including wearing masks.

Student Lockers

Schools may choose to limit access to student lockers if lockers become a place where groups of unvaccinated students congregate without maintaining social distance requirements.

Recess and Physical Education

It is recommended, but not required, that unvaccinated individuals wear masks outdoors when participating in outdoor play, recess, and physical education activities. When physical education activities or recess are held indoors, it is required for people who are not fully vaccinated to wear masks and to maintain social distancing requirements to the extent possible.

Sports/Music Programs/Activities

Depending on the color of the county in which a district or charter school is located, the guidelines for sports, music programs and activities are the following:

Red and Orange Counties: For districts and charter schools located in red and orange counties, which are counties with high transmission rates as defined by the CDC ([see red counties on the map](#)), all participants (students/staff/spectators) must wear a mask for all activities both indoors and outdoors as a minimum. In addition to wearing masks, the district or charter school in their required Enhanced COVID-safe practices plan (see the next section) will include how the safety of participants (students/staff/spectators) will be ensured. For example, spectators could be prohibited or severely limited, and/or participation in sports might be limited to only those who provide proof of vaccination.

High-risk activities include football, wrestling, choir, band (playing of wind instruments), volleyball, basketball, indoor soccer, indoor weight lifting/conditioning, cheer, and other activities in which increased exhalation occurs (particularly when performed indoors). Activities that are not high risk include diving, golf, outdoor soccer, baseball, softball, track and cross country; though indoor workouts would be considered high-risk.

All other colors of counties: For districts and charter schools located in all other counties, participants in high-risk activities must wear masks; masks are not required for activities that are not considered high-risk.

Enhanced COVID-Safe Practices Required Due to Infectious Cases on Campus (Rapid Response)

Schools will no longer need to automatically switch to remote learning upon four rapid responses within a 14-day period. Instead, all districts and charter schools must create and implement a district plan for enhanced COVID-safe practices to protect the health of students, staff and the community. These plans should be district and site specific and should summarize what you are already doing regarding COVID-safe practices.

The required plans for enhanced COVID-safe practices will include:

1. A summary of current COVID-safe practices that a district or charter school is currently implementing and all enhanced COVID-safe practices a district or charter school will implement as needed, such as student cohorting, cessation of extra-curricular activities for unvaccinated students, prohibitions on spectators and outside visitors, and other mitigating strategies specific to a school's circumstances, AND
2. A plan for outdoor learning permitting local weather conditions, AND
3. A process for evaluating whether there are particular programs, classes, or grade levels exhibiting most of the COVID cases (in order to target interventions specific to those settings).

Districts and charters will send these required plans to NMPED and post them on the district, school or charter website no later than October 1, 2021.

Please note that the NM Department of Health has both the authority and responsibility to temporarily close any public facility, including public schools, if infectious case counts become dangerously high or if your district or charter plans for enhanced COVID-safe practices are insufficient to properly address public health concerns.

COVID-Safe Practices for Youth Sports & Programs

See comprehensive [guidance for NMAA activities covering eligibility to participate, COVID-Safe Practices, resources, and FAQs](#).

- Require masks for adults and students at all times (when indoors and not eating or drinking)
- Close communal use locker rooms, or ensure that locker rooms meet sufficient air filtration requirements and are only open when there is sufficient adult supervision to maintain social distancing requirements for unvaccinated students.
- Conduct practices and competitive play outdoors when possible.
- Have adequate supplies to support healthy hygiene behaviors, including soap, hand sanitizer with at least 60 percent alcohol (for staff and older children who can safely use hand sanitizer), tissues, and no-touch trash cans.
- Post signs on how to stop the spread of COVID-19, properly wash hands, promote everyday protective measures, and properly wear a face covering.
- Intensify cleaning, disinfection, and ventilation.
- Ensure ventilation systems operate properly and increase circulation of outdoor air as much as possible by opening windows and doors, using fans, or other methods. Do not open windows and doors if they pose a safety or health risk (e.g., allowing in pollens that may exacerbate asthma symptoms) to children using the facility.
- Include all coaches and staff in COVID-19 surveillance testing programs.
- Conduct trainings for students regarding hygiene and safety protocols including proper hand washing, touching of face, covering mouth and nose when coughing/sneezing and social distancing.
- Stagger arrival and drop-off times and locations. Students waiting to be picked up should maintain 3 feet social distancing.
- Establish protocols to limit direct contact with parents.

- Take the temperatures of staff (who have not provided evidence of vaccination) daily with a touchless thermometer. Individuals with elevated temperatures (above 100.4° F) or with COVID-19 related symptoms should stay home. Implement screenings safely, respectfully, and in accordance with any applicable privacy laws or regulations. Confidentiality should be maintained.
- Plan for when a staff, child, or visitor becomes sick. Advise sick staff members not to return until they have met DOH criteria to discontinue home isolation.
- Students who become sick should be picked up immediately. For emergency situations, staff should call 911.

As per guidance from NMAA's Sports Medicine Advisory Committee, any student who has had a COVID-19 infection must complete the self-isolation period and then receive medical clearance from a medical professional using the [COVID-19 Medical Clearance Form](#) before returning to participation in an NMAA sanctioned-activity. Students who have had COVID-19 infections and have received clearance for participation must continue to follow the protocols given for return to activity.

ADDITIONAL RESOURCES

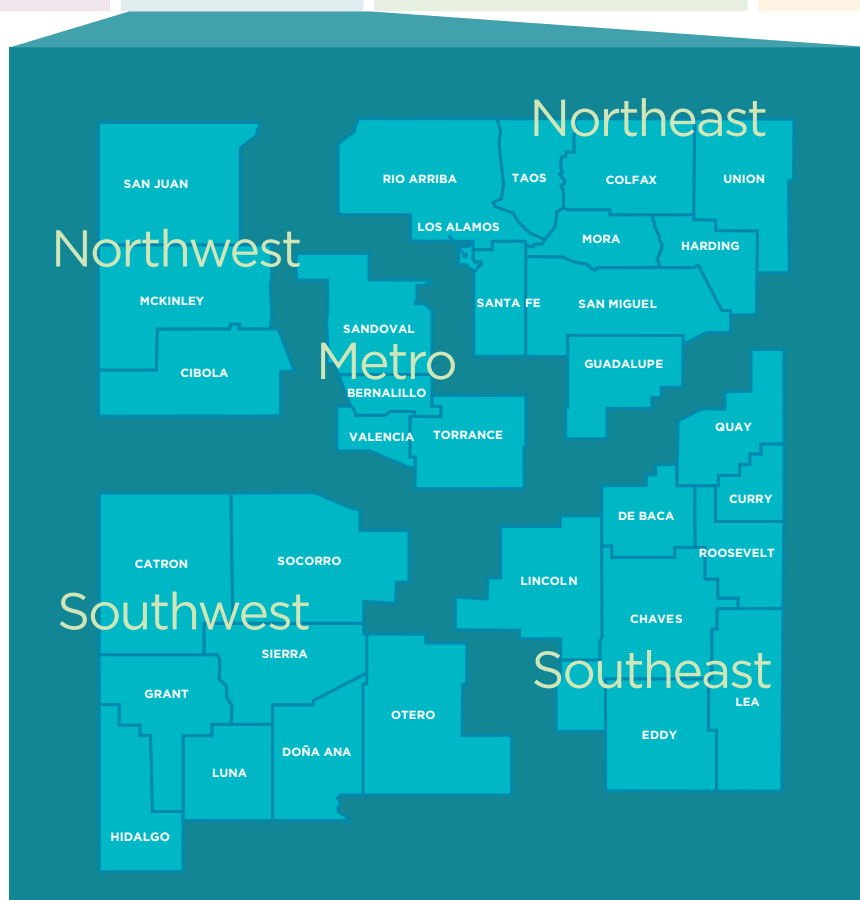
- All Together New Mexico – [COVID-19 Safe Practices Guidance](#)
- New Mexico Department of Health COVID Hotline: 1-855-600-3453 (Available 24/7 in English and Spanish)
- [State of New Mexico COVID-19 website](#)
- [New Mexico Department of Health](#)
- [Centers for Disease Control and Prevention \(CDC\) COVID-19 website](#)
- Occupational Safety and Health Administration (OSHA): [Guidance on Preparing Workplaces for COVID-19](#)
- [CDC Guidelines for Cleaning and Disinfection Community Facilities](#)
- Environmental Protection Agency (EPA): [List N: Disinfectants for Use Against SARS-CoV-2](#)
- [CDC Print Resources in multiple languages](#)
- [CDC Frequently Asked Questions](#)
- List of Suppliers: [COVID-19 Emergency Supply Collaborative](#)
- [Frequently Asked Questions: Children and COVID-19](#)
- [Frequently Asked Questions: Summer Youth Programs](#)

NM Department of Health

School Health Advocate Contact List

Districts and schools may contact their local School Health Advocate (SHA) according to their region for guidance in terms of testing and quarantine procedures.

SCHOOL HEALTH ADVOCATE	REGION	EMAIL	OFFICE PHONE	PROFESSIONAL CELL
Leslie Berry RN	Northwest	leslie.berry@state.nm.us	505-863-4561	505-490-7948
Susan Acosta RN	Northeast	susan.acosta@state.nm.us	Teleworking	505-490-2763
B. Lynn Wheeler RN	Northwest-Metro Area	barbaral.wheeler@state.nm.us	Teleworking	505-467-9292
Maricelda Pisana RN	Southeast	maricelda.pisana@state.nm.us	Teleworking	575-528-8863
Crista Pierce RN	Southwest	crista.pierce@state.nm.us	Teleworking	575-339-4380



Template for Notification of Positive Case to School Community

This letter template may be used to notify the school community of a COVID-19 positive case.

[Download an editable MS Word version this document to customize.](#)

[PRINT ON LETTERHEAD OF FACILITY]

[INSERT DATE]

To: Parents or Guardians of children who attend [INSERT NAME OF SCHOOL]

[INSERT NAME OF SCHOOL CHILD ATTENDS] is working with the New Mexico Public Education Department (NMPED) and New Mexico's Department of Health (NMDOH) because a staff member at our facility or a child who attends our school has tested positive for COVID-19.

This letter is to inform you about the next steps necessary to protect your child and our community from COVID-19. Per guidance from both NMPED and NMDOH, we are required to investigate to see who had "close contact" with the staff member or student who tested positive for COVID-19. A "close contact" is defined as being closer than six feet for a cumulative total of fifteen minutes or more over a 24-hour period to a person who is positive for COVID-19.

All students and staff who were in "close contact" with the infected individual are encouraged to be tested five days after close contact exposure to the positive COVID-19 individual. Close contacts must self-quarantine at home for 10 days, regardless of the test result, unless the close contact is vaccinated and asymptomatic (no quarantine required).

Exception: In the pre-K – 12 setting (including transportation), the close contact definition *excludes* students who were within 3 to 6 feet of an infected student (laboratory-confirmed or a [clinically compatible illness](#)) where

- » both students were engaged in consistent and [correct](#) use of [well-fitting](#) face [masks](#); and
- » other [K-12 school prevention strategies](#) (such as universal and correct mask use, physical distancing, increased ventilation) were in place in the K-12 school setting.

This exception does not apply to teachers, staff, or other adults in the pre-K – 12 setting.

In the meantime, if you or your child begin to develop symptoms of COVID-19, which are fever, chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of smell or taste, sore throat, congestion or runny nose, nausea or vomiting, diarrhea (<https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html>), please call your healthcare provider or the COVID-19 Hotline at 1-855-600-3453.

It is important that you call ahead to your healthcare provider before presenting to the physician's office, clinic, urgent care or emergency room so that they can be prepared for your arrival. They may also refer you to a testing clinic.

Areas of the school (including buses) in which the COVID-19 positive individual spent time will be cleaned, and those who were close contacts of the positive case will be notified.

Please continue to send your child to school unless you are notified that your child was a close contact of a positive COVID-19 individual, your child develops COVID-19 symptoms, or your child has a positive COVID-19 test. Likewise, your household members do not need to quarantine unless your child tests positive for COVID-19 or your household members are identified as a close contact of a positive COVID-19 individual.

You may call [INSERT NAME OF SCHOOL-BASED COVID POINT PERSON AT PHONE NUMBER] or NMDOH at (505) 827-0006, if you have questions.

Thank you for your support in these efforts.

Sincerely,

[SIGNED BY SCHOOL ADMINISTRATOR]

Useful Phone Numbers

Coronavirus

- **Coronavirus Health Hotline**—call for any health-related questions about the Coronavirus: 1-855-600-3453
- **Coronavirus Information Hotline**—call if you have any questions about school closures, job issues, eviction notices, etc.: 1-833-551-0518

Food

- **Assistance obtaining food for school-age children:** 1-505-827-6683
- **SNAP Benefits:** 1-800-283-4465
- **Special Supplemental Nutrition Program for Women, Infants, and Children**—questions on food or formula availability: 1-505-469-0929
- **Special Supplemental Nutrition Program for Women, Infants, and Children**—general questions: 1-866-867-3124

Mental Health

- **New Mexico Crisis and Access Line**—24/7 community and state resources for individuals, families, and agencies concerned with mental health: 1-855-662-7474 or 1-855-227-5485 (TTY)
- **National Hopeline Network:** 1-800-SUICIDE
- **Spanish-Language Suicide Hotline:** 1-866-331-9474
- **Suicide 24/7 Emergency Line:** 575-758-1125
- **Suicide Text Line:** 741741
- **University of New Mexico Mental Health:** 505-272-2800

Additional Resources

- **Alcoholics Anonymous:** 505-266-1900
- **Child Abuse Hotline:** 505-841-6100 or dial #SAFE from a mobile phone (note: #SAFE cannot receive text messages)
- **Domestic Violence Hotline:** 1-800-773-3645
- **Gambling Addiction:** 1-800-522-4700
- **National Child Abuse Hotline:** 1-800-24-ACHILD
- **National Child Abuse Prevention Line:** 1-800-CHILDREN
- **National Human Trafficking Hotline:** Call 1-888-373-7888 (TTY: 711) *Text 233733
- **National Domestic Violence Hotline:** 1-800-799-SAFE (7233)
- **National Domestic Violence Hotline (Español):** 1-800-942-6908
- **National Domestic Violence Hotline**—TTY, text telephone for deaf, hard of hearing, or speech-impaired): 1-800-787-3224
- **National Runaway Switchboard:** 1-800-637-0701 Ext. 118
- **National Sexual Assault Hotline:** 1-800-656-HOPE
- **National Teen Dating Abuse Help:** 1-866-331-9474
- **Native American Professional Parent Resources:** 505-345-6289
- **New Mexico Healthcare Worker and First Responder Support Line:** 855-507-5509
- **New Mexico Legal Aid:** 505-633-6694
- **New Mexico Rape Crisis Center:** 505-266-7711
- **New Mexico Substance Abuse Helpline:** 1-855-505-4505
- **Poison Control:** 1-800-222-1222
- **Pull Together:** 1-800-691-9067