



**TMCSEA**

**TAZEWELL-MASON COUNTIES SPECIAL EDUCATION ASSOCIATION**

**SCHRAMM EDUCATIONAL CENTER**

# **2020-2021 Phase 4 Transition Plan**

*November 19, 2020*

# Phase 4 Overview

In-person instruction may resume as regions transition to Phase 4. Districts must follow the Illinois Department of Public Health (IDPH) guidelines, which provide the following:

- Require use of appropriate personal protective equipment (PPE), including face coverings;
- Prohibit more than 50 individuals from gathering in one space;
- Require social distancing be observed, as much as possible;
- Require that schools conduct symptom screenings and temperature checks or require that individuals self-certify that they are free of symptoms before entering school buildings; and,
- Require an increase in schoolwide cleaning and disinfection.

All public and nonpublic schools in Illinois serving prekindergarten through 12th grade students must follow these guidelines.

It is important to note that these requirements are subject to change pursuant to updated public health guidance and changing public health conditions. School leaders should remain alert for any updates.

Schools and districts should also prepare for a return to remote instruction in the event of a resurgence of the virus or a second wave of it in the fall.

A region entering Phase 5 requires that a vaccine be developed to prevent additional spread of COVID-19, a treatment option be readily available that ensures health care capacity is no longer a concern, or no new cases reported over a sustained period.

Schools and districts are encouraged to provide completely in-person instruction for all students in Phase 4, provided that the school is able to comply with capacity limits and implement social distancing measures.

## Student Scheduling Considerations

IEP teams should consider appropriate in-person instruction for special education students. The U.S. Department of Education's guidance states, "Where, due to the global emergency and resulting closures of schools, there has been an inevitable delay in providing services – or even making decisions about how to provide services - Individualized Education Program (IEP) teams must make an individualized determination whether and to what extent compensatory services may be needed when schools resume normal operations." Students with 504 Plans or who receive English language services may also have a school-based team consider individualized transition plans to support the transition to in-person learning.

Schools and districts should review the [Centers for Disease Control and Prevention's](#) list of those who are at higher risk of severe illness if they are exposed to the coronavirus. Administration should work closely with school nurses and/or other health officials, as well as the student's medical provider, to determine safe alternatives to in-person instruction. Schools and districts should consider continuing remote instruction for medically fragile students, students at a higher risk of severe illness, and students who live with individuals at higher risk of severe illness for the duration of Phase 4. Considerations should include:

- Whether the student's medical condition is conducive to in-person attendance or if needs would best be met remotely.
- The student's behavior and capacities, including to control secretions, cover mouth/nose when sneezing and coughing, ability to maintain distance from other classmates, ability to tolerate wearing a face covering (may consider option of face shield instead), ability to wash hands with/without assistance, and ability/safety of use of hand sanitizer.
- Number of students per classroom and ability to maintain 6-foot distance, when possible.
- Consult with individual student health care providers, if applicable, and IEP teams to determine the best modality to meet students' needs on an individualized basis. Appropriate consents must be obtained for communication with outside providers. Review IEPs, 504 Plans, asthma action plans, or Individualized Health Plans to determine if these plans will need to be amended or modified.

Nurses may meet with individual teachers and staff members prior to the start of student attendance to review health concerns for medically high-risk students who will attend school in-person to ensure students will receive prompt treatment of health-related concerns (e.g., asthma action plans, diabetes care plans, and/or other emergency action plans for conditions that may be exacerbated by chronic medical conditions). Should the student with a disability who is medically-fragile or immunocompromised return to in-person instruction, special cleaning needs and any personal protective equipment (PPE) requirements to ensure student safety will be considered. Communication with parents early and often about the process for return to in-person instruction and any additional considerations to meet the unique needs of the student will occur. Information shall be provided on a need-to-know basis and not through a health condition list that is distributed across the building, in accordance with the Family Educational Rights and Privacy Act, the Illinois School Student Records Act, the Health Insurance Portability and Accountability Act, and the Americans with Disabilities Act, as applicable.

The CDC also recommends, where possible, that teachers rather than students move between classes. See <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/schools.html>. Livestreaming class lessons using virtual meeting programs (Zoom, Google Meets, etc.) may be considered to provide students in different classrooms or at home with synchronous access to the lesson. Similarly, the synchronous lesson could be recorded and used for asynchronous learning opportunities.

# Student Attendance

Schramm Educational Center students will receive special education services in-person and/or remotely. In-person instruction will take place on alternating days from 8:30am-2:00pm during Phase 4, or until further notice. Beginning the week of November 16, the hours for in-person instruction will be 8:30am-2:30pm. We will continue to revisit this plan throughout Phase 4 to determine if additional in-person days can be offered.

- The following member district students will receive in-person instruction on Tuesdays & Thursdays (beginning on Thursday, August 20): Districts #50, 51, 52, 98, 102, 108, 137, 189, 303, 308; and these resident district students will receive remote instruction on Mondays, Wednesdays, and Fridays.
- The following member district students will receive in-person instruction on Wednesdays & Fridays (beginning on Friday, August 21): Districts #76, 86, 126, 191, 309, 701, 702, 703, 709; and these resident district students will receive remote instruction on Mondays, Tuesdays, and Thursdays.

Full-time remote instruction for Schramm Educational Center students has been implemented from Tuesday, December 1, through Friday, January 8. During the week of January 11, students will resume in-person learning.

The TMCSEA/Schramm Educational Remote and Blended Remote Learning Plan will be posted at [www.tmcsea.org](http://www.tmcsea.org). Remote instruction will occur through a mutually agreed upon Individual Remote Learning Plan developed in consultation with parents/guardians and on-going documentation recorded in a Remote Service Log for each student. Daily attendance and engagement of students should be expected whether students are participating in classes in-person or remotely. Staff should make daily contact with all students and families, especially those who are not in attendance or not engaging in classes, whether in-person or remotely. All Schramm Educational Center Staff should report to work in-person daily, even on remote instruction days during Phase 4, or until further notice. A Blended Remote Learning Planning Day will be utilized for Schramm Educational Center staff on August 19.

All teachers and school staff should keep in mind state laws mandating the reporting of child abuse and neglect and the Children's Advocacy Centers of Illinois' helpful tips for protecting students at [www.isbe.net/Documents/CACI-Essential4kids-Schools.pdf](http://www.isbe.net/Documents/CACI-Essential4kids-Schools.pdf). View joint guidance from ISBE and DCFS for further outreach if a school has not made contact with a student for more than five days at [www.isbe.net/Documents/DCFS-ISBE-Student-Wellness-Visit.pdf](http://www.isbe.net/Documents/DCFS-ISBE-Student-Wellness-Visit.pdf).

## Calendar Considerations

Considerations to keep in mind when creating school calendars include:

- Once declared, Remote Learning Days or Blended Remote Learning Days will be implemented in any of grades prekindergarten through 12 as days of attendance and shall be deemed pupil attendance days for calculation of the length of a school term under Section 10-19 of this Code.
- Four Teacher Institute Days are available to support the transition from remote learning at

the beginning of the year.

- PA 101-0643 allows every school and district to utilize up to five total Remote and Blended Remote Learning Planning Days.
- A return to full Remote Learning Days may be necessary in a region if the region returns to a lower phase by declaration of the Governor due to public health indicators.
- Integrating periodic School Improvement Days may provide the necessary time to “review and amend its Remote and Blended Remote Learning Day Plan, as needed, to ensure the plan meets the needs of all students,” as required by PA 101-0643, and adjust accordingly.

## **Instructional Recommendations**

### **School Events During Phase 4**

All Community-Based Instruction (CBI) and Community-Based Recreation (CBR) Trips will be cancelled, and students will not work in community settings. Large group events including Homecoming, school dances, and holiday programs will not be held. While IEP meetings may occur during Phase 4 in-person, we are encouraged to hold these meetings remotely. School tours and visitors will be on a limited basis and require administrator approval.

### **Field Trips**

Field trips are cancelled until state and local health officials have determined that it is safe to resume them. The CDC recommends pursuing virtual activities and events in lieu of field trips. When safe to resume, allow minimal interaction of different groups of students. Ensure IDPH requirements for social distancing, capacity limits, hand hygiene, and PPE both at the field trip destination and during travel to and from the location are met.

### **Assessing Students’ Skill Levels**

Teachers and related service personnel should identify IEP goals/objectives that were not covered during remote learning. Data will be reviewed from remote learning days and collected upon student return to school based on current progress of IEP goals/objectives for appropriate continuation of educational programming and services. Some regression during remote learning is expected, and collaboration between staff and parents will take place on an individual basis to address learning loss. IEP team meetings will be scheduled as needed, and student performance data and Progress Reports will be shared with parents.

### **Instructional Best Practices for Maintaining Social Distancing**

To help students comply with social distancing as much as possible, consider revising activities that combine classes or grade levels. Teachers should rotate instead of the students when possible. Moving class and/or therapy activities outdoors if weather and safety considerations permit is encouraged. Ensure to the greatest extent possible that students have access to their own set of manipulatives or that shared items are sanitized between uses.

## **Social Distancing in Schramm Educational Center Classrooms**

Attention to our learners with special needs is especially important when considering social events that prepare and orient them to the routines, schedules, and patterns of their school environment that may not be possible as usual. Students may struggle with understanding and complying with social distancing and wearing face coverings. Teach, model, and reinforce healthy hygiene habits and social skills. Create a classroom environment that promotes positive staff and student relationships that supports student social-emotional well-being and self-esteem. Students should remain in small groups with the same students and remain 6 feet apart as much as possible. Having instruction and/or therapy outside may help with social distancing requirements. Arrange developmentally appropriate activities for smaller group activities. Staff should rearrange furniture & play spaces to meet social distancing requirements, when possible. Staff should implement strategies to model and reinforce social and physical distancing and movement.

Suggestions include:

- Use carpet squares, mats, trays, or other visuals for spacing.
- Model social distancing when interacting with children, families, and staff.
- Create and develop a social narrative/video model around social distancing, as well as hand washing, proper etiquette for sneezes, coughs, etc.
- Give frequent verbal and/or visual reminders to children.
- Post visual supports within the school building to give constant reminders.
- Offer more opportunities for individual play and solo activities, such as fine motor activities (e.g., drawing, coloring, cutting, puzzles, and other manipulatives).
- Plan activities that do not require close physical contact between multiple children. Keep groups separate for special activities, such as Adapted PE and Recreation/Leisure.
- Stagger indoor and outdoor play and adjust schedules to reduce the number of children in the same area.

## **Special Education Considerations**

Districts remain responsible for ensuring that special education students receive a free appropriate public education. They are required to address the individual needs of students eligible for special education services. Districts must adhere to timelines for annual IEP meetings and required evaluations. There continues to be limited flexibility from complying with federal and state laws. All Individuals with Disabilities Education Act and Section 504 timelines remain in effect. IEP teams should meet to determine whether any amendments to students IEPs are necessary to address students' current levels of performance.

IEP teams must make individualized determinations regarding placement and where special education students receive services. Students must receive education in their least restrictive environment, according to federal and state laws. Staff, therapists, and paraprofessionals may be able to work in person with students if appropriate safety measures are in place.

## **Technology**

TMCSEA/Schramm Educational Center Administration will collaborate with resident districts to provide students and families with the technology devices and internet access necessary to successfully participate in remote learning. TMCSEA/Schramm Educational Center must be prepared for a return to full remote instruction in the event of a resurgence of the virus or a second wave of it in the fall. Some students and families may still lack internet access at home despite best efforts. Consider providing students who have a device, but not internet access, with coursework loaded on a flash drive or other similar file storage device. Implement a system to provide students with the necessary videos, worksheets, and other resources to complete their work at home, turn in their assignments, and obtain new work.

Individual technology devices can also be useful in the classroom, given the restrictions in Phase 4 on sharing items. Meaningful integration of technology tools during daily instruction will facilitate learning and provide students with opportunities to become familiar with the features of online programs and technology devices. Brief instructional videos or written instructions to students and families may be provided to facilitate troubleshooting at home.

## **Health and Safety Protocols IDPH Guidance**

Staff and students will be proactively prepared to prevent the spread of COVID-19 or any other infectious disease. All employees will be trained on health and safety protocols related to COVID-19 prior to resuming in-person instruction. TMCSEA/Schramm Educational Center will refer to recommendations and strategies from the CDC: [Guidance for Businesses and Employers](#) and [Considerations for Schools for guidance](#).

The Families First Coronavirus Relief Act (FFCRA) provides employees with additional paid leave benefits and expanded family and medical leave for reasons related to the COVID-19 pandemic. These additional benefits are available from April 1, 2020, through December 31, 2020. Employees that have been employed for at least 30 days are eligible for up to 12 weeks of expanded family and medical leave where an employee is unable to work (remotely or in-person) due to a need to care for a minor child of the employee whose school or daycare is closed or unavailable for reasons related to COVID-19. Staff should refer to the TMCSEA Employee Handbook regarding Expanded Family & Medical Leave and FFCRA Paid Sick Leave.

## **Preparing for When a Student or Staff Member Becomes Sick**

TMCSEA/Schramm Educational Center will be prepared and able to respond effectively when there is a case within the school community, whether it be a student or staff member participating in allowable activities. TMCSEA Director, Program Coordinator, and/or designee will communicate with families and staff that any individual who tests positive for COVID-19 or who shows any signs or symptoms of illness should stay home. Families and staff should also report possible cases to the school where the individual attends school or works to initiate contact tracing. Procedures will be followed from the IDPH *Public Health Guidance for K-12 Schools & Child Care Programs for Addressing Suspect/Confirmed COVID-19 Cases* and/or the following local protocol.

**TMCSEA/SCHRAMM EDUCATIONAL CENTER  
COVID-19 QUARANTINE PROTOCOLS**

**POSITIVE TEST, SYMPTOMATIC**

- Isolate at home for 10 days from the date symptoms began, AND
- Fever-free without fever-reducing medication for 24 hours, AND
- Other symptoms have improved for 24 hours.
- A release letter from the local health department is required prior to returning to school/work.

**POSITIVE TEST, ASYMPTOMATIC**

- Isolate at home for 10 days from the day the test was taken. If the individual does not develop symptoms, he/she may return 10 days after the positive test was taken.
- If the individual develops symptoms, then isolation time starts on day 1 of symptoms.
- Isolate at home for 10 days from the date symptoms began, AND
- Fever-free without fever-reducing medication for 24 hours, AND
- Other symptoms have improved for 24 hours.
- A release letter from the local health department is required prior to returning to school/work.

**TESTED NEGATIVE, BUT SYMPTOMATIC**

- Isolate at home until respiratory symptoms have improved, AND
- Fever-free without fever-reducing medication for 24 hours.

**UNTESTED, SYMPTOMATIC (WITHOUT DIAGNOSTIC TESTING OR CLINICAL EVALUATION)**

- Isolate at home for 10 days from the first day symptoms appeared, which includes household members, AND
- Fever-free without fever-reducing medication for 24 hours, AND
- Other symptoms have improved for 24 hours.

**SYMPTOMATIC, UNTESTED, WITH A CONFIRMED ALTERNATE MEDICAL EXPLANATION**

(strep, influenza, or other non-COVID- related illness, as determined by a physician)

- May return to school after 24 hours resolution of fever without the use of fever-reducing medication, AND
- Healthcare provider must submit a letter stating the student or staff member has an alternate diagnosis and the provider believes it is appropriate for him/her to return to school.

**HAVING CLOSE CONTACT TO SOMEONE WITH A CONFIRMED POSITIVE COVID-19 CASE**

(Close contact means being within 6 feet for more than 15 minutes of someone who tested positive, regardless of whether or not a cloth face covering was worn.)

**NOT LIVING WITHIN THE SAME HOUSEHOLD AS THE POSITIVE CASE:**

- Quarantine for 14 days after the last close contact date before returning to school.
- Must remain symptom-free. If an individual develops symptoms during the quarantine:
  - Isolate at home for 10 days from the first day symptoms appeared, AND
  - Fever-free without fever-reducing medication for 24 hours, AND
  - Other symptoms have improved for 24 hours.
- Those in close contact should consult their healthcare provider for further guidance regarding testing options.
- A release letter from the local health department is required prior to returning to school/work.

**LIVING WITHIN THE SAME HOUSEHOLD AS THE POSITIVE CASE:**

- If the one in close contact is quarantining within the same household as the person testing positive, the quarantine period is extended to 14 days after person testing positive completes his/her isolation period.
- If the close contact becomes positive and/or develops symptoms, the isolation/quarantine period may change.
- A release letter from the local health department is required prior to returning to school/work.

Currently, known symptoms of [COVID-19](#) are fever, cough, shortness of breath or difficulty breathing, chills, fatigue, muscle and body aches, headache, sore throat, new loss of taste or smell, congestion or runny nose, nausea, vomiting, or diarrhea.

Attendance personnel should request specific symptom reporting when absences are reported along with COVID-19 diagnoses and COVID-19 exposure. Information should be documented and shared with the health staff or other appropriate personnel and the local health department.

In accordance with state and federal guidance, school community members who are sick should not return to school until they have met criteria to return. A symptom checklist for families and staff will be used to determine if they are well enough to attend that day. CDC and IDPH guidelines for students who were suspected of having COVID-19, whether they were tested or not, state that 24 hours must elapse from resolution of fever without fever-reducing medication and 10 days must pass after symptoms first appeared. It is recommended that medically fragile and immunocompromised students consult their medical provider prior to attending school.

Students or staff returning from illness related to COVID-19 should call to check in with the school nurse, Program Coordinator or Director (if a nurse is unavailable) following quarantine.

Any individual within the school environment who shows symptoms will be immediately separated from the rest of the school population. Individuals who are sick will be sent home. If emergency services are necessary, call 911. When interacting with students or staff who may be sick, school nurses and personnel should follow CDC guidance on [standard and transmission-based precautions](#).

TMCSEA/Schramm Educational Center has designated a safe area to quarantine any individuals who are experiencing COVID-19-like symptoms and may be awaiting pickup/evaluation. Students should never be left alone and must always be supervised while maintaining necessary precautions. This designated area is the Schramm Educational Center Warm Water Therapy Pool (Room 140).

Any areas of the school used by a sick person will be closed off and not used until these areas have been properly cleaned and disinfected. Open windows to increase air circulation in the area. It is advised by the CDC to wait at least 24 hours before cleaning and disinfecting; if 24 hours are not possible, wait as long as possible. Clean and disinfect all areas, such as offices, bathrooms, common areas, shared electronic equipment, etc., used by the person who is sick. Vacuum the space, if needed, with a high-efficiency particulate air (HEPA) filter. Do not vacuum a room or space that has people in it. Wait until the room or space is empty to vacuum, such as at night, and temporarily turn off room fans and the central HVAC system that services the room or space, so that particles that escape from vacuuming will not circulate throughout the facility. The area can be opened for use once it has been appropriately disinfected. Ensure cleaning products are stored and used a safe distance away from children and staff.

Individuals who did not have close contact with the person who is sick can return to work immediately after disinfection. Those who had contact with someone who tested positive for COVID-19 or is suspected of having COVID-19 infection should isolate at home and monitor symptoms for 14 days. Close contact means the individual was within 6 feet of the individual with symptoms for more than 15 minutes. Remote instruction will be provided to students who are self-quarantining, if they are well

enough to engage in learning. Teachers and staff who are self-quarantining may continue to work remotely if they are well enough to do so. Additional cleaning and disinfection is not necessary if more than seven days have elapsed since the person who is sick visited or used the school. Continue routine cleaning and disinfection. This includes everyday practices that schools normally use to maintain a healthy environment.

## Hand Hygiene

TMCSEA/Schramm Educational Center encourages frequent and proper handwashing. Availability of supplies, such as soap and paper towels, hand sanitizer, etc., for classrooms, therapy rooms and in all common areas of the building will be provided. Cloth towels should not be used. Handwashing with soap and water is always the first recommended line of defense, but where this is not feasible or readily accessible, the use of hand sanitizer with at least 60% alcohol may be used. Any students or staff members with sensitivities or allergies to hand sanitizer or soap should notify their Program Coordinator to ensure easy access to alternative handwashing stations.

Hands should be washed often with soap and water for 20 seconds. It is recommended that hand hygiene is performed upon arrival to and departure from school; after blowing one's nose, coughing, or sneezing; following restroom use; before food preparation or before and after eating; before/after routine care for another person, such as a student; after contact with a person who is sick; upon return from the playground/physical education; and following glove removal. "Hot spots" where germ transmission may easily occur will be identified by TMCSEA Head of Maintenance and Administration to ensure hand sanitation/hand washing supplies are readily available.

Additionally, recommendations for safe hand sanitizer use will be adhered to, including:

- Alcohol-based hand sanitizers will be used under adult supervision with proper child safety precautions and stored out of reach of young children to reduce unintended, adverse consequences. It is necessary to ensure that students do not ingest hand sanitizer or use it to injure another person.
- Alcohol-based hand sanitizers must be properly stored – which includes away from high temperatures or flames – in accordance with National Fire Protection Agency recommendations.
- Hand sanitizers are not effective when hands are visibly dirty.
- Alcohol-based hand sanitizers do not remove allergenic proteins from the hands.
- Staff preparing food in the cafeteria/kitchen should ALWAYS wash their hands with soap and water. The IDPH Food Service Sanitation Code does not allow persons who work in school cafeteria programs to use hand sanitizers as a substitute for handwashing.

Staff and students will be educated on healthy hygiene and handwashing to prevent the spread of infection. Staff and students will be directed and encouraged to avoid touching the face (eye, nose, mouth) to decrease the transmission of COVID-19 or other infectious diseases.

## Face Coverings

All individuals in school buildings, including all public and nonpublic schools that serve students in prekindergarten through grade 12, must wear face coverings at all times unless they are younger than 2 years of age; have trouble breathing; or are unconscious, incapacitated, or otherwise unable to remove the cover without assistance. Face coverings must be worn at all times in school buildings even when social distancing is maintained. Face coverings do not need to be worn outside if social distance is maintained. Physicians' notes are required for students and staff who are not able to wear a face covering due to trouble breathing.

Consideration should be given to how staff wearing face coverings will impact students with disabilities, particularly those with hearing loss or communication deficits. Adapted face coverings, such as plastic face shields, may be required to allow for students to read lips and facial expressions. Assistive technology or other supports may also be necessary to effectively communicate with students with disabilities.

IDPH has communicated that face coverings and social distancing are the goal whenever and wherever possible. Face shields have not been deemed effective for source control and are only to be used when other methods of protection are not available or appropriate. In cases where individuals need facial visualization for instruction and communication, IDPH recommends video instruction to promote social distancing. If video instruction is not available or appropriate, face shields may be used with the understanding that they have not been deemed effective for source control. As such, heightened attention and adherence to 6-foot social distancing is critical for individuals using face shields. Examples of limited situations when face shields may be necessary, if video instruction is not possible, include for teachers whose students may need to see their mouths to facilitate communication.

IDPH also appreciates that there may be a small minority of individuals who have a medical contraindication to using face coverings. If face shields can be tolerated, face shields might be utilized in these situations, understanding their limitations and the heightened need for strict adherence to social distancing. ISBE recommends that schools review information, such as a physician's note, documenting the medical contraindication for any individual who is not able to wear a face covering.

Students with disabilities who are unable or refuse to wear a face covering should be provided with reasonable accommodations under the Americans with Disabilities Act (ADA). At TMCSEA/Schramm Educational Center, we recognize students with significant disabilities who do not have a medical reason may experience difficulty tolerating face coverings due to the extent of their sensory issues, intellectual and/or developmental disabilities. If there is no medical reason for the student to refrain from wearing a face mask, staff will attempt multiple times to acclimate the student to wearing it. This might occur over multiple days in an effort to gradually increase the student's tolerance to face coverings. If a student will not tolerate a face mask, staff will implement school-wide protocol to document their aversion to face coverings, and then proceed accordingly. Ultimately, if it is determined that requiring a face covering is not feasible for individual students, they will be educated without a mask with documentation approved by the Schramm Program Coordinator and kept on file in the school office. While the guidance is clear that masks are generally required, we will balance this requirement with the very real needs and unique circumstances of our special student populations. There is significant evidence that face coverings provide protection and decrease the spread of

COVID-19. Ensure that the face covering fully covers the mouth and nose, and that the covering fits snugly against the sides of the face with no gaps. Reusable face coverings should be machine washed or washed by hand and allowed to dry completely after each use. TMCSEA/Schramm Educational Center maintains a supply of disposable face coverings in the event that a staff member, student, or visitor does not have one for use.

Additionally, pay special attention to putting on and removing face coverings for purposes such as eating. After use, the front of the face covering is considered contaminated and should not be touched during removal or replacement. Hand hygiene should be performed immediately after removing and after replacing the face covering. For safe face covering instructions, go to: <https://www.cdc.gov/coronavirus/2019-ncov/downloads/cloth-face-covering.pdf>.

## **Social Distancing**

Staff should ensure 6-foot physical distance from other persons as much as possible. The expectation pertains to students and staff members in all areas and settings to the greatest extent possible. The staff workroom will be arranged to facilitate social distancing, additional areas will be available for staff including the Multi-Purpose Room, and break times should be staggered to minimize eating with mask off near others.

Staggering schedules for arrivals/dismissals, transition times, lunch, etc. will be determined by the Schramm Program Coordinator with input from staff to ensure safety. Staff should abstain from any unnecessary physical contact that does not pertain to students' direct personal care, instruction/therapy, and/or safety such as handshakes, high fives, hugs, etc.

## **Symptom Screenings**

TMCSEA will require self-certification and verification for all staff and visitors entering the building. Schramm Educational Center staff will conduct temperature/symptom screenings for students entering the building. When staff unload students from the bus, each student's temperature must be taken and documented. Individuals who have a temperature of 100.4 degrees Fahrenheit/38 degrees Celsius or greater, or currently known [symptoms of COVID-19](#), such as fever, cough, shortness of breath or difficulty breathing, chills, fatigue, muscle and body aches, headache, sore throat, new loss of taste or smell, congestion or runny nose, nausea, vomiting, or diarrhea, may not enter buildings. Individuals who exhibit symptoms should be referred to a medical provider for evaluation, treatment, and information about when they can return to school.

## **Personal Protective Equipment**

Appropriate personal protective equipment (PPE) will be available to and used by staff, as needed, based on exposure risk. Training to staff will be provided prior to the start of student attendance on the proper use of PPE, including putting on and removing PPE. In addition, training will also include directions on the proper disposal of PPE since inappropriate application or removal of PPE can increase the transmission. Employers are required to comply with

Occupational Safety and Health Administration [standards](#) on bloodborne pathogens, including the [proper disposal of PPE and regulated waste](#). Staff should request any specific PPE needs to their Program Coordinator through the established purchase requisition procedure.

## **Schoolwide Cleaning and Disinfection to Prevent the Spread of Infection**

Sanitation procedures per recommendations of the CDC, IDPH, and local health departments have been established. More frequent cleaning and disinfection is necessary to reduce exposure. Visibly dirty areas will be scrubbed to remove visible dirt/soilage and then an approved disinfectant should be used to *kill* germs. Frequently touched surfaces (e.g., door handles/knobs, desktops/tabletops, countertops, light switches, pencil sharpeners, computer keyboards, hands-on learning items, phones, toys, cubbies/coat and backpack areas, sinks and faucets, buses/vans) will be cleaned multiple times on a daily basis. Cloth toys or other cloth material items that cannot be disinfected should not be used. Soft surfaces, such as carpeted areas and rugs will be cleaned with an approved soap/disinfectant for the surface area, laundered at high temperatures, if possible, and dried. If cleaning with soap and water is not feasible, a household disinfectant that has been registered with the Environmental Protection Agency (EPA) will be used and contact times on the label will be followed. Vacuum as usual.

[EPA-approved disinfectants](#) for use against the coronavirus are available to staff responsible for cleaning.

- Gloves and other appropriate [Personal Protective Equipment](#) must be used during cleaning and disinfection. Appropriate PPE will be made available to be used by staff, as appropriate.
- Keep all disinfectants out of the reach of children.
- Do not mix bleach or other cleaning products and disinfectants together.
- Always follow label directions.
- Allow the required wet contact time. All disinfectants used at TMCSEA/Schramm Educational Center are EPA approved; however, wet contact times may vary by brand. Staff should consult with maintenance/custodial staff regarding any questions related to proper use and/or wet contact time for various disinfectants. The following are commonly used disinfectants, which have been labeled with wet contact time in various locations throughout the building:
  - Lysol Wipes = 2 minutes wet contact dwell time
  - Renegade = 3 minutes wet contact dwell time
  - Monk Wipes = 4 minutes wet contact dwell time

## **Infection Control Procedures for Specific Areas**

### **Classrooms**

It is recommended that teachers provide assigned seating areas for students and require students to remain in these seating areas to the greatest extent possible. If possible, rearrange furniture so that there is a 6-foot distance in all directions.

Build in time for hand hygiene and/or schedule hand hygiene breaks, including before/after eating snacks/meals and upon exiting and returning to the classroom. Adequate hygiene supplies, including tissues, hand sanitizer, extra face coverings, handwashing supplies, soap, paper towels, and gloves for staff, will be present in the classrooms.

Consider assigning classroom computers to minimize disease transmission. Computer keyboards and/or touchscreens can be difficult to clean, so consider utilizing keyboard covers to facilitate cleaning. Shared computers will have signs posted instructing proper hand hygiene before and after computer use, with handwashing facilities or hand sanitizers readily accessible.

Parents of students should discourage their children from bringing any toys from home to school. Students' personal items should be labeled and kept in a separate bag to ensure they remain separate from the belongings of other students.

## **Shared Objects**

Restrict or discourage the borrowing or sharing of any items. The [CDC](#) recommends that electronic devices, toys, books, and other games or learning aids not be shared. Electronics, including, but not limited to, tablets, touchscreens, keyboards, remote controls, lunchroom keypads, door entry systems, etc., should be cleaned before and after use. Consider using a wipeable cover on electronics and clean per the manufacturer's instructions or use wipes or sprays of at least 70% alcohol and dry completely.

It is recommended that items that must be shared or communally used be cleaned after each use and that the individuals perform hand hygiene between use. Utilization of hand sanitizer before and after use of books is recommended.

Be mindful of items like play food, dishes, and utensils that are more likely to be placed in a student's mouth. Use materials that can be thrown out, cleaned after one use, or labeled for individual student use. Machine-washable cloth toys should be used by one individual at a time and cleaned in between uses or **not be used at all**.

## **Traffic Flow and Hallways**

Face coverings must be worn at all times. The hallway procedures will be followed to adhere to social distancing requirements and IDPH limitations on gathering sizes, when possible:

- Limit number of persons within hallways at any given time to the greatest extent possible.
- Limit required movement of students between classes. Consider having staff rotate through classes rather than requiring movement/mixing of student groups.
- Place floor markings to delineate 6-foot distance between students in locations where they line up.

## **Restrooms**

Maintain social distancing in restroom areas and escort individual students to the restroom area to monitor social distancing, as appropriate. Proper sanitation of restrooms will be completed. Signs encouraging hand hygiene procedures will be posted in the bathrooms, hallways, classrooms, and other areas. See [Centers for Disease Control and Prevention: Handwashing: Clean Hands Save Lives](#) for free resources. Encourage students to properly wash hands following restroom use. Availability of supplies, such as soap and paper towels will be maintained.

## **Drinking Fountains**

During Phase 4, indoor building and outdoor playground water fountains will be shut off. Staff and students may obtain water from potable water dispensers throughout the building. The use of reusable water bottles is encouraged, and staff & students should adhere to the following:

- Do not place your mouth on the spout of the fountain or allow your water bottle to come into contact with the nozzle when refilling.
- Ensure the appropriate water flow height to discourage students placing the mouths on the spout.
- Test the water flow and let the water flow for 10 seconds to allow for fresh, clean water to come through prior to drinking.
- If the fountain requires you to push a button or lever, clean the surface before and after or use your elbow.
- Clean your hands afterward with an alcohol-based rub or wash with soap & water.

[CDC guidance](#) on flushing water systems and other measures to prevent the spread of mold and Legionella will be followed. Maintenance staff will ensure that all water systems and features (e.g., sink faucets, drinking fountains, decorative fountains) are safe to use after a prolonged facility shutdown. Drinking fountains will be cleaned and sanitized.

## **Cafeteria/Food Service**

The Schramm Program Coordinator will consider the number of students and adults in the cafeteria during each lunch period to ensure that it does not exceed that maximum gathering size per the Restore Illinois plan (no more than 10 individuals during Phase 3 and no more than 50 individuals during Phase 4, if possible). Eating lunch in classrooms, alternate scheduling and/or adding meal service times to adhere to capacity limits will be considered and a lunch plan will be developed by the Schramm Program Coordinator with input from staff. The Dining Program will be discontinued throughout Phase 4.

The release of classrooms to the cafeteria may be staggered to help ensure social distancing. Delivering meals to classrooms or having students eat outdoors while ensuring social distancing will be options as well. If students eat in the classroom, an allergy-free area will be provided if needed. The room should be disinfected after eating prior to resuming classroom activities.

Meals will be individually plated, and sharing of food and utensils is prohibited. Students will be served all meal items, rather than having students help themselves. Regular precautions will be taken regarding [food allergies](#) and dietary needs. Disposable food service items (e.g., utensils, dishes) may be used. If disposable items are not available, all non-disposable food service items will be handled with gloves and washed with dish soap and hot water or in a dishwasher.

Areas where students consume meals will be thoroughly cleaned and disinfected between groups and after meals. Food service personnel must use appropriate PPE, including gloves and face coverings, while preparing and distributing food. Frequent hand hygiene is required. Individuals will [wash their hands](#) after removing their gloves or after directly handling food service items that have been used.

Hand hygiene must be performed prior to and after eating a meal or consuming any food items. Face coverings must be removed during eating, so it is important to ensure 6-foot distance between individuals as much as possible.

### **Administrative Offices and Staff Work Room/Lounges**

Nonessential visitors, volunteers, and activities involving external groups or organizations, will be discontinued and/or limited. Any visitors (if allowed) will be restricted to the main office area, when possible. Hand hygiene facilities or hand sanitizer will be readily available for visitors to use upon entry. Accurate records of visitors, including the individual's reason for visit, contact information, and all locations visited, in case contact tracing is needed, will be kept by the Administrative and/or Schramm Offices.

Outdoor material drop-off and electronic submission of documents is encouraged. Any IEP meetings, and other meetings between staff and visitors/families should be held remotely, to the greatest extent possible. However, if parents/guardians are unable to engage in a required meeting remotely, socially distanced in-person meetings may be held.

Employees such as related service providers may be given approval by the Director/Program Coordinator to work remotely when not providing direct services to students (i.e. - completion of paperwork, writing reports, etc.) to prevent crowding of office spaces. Employees working remotely will submit their time on the Remote Learning Log to Program Coordinators on a weekly basis. Employee workstations should be properly distanced to maintain a 6-foot distance, when possible. Readily accessible cleaning and disinfecting supplies, access to handwashing facilities or hand sanitizer, and gloves for employees will be provided. Custodial staff will maintain a regular cleaning and disinfection schedule of frequently touched items, and staff should clean their individual work stations at the end of the day.

Employees will be provided with a personal supply of office supplies to eliminate transmission through shared items, when possible. Any shared office supplies should be disinfected after each use. Staff workrooms must adhere to 6-foot distancing. Capacity limitations, depending on the size of the space and availability of seating will be posted. Additional building spaces may be utilized for staff to eat lunch in order to maintain social distancing. Cleaning supplies will be available and protocols established for cleaning frequently touched items, such as copy machines, table surfaces,

refrigerator door handles, microwaves, coffee makers, etc. Any items that cannot be properly cleaned and disinfected for reuse should be removed. Disposable plastic utensils will be provided. Signs regarding proper hand hygiene and other protocols will be posted. Staff should refrain from bringing in shared food and/or donation items to the staff workroom during Phase 4.

## **Student Transportation**

Districts should create procedures to assure compliance with all applicable expectations under state and federal guidelines. All individuals on a bus must wear a face covering, no more than 50 individuals should be on a bus at one time, and social distancing must be maintained to the greatest extent possible. Students must undergo symptom and temperature checks, which may include self-certification, before boarding a bus. These procedures may need to be updated regularly. Students and families should be aware of procedures and expectations regarding transportation.

Drivers and monitors must wear approved and appropriate PPE and perform regular hand hygiene. Drivers and monitors must undergo symptom and temperature checks or self-certify and verify that they are free of symptoms before the start of each workday. Drivers and monitors who have a temperature greater than 100.4 degrees Fahrenheit/38 degrees Celsius or symptoms of COVID-19 may not work. Drivers and monitors who become ill during their route should contact their supervisor immediately.

All individuals on a bus must wear a face covering. Student transportation should apply the most feasible social distancing guidelines. The [CDC recommends](#) that entities should “create distance between children on school buses ...when possible.” No more than 10 individuals may be on a vehicle at any one time during Phase 3. No more than 50 individuals may be on a vehicle at any one time during Phase 4. All physical changes to school transportation vehicles must meet Illinois Department of Transportation (IDOT) and Secretary of State rules and regulations.

Districts are encouraged to provide visual guides to ensure that students comply with expectations set forth by the IDPH (e.g., floor decals, colored tape, or signs to indicate where students should not sit or stand may be used to assist in compliance). Seating charts are also recommended. Seating arrangements with respect to social distancing can be adjusted for students who live in a household with other students. Schools and districts are encouraged to monitor students at school loading and unloading zones. IEP teams may meet to determine individual transportation needs for students requiring special accommodations.

Considerations should be given to the provision of appropriate supplies to prevent the spread of COVID-19 (e.g., hand sanitizers, gloves, face coverings, tissues, and trash receptacles). All required IDOT inspections should occur. In addition, sanitization should be completed daily or between use on all vehicles used for student transportation. Individuals should disinfect vehicles using only products that meet the EPA criteria and manufacturers’ guidelines.

## **Physical Education, Gymnasiums, and Pools**

Physical activity can support students' overall health and well-being and help reduce stress and anxiety. Face coverings must be worn. No more than 10 individuals may be in one space at any one time during Phase 3. No more than 50 individuals may be in one space at any one time during Phase 4. Activities must allow for 6-foot distance between students as much as possible. Games and activities that require any physical contact with another student must be avoided in order to comply with IDPH requirements. Whenever feasible and weather permitting, physical education activities will take place outdoors to allow natural social distancing. Hand shaking, high fives, or other physical contact is prohibited.

The use of shared equipment is not recommended. Any shared equipment must be cleaned between each student's use and disinfected at the end of each class. Exercise equipment should be cleaned and sanitized before and after each class with focus on frequently touched surfaces. Students and staff should perform hand hygiene at the start and end of each class period or when hands are visibly dirty. Students should also perform hand hygiene after the use of equipment.

[IDPH guidance](#) on swimming facilities has been reviewed. The Schramm Educational Center Warm Water Therapy Pool will be closed during Phase 4.

## **Illness and Diagnoses Monitoring**

TMCSEA/Schramm Educational Center will institute a tracking process to maintain ongoing monitoring of individuals excluded from school because they have COVID-19-like symptoms, have been diagnosed with COVID-19, or have been exposed to someone with COVID-19 and are in quarantine. Tracking ensures CDC and local health authority criteria for discontinuing home isolation or quarantine are met before a student or staff member returns to school. Tracking methods include checking in with the school nurse upon return to school to verify resolution of symptoms and that any other criteria for discontinuation of quarantine have been met. Tracking should take place prior to a return to the classroom. This process will be communicated to all members of the school community prior to the resumption of in-person learning.

Continual communicable disease diagnosis monitoring and the monitoring of student and staff absenteeism should occur through collaboration of those taking absence reports and school nurses. Employees and families must be encouraged to report specific symptoms, COVID-19 diagnoses, and COVID-19 exposures when reporting absences. TMCSEA/Schramm Educational Center will maintain a current list of community testing sites to share with staff, families, and students. TMCSEA/Schramm Educational Center will offer assistance to local health departments when contact tracing is needed after a confirmed case of COVID-19 is identified. This may include activities such as identifying the individual's assigned areas and movement throughout the building.

Confirmed cases of COVID-19 will be reported to the local health department by the school nurse or designee as required by the Illinois Infectious Disease Reporting requirements issued by IDPH. TMCSEA/Schramm Educational Center will inform the school community of outbreaks per local and state health department guidelines while maintaining student and staff confidentiality rights.

## **Mental Health**

Considerations have been given to the impact that COVID-19 has had on the mental health of faculty, staff, students, and their families. Resources and/or professional development will be offered to support the mental and emotional well-being of students and staff members. On July 16, 2020, the Federal Communications Commission (FCC) adopted rules to establish “988” as the new, nationwide, three-digit phone number for Americans in crisis to connect with suicide prevention and mental health crisis counselors.

## **Napping/Rest Time**

Children’s naptime mats and cots should be spaced at least [6 feet apart](#) as much as possible. Consider placing children head to toe to further reduce the potential for viral spread. Use bedding (sheets, pillows, blankets, sleeping bags) that can be washed [weekly](#). Keep each child’s bedding separate and stored in individually labeled bins, cubbies, or bags. Label cots and mats individually for each child.

## **Instructional (Self-Contained) Classrooms Housing Students Who Are Medically Fragile or May Have Behavioral, Developmental, or Emotional Challenges**

The risk of infectious disease exposure may be much higher for staff providing care for medically fragile students. Appropriate PPE for continuous wear and during procedures (e.g., gowns and face shields during aerosolizing procedures) will be provided. Maintaining strict social distancing will not likely be feasible due to the personal nature of common care and services, including feeding, toileting, suctioning, position changes, diaper changing, hand-over-hand assistance, physical therapy, occupational therapy. Appropriate PPE should be used in conjunction with appropriate hand hygiene and [standard precautions](#). Plan for acute respiratory treatment care using up-to-date standards of care. Nebulizer treatments and suctioning are identified by the CDC as aerosol-generating procedures and require an N95 mask fitted to the health care worker. See [CDC Guidance for Aerosol Generating Procedures](#).

## **Related Services for Students (OT/PT, Speech, Social Work Services, etc.)**

Itinerant teachers and visiting specialists must continue to provide services to students with disabilities as necessary to provide free appropriate public education (FAPE). In-person services should be coordinated to ensure adherence to social distancing and other health and safety guidelines. Services may be provided remotely as necessary, and telehealth visits may be considered, if feasible. The number of therapists in the therapy room may be limited for on-site visits, and an alternative space for movement may be considered. Face coverings must be worn and social distance must be maintained, when possible. Visual markers on the floor to aid in social distancing may be added. Materials (e.g., Lycra tunnel or other porous materials, sensory swing, carpet squares, foam items) must be cleaned and sanitized between uses with enough time to let the material properly dry. An alternate schedule/activities will be developed for Schramm Therapeutic Supports (STS).

On-site facility dog training visits may be conducted with Program Coordinator/Director approval. Facility Dog Procedures will be updated to adhere to increased health and safety guidelines related to COVID-19 during Phase 4 and implemented with approval from the Director.

In-person instruction at home is allowed for medically homebound students. Local public health officials may be consulted to ensure compliance with health and safety guidelines and procedures. TMCSEA Home Visit Procedures must be followed, which includes wearing masks, frequent hand washing, checking temperature before entering a student's home, and maintaining social distance while in the home. Find additional information on homebound instruction [here](#).

## **Health Offices**

An appropriate health office space should allow for 6-foot distancing between students, separation area for sick students, sink for hygiene, appropriate lighting, and proper ventilation. Consider proper ventilation; open windows for fresh air, when possible.

The Schramm Educational Center Warm Water Therapy Pool (Room140) is designated as a supervised quarantine space for students who are experiencing COVID-19-like symptoms and may be awaiting evaluation and/or pickup. Students must never be left alone and must be supervised at all times while maintaining necessary precautions within the quarantine space. Judgment of nursing professionals or Program Coordinator/Director (in the absence of a nurse) must determine who is placed in the quarantine space and the level of supervision (e.g., supervised by nurse or unlicensed personnel) required for persons within the quarantine space. Nursing documentation would reflect student placement in the quarantine space. Staff should refrain from using the pool room bathroom for personal use in Phase 4.

The quarantine space must be disinfected after it is occupied by a student and disinfected/sanitized daily. Only essential staff and students assigned to the space may enter. Students exhibiting COVID-19-like symptoms must wear a face covering unless medically contraindicated. Per [CDC Guidance](#), close off areas used by a sick person; do not use these areas until after [cleaning and disinfecting](#). Wait at least 24 hours before cleaning and disinfecting. If 24 hours is not feasible, wait as long as possible.

School nurses and/or the administrator/designee working with individuals with illness symptoms will be provided with appropriate PPE. School nurses should use PPE, including gloves and face coverings, when interacting with students and staff. Appropriate PPE should be used in conjunction with appropriate hand hygiene and [standard precautions](#). Personal care aides working with medically fragile students should wear PPE (e.g., face shields, face masks, and gloves).

Strategies will be implemented to limit visits from students, staff, and visitors; reduce health office congestion; decrease exposure to infection; and allow for separation. Staff should complete the Health Communication Forms or call the nurses' office for non-emergency health needs. This will ensure the capacity of the health office complies with social distancing measures. Staff and/or students with common health conditions or those who need basic first aid should not report to the health office but may be managed in the classroom/alternate setting. Staff will be provided with first aid supplies, such as bandages and gauze, in the classrooms. In certain situations, students may need to stay in place for an in-person evaluation by the school nurse.

Healthy students reporting to the health office for medical management, such as medications, tube feeding, assessment of injury, or first aid, must be treated in a separate clean designated area inside or outside the health office to prevent contact with potentially ill children. Nurses will designate a socially distanced area where specialized procedures, such as suctioning and tube feedings, will occur.

Up-to-date standards of care will be used for acute respiratory treatment. See [CDC Guidance for Aerosol Generating Procedures](#). Nebulizer treatments should be administered at home. Consult with a student's health care provider for alternate asthma medication delivery systems. Any asthma action plans should be reviewed prior to student arrival at school. Staff should review the signs and symptoms of respiratory distress, as well as how to respond to respiratory distress.

The health office will be routinely cleaned. High-touch surfaces in the health office must be cleaned daily with a disinfectant noted to *kill* the coronavirus. Hand hygiene is required between each student encounter.

Parents, guardians, or other authorized individuals should pick up ill students within a reasonable amount of time; students should not be allowed to utilize the school bus for the return to home.

TMCSEA/Schramm Educational Center maintains a nurse in our building, and a list of substitute nurses has been developed to provide nursing services in case of nurse absence, including prolonged absence due to COVID-19 diagnosis or exposure. In the absence of a nurse, the Program Coordinator/Director must determine who will be responsible for meeting the health-related needs of students and staff.

## **Playgrounds**

Playgrounds are closed during Phase 3. Playgrounds may be utilized during Phase 4; however, playground equipment that is used should be monitored, and the number of students using each piece of equipment should be limited. The Schramm Program Coordinator with input from staff will determine playground times to allow one class in a playground space at one time rather than multiple classes playing together. Appropriate cleaning of playground equipment will be maintained by custodial staff between use by each class. Any equipment/items that cannot be cleaned should not be utilized, and the sharing of toys is discouraged. High-touch surfaces made of plastic/metal, such as swings/slides, railings, and other play structures, will be cleaned routinely and disinfected as per the most recent [CDC guidance](#). Staff and students should perform hand hygiene prior to touching playground equipment and upon return from the playground.

## **Multi-Purpose Rooms**

The number of individuals in one space is limited to 10 or fewer during Phase 3 or 50 or fewer during Phase 4. The mixing of different classes of students in any space at one time will be limited. The multi-purpose room may be utilized as an alternative space to reduce the number of students in regular classrooms and maximize social distancing as determined by the Schram Coordinator. The multi-purpose room will be cleaned and sanitized daily and in between groups as much as possible.

## TMCSEA/Schramm Educational Center Symptom Self-Certification

IDPH requires that schools conduct symptom screenings and temperature checks **or** require that individuals self-certify that they are free of symptoms before entering school buildings. If schools and districts opt to use self-certification, they may determine the method of symptom self-certification that best fits their local context. Options include hard copy forms or web applications that may be completed on digital devices by students, staff, and other visitors each day that they will attend school in-person.

**Full name of individual wishing to enter the building:** \_\_\_\_\_

**Date:** \_\_\_\_\_

### **Evaluation Questions:**

1. Have you received a confirmed diagnosis for coronavirus (COVID-19) by a coronavirus (COVID-19) test or from a diagnosis by a healthcare professional in the past 10 days?
2. Have you had close contact with or cared for someone diagnosed with COVID-19 within the last 14 days?
3. Have you had close contact with or cared for a household/family member who is symptomatic without diagnostic testing or clinical evaluation and/or awaiting COVID-19 test results?
4. Have you experienced any cold or flu-like symptoms in the last 14 days (to include: fever or temperature of 100.4 degrees Fahrenheit/38 degrees Celsius or greater, new onset of moderate to severe headache, shortness of breath, new cough, sore throat, vomiting, diarrhea, abdominal pain from unknown cause, new congestion/runny nose, new loss of sense of taste or smell, nausea, fatigue from unknown cause, muscle or body aches)?

**How do you respond to these questions? (If you are able to answer "YES" to one or more of the above questions, select YES. If you are able to answer "NO" to all the questions, select NO.)**

**NO to all questions**     **YES to any one (or more) of the questions**

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If **NO** is selected: Based on your answers, you are **ALLOWED TO ENTER THE BUILDING**.

If **YES** is selected: Based on your answers, you are **NOT TO ENTER THE BUILDING**. Please contact your Program Coordinator or Director immediately.

**TMCSEA/Schramm Educational Center**  
**Student Symptom Self-Certification**

The Illinois Department of Public Health (IDPH) requires that schools conduct symptom screenings and temperature checks **or** require that individuals self-certify that they are free of symptoms before entering school buildings.

**Full name of student:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Evaluation Questions to be Completed by Parent/Guardian on behalf of Student:**

1. Have you received a confirmed diagnosis for coronavirus (COVID-19) by a coronavirus (COVID-19) test or from a diagnosis by a healthcare professional in the past 10 days?
2. Have you had close contact with someone diagnosed with COVID-19 within the last 14 days?
3. Have you had close contact with a household/family member who is symptomatic without diagnostic testing or clinical evaluation and/or awaiting COVID-19 test results?
4. Have you experienced any cold or flu-like symptoms in the last 14 days (to include: fever or temperature of 100.4 degrees Fahrenheit/38 degrees Celsius or greater, new onset of moderate to severe headache, shortness of breath, new cough, sore throat, vomiting, diarrhea, abdominal pain from unknown cause, new congestion/runny nose, new loss of sense of taste or smell, nausea, fatigue from unknown cause, muscle or body aches)?

**How do you respond to these questions? (If you are able to answer "YES" to one or more of the above questions, select YES. If you are able to answer "NO" to all the questions, select NO.)**

**NO to all questions**     **YES to any one (or more) of the questions**

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***If NO is selected: Based on your answers, your student is ALLOWED TO BOARD THE BUS AND ENTER THE BUILDING.***

***If YES is selected: Based on your answers, your student is NOT TO BOARD THE BUS OR ENTER THE BUILDING. Please contact the Schramm Nurse at 309-346-1186.***

**\*Morning Temperature Check to be Completed by Transportation Staff on behalf of Student:**

\_\_\_\_\_ **Degrees** - If temperature is 100.4 degrees Fahrenheit/38 degrees Celsius or greater, the student may NOT board the bus or enter the building. Please contact the Schramm Nurse.

Name of Transportation Staff Verifying Temperature Check: \_\_\_\_\_

***\*Note: This completed form should be brought to Schramm Educational Center daily when transporting the student to school and returned to Schramm Staff when unloading the bus each morning.***

**TMCSEA/SCHRAMM EDUCATIONAL CENTER**  
**COVID-19 QUARANTINE PROTOCOLS**

**POSITIVE TEST, SYMPTOMATIC**

- Isolate at home for 10 days from the date symptoms began, AND
- Fever-free without fever-reducing medication for 24 hours, AND
- Other symptoms have improved for 24 hours.
- A release letter from the local health department is required prior to returning to school/work.

**POSITIVE TEST, ASYMPTOMATIC**

- Isolate at home for 10 days from the day the test was taken. If the individual does not develop symptoms, he/she may return 10 days after the positive test was taken.
- If the individual develops symptoms, then isolation time starts on day 1 of symptoms.
- Isolate at home for 10 days from the date symptoms began, AND
- Fever-free without fever-reducing medication for 24 hours, AND
- Other symptoms have improved for 24 hours.
- A release letter from the local health department is required prior to returning to school/work.

**TESTED NEGATIVE, BUT SYMPTOMATIC**

- Isolate at home until respiratory symptoms have improved, AND
- Fever-free without fever-reducing medication for 24 hours.

**UNTESTED, SYMPTOMATIC (WITHOUT DIAGNOSTIC TESTING OR CLINICAL EVALUATION)**

- Isolate at home for 10 days from the first day symptoms appeared, which includes household members, AND
- Fever-free without fever-reducing medication for 24 hours, AND
- Other symptoms have improved for 24 hours.

**SYMPTOMATIC, UNTESTED, WITH A CONFIRMED ALTERNATE MEDICAL EXPLANATION**

(strep, influenza, or other non-COVID- related illness, as determined by a physician)

- May return to school after 24 hours resolution of fever without the use of fever-reducing medication, AND
- Healthcare provider must submit a letter stating the student or staff member has an alternate diagnosis and the provider believes it is appropriate for him/her to return to school.

**HAVING CLOSE CONTACT TO SOMEONE WITH A CONFIRMED POSITIVE COVID-19 CASE**

(Close contact means being within 6 feet for more than 15 minutes of someone who tested positive, regardless of whether or not a cloth face covering was worn.)

**NOT LIVING WITHIN THE SAME HOUSEHOLD AS THE POSITIVE CASE:**

- Quarantine for 14 days after the last close contact date before returning to school.
- Must remain symptom-free. If an individual develops symptoms during the quarantine:
  - Isolate at home for 10 days from the first day symptoms appeared, AND
  - Fever-free without fever-reducing medication for 24 hours, AND
  - Other symptoms have improved for 24 hours.
- Those in close contact should consult their healthcare provider for further guidance regarding testing options.
- A release letter from the local health department is required prior to returning to school/work.

**LIVING WITHIN THE SAME HOUSEHOLD AS THE POSITIVE CASE:**

- If the one in close contact is quarantining within the same household as the person testing positive, the quarantine period is extended to 14 days after the person testing positive completes his/her isolation period.
- If the close contact becomes positive and/or develops symptoms, the isolation/quarantine period may change.
- A release letter from the local health department is required prior to returning to school/work.

# References

- Ahn, J., & McEachin, A. (2017, January 1). Student enrollment patterns and achievement in Ohio's online charter schools. *Educational Researcher*, 46(1), 44-57.
- American Academy of Pediatrics (2020, May 27). 2019 novel coronavirus (COVID-19). *Healthy Children*. Retrieved May 27, 2020, from <https://www.healthychildren.org/English/health-issues/conditions/chest-lungs/Pages/2019-Novel-Coronavirus.aspx>
- American Federation of Teachers (2020). A plan to safely reopen America's schools and communities: Guidance for imagining a new normal for public education, public health and our economy in the age of COVID-19. Retrieved May 27, 2020, from [https://www.aft.org/sites/default/files/covid19\\_reopen-america-schools.pdf](https://www.aft.org/sites/default/files/covid19_reopen-america-schools.pdf)
- Atteberry, A., & McEachin, A. (2020, April). School's out: The role of summers in understanding achievement disparities. *EdWorkingPapers*. Retrieved May 20, 2020, from <https://www.edworkingpapers.com/sites/default/files/ai19-82-v042020.pdf>
- Baye, A., Lake, C., Inns, A., & Slavin, R. E. (2019). Effective reading programs for secondary students. *Reading Research Quarterly*, 54(2), 133-166.
- Burger, C. (2020, May 5). How to reuse PPE. *Registered Nursing*. Retrieved May 27, 2020, from <https://www.registerednursing.org/how-reuse-ppe/>
- Centers for Disease Control and Prevention (2016, July 26). Hygiene-related posters. Retrieved May 27, 2020, from <https://www.cdc.gov/healthywater/hygiene/resources/posters.html>
- Centers for Disease Control and Prevention (2020, March 19). Interim guidance for administrators of US K-12 schools and child care programs: Plan, prepare, and respond to coronavirus disease 2019 (COVID-19). Retrieved May 27, 2020, from <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/guidance-for-schools.html>
- Centers for Disease Control and Prevention (2020, April 23). Guidance for cleaning and disinfecting: Public spaces, workplaces, businesses, schools, and homes. *United States Environmental Protection Agency*. Retrieved May 27, 2020, from [https://www.epa.gov/sites/production/files/2020-04/documents/316485-b\\_reopeningamerica\\_combo\\_placard\\_infographic\\_4.19\\_6pm.pdf](https://www.epa.gov/sites/production/files/2020-04/documents/316485-b_reopeningamerica_combo_placard_infographic_4.19_6pm.pdf)
- Centers for Disease Control and Prevention (2020, April 24). How to protect yourself & others. Retrieved May 27, 2020, from <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/prevention.html>

Centers for Disease Control and Prevention (2020, May 3). Discontinuation of isolation for persons with COVID-19 not in healthcare settings: Interim guidance. Retrieved May 27, 2020, from <https://www.cdc.gov/coronavirus/2019-ncov/hcp/disposition-in-home-patients.html>

Centers for Disease Control and Prevention (2020, May 7). Guidance for cleaning and disinfecting: Public spaces, workplaces, businesses, schools, and homes. Retrieved May 27, 2020, from <https://www.cdc.gov/coronavirus/2019-ncov/community/cleaning-disinfecting-decision-tool.html>

Centers for Disease Control and Prevention (2020, May 14). People who are at higher risk for severe illness. Retrieved May 27, 2020, from [https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-at-higher-risk.html?CDC\\_AA\\_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fhcp%2Funderlying-conditions.html](https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-at-higher-risk.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fhcp%2Funderlying-conditions.html)

Centers for Disease Control and Prevention (2020, May 18). Strategies to optimize the supply of PPE and equipment. Retrieved May 27, 2020, from <https://www.cdc.gov/coronavirus/2019-ncov/hcp/ppe-strategy/index.html>

Centers for Disease Control and Prevention (2020, May 20). Healthcare infection prevention and control FAQs for COVID-19. Retrieved May 27, 2020, from <https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-faq.html>

Centers for Disease Control and Prevention (2020, May 22). How COVID-19 spreads. Retrieved May 27, 2020, from <https://www.cdc.gov/coronavirus/2019-ncov/about/transmission.html>

Centers for Disease Control and Prevention (2020). Considerations for school closure. Retrieved May 27, 2020, from <https://www.cdc.gov/coronavirus/2019-ncov/downloads/considerations-for-school-closure.pdf>

Centers for Disease Control and Prevention (2020). Handwashing and hand sanitizer use: At home, at play, and out and about. Retrieved May 27, 2020, from <https://www.cdc.gov/handwashing/pdf/hand-sanitizer-factsheet.pdf>

Chou, C. C. (2002, January). *A comparative content analysis of student interaction in synchronous and asynchronous learning networks*. In Proceedings of the 35<sup>th</sup> Annual Hawaii International Conference on System Sciences (pp.1795-1803). IEEE

Dickson, K., Bird, K., Newman, M., & Kalra, N. (2010, February). What is the effect of block scheduling on academic achievement. *EPPI-Centre*. Retrieved May 20, 2020, from <https://discovery.ucl.ac.uk/id/eprint/10003672/1/Dickson2010What.pdf>

- Doremalen, N. V., Bushmaker, T., Morris, D., Holbrook, M., Gamble, A., Williamson, B., Azaibi, T., Harcourt, J. L., Thornburg, N. J., Gerber, S. I., Lloyd-Smith, J. O., de Wit, E., Munster, V. (2020). Aerosol and surface stability of HCoV-19 (SARS-CoV-2) compared to SARS-CoV-1. *The New England Journal of Medicine*, 382(16), 1564–1567.
- Fitzpatrick, B. R., Ferrare, J. J., & Waddington, R. J. (2020). Virtual illusion: Comparing student achievement and teacher characteristics in online and brick-and-mortar charter schools. *Educational Researcher*, 49(3), 161-175.
- Hammer, L., Dubbel, P., Capron, I., Ross, A., Jordan, A., Lee, J., Lynn, J., Ball, A., Narwal, S., Russell, S., Patrick, D., and Leibrand, H. (2020, May 15). High SARS-COV attack rate following exposure at a choir practice – Skagit County, Washington, March 2020. *Centers for Disease Control and Prevention Morbidity and Mortality Weekly Report*. Retrieved May 27, 2020, from <https://www.cdc.gov/mmwr/volumes/69/wr/mm6919e6.htm>
- Harper, A. (2018, March 23). New study highlights the benefits of looping in the elementary grades. *Education Dive*. Retrieved May 20, 2020, from <https://www.educationdive.com/news/new-study-highlights-the-benefits-of-looping-in-the-elementary-grades/519743/>
- Hemelt, S., & Komisarow, S. (2020, February 24). *The doctor will see you now: School-based telemedicine and student outcomes*. In Presentation at 2020 CALDER Conference on their forthcoming paper “The Doctor Will See You Now: Telemedicine and Student Outcomes”.
- Illinois Department of Public Health (2020). School Guidance. Retrieved May 27, 2020, from <https://www.dph.illinois.gov/topics-services/diseases-and-conditions/diseases-a-z-list/coronavirus/schools-guidance>
- Kuhfeld, M., & Soland, J. (2020, April). The learning curve: Revisiting the assumption of linear growth across the school year. *EdWorkingPapers*. Retrieved May 20, 2020, from <https://www.edworkingpapers.com/sites/default/files/ai20-214.pdf>
- Marzano, R. J. (1993). How classroom teachers approach the teaching of thinking. *Theory Into Practice*, 32(3), 154-160.
- Maryland State Department of Education (2020, May). Maryland together: Maryland’s recovery plan for education: COVID-19 response and the path forward. Retrieved May 27, 2020, from <http://www.marylandpublicschools.org/newsroom/Documents/MSDERecoveryPlan.pdf>
- Mayo Clinic (2020, May 13). Fever. Retrieved May 27, 2020, from <https://www.mayoclinic.org/diseases-conditions/fever/symptoms-causes/syc-20352759>

- Minnesota Department of Health (2020, May 4). COVID-19 cleaning and disinfecting guidance: For schools and child care programs. Retrieved May 27, 2020, from <https://www.health.state.mn.us/diseases/coronavirus/schools/clean.pdf>
- Minnesota Department of Health (2020, May 5). Aerosol-generating procedures and patients with suspected or confirmed COVID-19. Retrieved May 27, 2020, from <https://www.health.state.mn.us/diseases/coronavirus/hcp/aerosol.pdf>
- Minnesota Department of Health (2020, May 13). Guidance for social distancing in youth and student programs. Retrieved May 27, 2020, from <https://www.health.state.mn.us/diseases/coronavirus/schools/socialdistance.pdf>
- Musgrove, A., & Musgrove, G. (2004). Online learning and the younger student-theoretical and practical applications. *Association for the Advancement of Computing in Education*, 2004(1), 213-225.
- National Association of School Nurses (2020, February 28). Guidance for school principals and superintendents. *Higher Logic Download*. Retrieved May 27, 2020, from [https://higherlogicdownload.s3.amazonaws.com/NASN/3870c72d-fff9-4ed7-833f-215de278d256/UploadedImages/PDFs/02282020\\_NASN\\_Coronavirus\\_19\\_Guidance\\_for\\_School\\_Principals\\_and\\_Superintendents.pdf](https://higherlogicdownload.s3.amazonaws.com/NASN/3870c72d-fff9-4ed7-833f-215de278d256/UploadedImages/PDFs/02282020_NASN_Coronavirus_19_Guidance_for_School_Principals_and_Superintendents.pdf)
- National Association of School Nurses (2020, March 18). Considerations for School Nurses Regarding Care of Students and Staff that Become Ill at School or Arrive Sick. *Higher Logic Download*. Retrieved May 27, 2020, from [https://higherlogicdownload.s3.amazonaws.com/NASN/3870c72d-fff9-4ed7-833f-215de278d256/UploadedImages/PDFs/03182020\\_NASN\\_Considerations\\_for\\_School\\_Nurses\\_Regarding\\_Care\\_of\\_Students\\_and\\_Staff\\_that\\_Become\\_Ill\\_at\\_School\\_or\\_Arrive\\_Sick.pdf](https://higherlogicdownload.s3.amazonaws.com/NASN/3870c72d-fff9-4ed7-833f-215de278d256/UploadedImages/PDFs/03182020_NASN_Considerations_for_School_Nurses_Regarding_Care_of_Students_and_Staff_that_Become_Ill_at_School_or_Arrive_Sick.pdf)
- National Association of School Nurses (2020, May 15). Interim guidance: Role of the school nurse in returning to school planning. *Higher Logic Download*. Retrieved May 27, 2020, from [http://higherlogicdownload.s3.amazonaws.com/NASN/3870c72d-fff9-4ed7-833f-215de278d256/UploadedImages/PDFs/COVID-19\\_Interim\\_Guidance\\_Role\\_of\\_the\\_School\\_Nurse\\_in\\_Return\\_to\\_School\\_Planning.pdf](http://higherlogicdownload.s3.amazonaws.com/NASN/3870c72d-fff9-4ed7-833f-215de278d256/UploadedImages/PDFs/COVID-19_Interim_Guidance_Role_of_the_School_Nurse_in_Return_to_School_Planning.pdf)
- Northeast Document Conservation Center. 3.5 Disinfecting Books and Other Collections. (2020, March 26). Retrieved May 27, 2020, from <https://www.nedcc.org/free-resources/preservation-leaflets/3.-emergency-management/3.5-disinfecting-books>.
- NFHS, NafME, and NAMM Foundation (2020, April 30). COVID-19 instrument cleaning guidelines. *National Association for Music Education*. Retrieved May 27, 2020, from <https://nafme.org/covid-19-instrument-cleaning-guidelines/>

- Offir, B., Lev, Y., & Bezalel, R. (2007, October). Surface and deep learning processes in distance education: Synchronous versus asynchronous systems. *Computers & Education*, 51(3), 1172-1183.
- Phurisamban, R. & Gleick, P. (2017, February). Drinking fountains and public health: Improving national water infrastructure to rebuild trust and ensure access. *Pacific Institute*. Retrieved May 27, 2020, from <https://pacinst.org/publication/drinking-fountains-public-health-improving-national-water-infrastructure-rebuild-trust-ensure-access/>
- Readiness and Emergency Management for Schools (2020). Addressing biological hazards that may impact students, staff, and visitors. Retrieved May 27, 2020, from [https://rems.ed.gov/Resources\\_Hazards\\_Threats\\_Biological\\_Hazards.aspx](https://rems.ed.gov/Resources_Hazards_Threats_Biological_Hazards.aspx)
- Reback, R. (2010, August 4). Schools' mental health services and young children's emotions, behavior, and learning. *Journal of Policy Analysis and Management*, 29(4), 698-725.
- Redd, Z., Boccanfuso, C., Walker, K., Princiotta, D., Knewstubb, D., & Moore, K. (2012, August). Expanding time for learning both inside and outside the classroom: A review of the evidence base. *The Wallace Foundation*. Retrieved May 20, 2020, from <https://www.wallacefoundation.org/knowledge-center/Documents/Expanding-Time-for-Learning-Both-Inside-and-Outside-the-Classroom.pdf>
- Schwartz, H. L., McCombs, J. S., Augustine, C. H. & Leschitz, J. T. (2018). Getting to Work on Summer Learning: Recommended Practices for Success, 2nd Ed., Santa Monica, CA: RAND Corporation, RR-366-1-WF, 2018. Retrieved May 27, 2020, from [https://www.rand.org/pubs/research\\_reports/RR366-1.html](https://www.rand.org/pubs/research_reports/RR366-1.html)
- Stevens, H. (2020, March 14). Why outbreaks like coronavirus spread exponentially, and how to “flatten the curve”. *The Washington Post*. Retrieved May 27, 2020 from <https://www.washingtonpost.com/graphics/2020/world/corona-simulator/>
- Suldo, S. M., Gormley, M. J., DuPaul, G. J., & Anderson-Butcher, D. (2013, December 20). The impact of school mental health on student and school-level academic outcomes: Current status of the research and future directions. *School Mental Health*, 6(2), 84-98.
- Tarasawa, B. (2020, April 9). COVID-19 school closures could have a devastating impact on student achievement. *Northwest Evaluation Association*. Retrieved May 20, 2020, from <https://www.nwea.org/blog/2020/covid-19-school-closures-could-have-devastating-impact-student-achievement/>
- Vandenbroucke, L., Spilt, J., Verschueren, K., Piccinin, C., & Baeyens, D. (2018). The Classroom as a Developmental Context for Cognitive Development: A Meta-Analysis on the Importance of Teacher–Student Interactions for Children’s Executive Functions. *Review of Educational Research*, 88(1), 125-164.

- Vermont Agency of Education (2020, March 15). Guidance on limiting cafeterias to 250 people. Retrieved May 27, 2020, from <https://education.vermont.gov/sites/aoe/files/documents/edu-technical-guidance-covid19-limiting-cafeterias-to-250.pdf>
- Von Hippel, P. (2016, April 19). Year-round school calendars: Effects on summer learning, achievement, parents, teachers, and property values. *Social Science Research Network*. Retrieved May 20, 2020 from [http://papers.ssrn.com/sol3/papers.cfm?abstract\\_id=2766106](http://papers.ssrn.com/sol3/papers.cfm?abstract_id=2766106)
- Walker, T. (2016, November 22). A 9 to 5 school day: Are longer hours better for students and educators? *neaToday*. Retrieved May 20, 2020, from <http://neatoday.org/2016/11/22/longer-school-days/>
- World Health Organization (2020, March 3). Getting your workplace ready for COVID-19. Retrieved May 27, 2020, from <https://www.who.int/docs/default-source/coronaviruse/getting-workplace-ready-for-covid-19.pdf>
- World Health Organization (2020, May 22). Events as they happen: WHO, Gavi, and UNICEF warn that disruption to routine vaccination leaves at least 80 million children at risk. Retrieved May 27, 2020, from <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/events-as-they-happen>
- Wu, D. (2019, December 29). Disentangling the effects of the school year from the school day: Evidence from the TIMSS assessments. *Education Finance and Policy*, 15(1), 104-135.

# Personal Protective Equipment

Ensure that appropriate PPE is made available to and used by staff, based on job-specific duties and risk of exposure.

Item	Examples
Face Coverings	<p>Types:</p> <p><a href="https://www.cdc.gov/coronavirus/2019-ncov/hcp/using-ppe.html">https://www.cdc.gov/coronavirus/2019-ncov/hcp/using-ppe.html</a></p> <ol style="list-style-type: none"><li>1. N95 masks</li><li>2. Surgical masks</li><li>3. Homemade masks/face coverings. IDPH has provided guidance on when to wear a mask, how to construct a mask and how to care for masks.</li></ol> <p><a href="https://www.dph.illinois.gov/covid19/community-guidance/mask-use">https://www.dph.illinois.gov/covid19/community-guidance/mask-use</a> The CDC now recommends wearing cloth face coverings in public settings where other social distancing measures are difficult to maintain, especially in areas of significant community-based transmission. CDC also advises the use of simple cloth face coverings to slow the spread of the virus and help people who may have the virus and do not know it from transmitting it to others.</p>
Eye and Face Protective Tools	<p>Types:</p> <p><a href="https://www.cdc.gov/niosh/topics/eye/eye-infectious.html">https://www.cdc.gov/niosh/topics/eye/eye-infectious.html</a></p> <ol style="list-style-type: none"><li>1. Face Shields</li><li>2. Safety Goggles</li><li>3. Safety Glasses</li></ol>
Gloves	<p>Types:</p> <ol style="list-style-type: none"><li>1. Surgical gloves</li><li>2. Nitrile gloves</li><li>3. Food service gloves</li><li>4. Plastic gloves</li></ol>
Isolation Gown	<p>Guidance for Schools</p> <p><a href="https://dph.illinois.gov/topics-services/diseases-and-conditions/diseases-a-z-list/coronavirus/schools-guidance">https://dph.illinois.gov/topics-services/diseases-and-conditions/diseases-a-z-list/coronavirus/schools-guidance</a></p>
Cleaning Supplies/Disinfectant	<p>Normal janitorial cleaning and disinfectant supplies probably are sufficient, but preference should be given to items on EPA's List N: Disinfectants for use against SARS CoV 2.</p> <p><a href="https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2">https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2</a></p>
Soap	<p>Regular soap is sufficient provided individuals washes their hands for twenty seconds using soap and warm water.</p>
Thermometers	<p>Non-contact thermometers preferred.</p>
Hand Sanitizer	<p>Hand sanitizer should contain at least 60 to 95% alcohol</p>

## Testing Site Locations and Hours of Operation:

- [Heartland Health Services \(Wisconsin Ave\)](#)- 2321 N Wisconsin Ave., Peoria IL 61603
  - Effective August 3, 2020 – Heartland Health Services will only operate (1) one Test Site located at 2321 Wisconsin Ave., Peoria, IL,
  - Monday through Friday from 9 am – 4 pm and Saturdays 9 am – 1 pm.
  - No appointment needed.
- [Peoria Civic Center/Fulton Street](#)- Located at the Peoria Civic Center's Fulton Street Parking Lot (IDPH Site)
  - Open 7 days per week -- 8:00 AM - 4:00 PM (while daily testing supplies last)
  - Testing Criteria:
    - Any/all individuals with or without symptoms
    - This location uses a less-invasive nasal swab for testing
  - For more information: call 1-800-889-3931 or visit <http://dph.illinois.gov/testing>
- [ICPR](#) - 3400 Griffin Ave, Pekin
  - Accepting appointments for COVID-19 testing
  - Call 309-347-4277 to schedule
- [Additional Illinois COVID-19 testing locations](#) - from the Illinois Department of Public Health

## MCLEAN COUNTY FAIRGROUNDS

1106 Interstate Dr, Bloomington, IL 7 days/week 9:00 am – 5:00 pm Testing information is listed [here](#)

***Open Every Day from 9 am - 5 pm.*** No appointment necessary

- The test is Free
- Walk up testing is available on Tuesdays and Thursdays
- All patients Must be 6 years old or older
- Those 17 and younger must be accompanied by an adult
- An ID is required for those 18 and older... a photo ID is preferred
- The patient might be asked if they have symptoms, but symptoms are not required to be tested
- This is not a deep nasal passage test. It is a second-generation upper nostril test
- The patient will be swabbing themselves after direction from a technician
- No insurance is required, but Reditus is asking if the patient has insurance (but it is NOT required to be tested) (This test is free)
- Must have access to a vehicle window
- Patients will receive test results in 3-7 days by a phone call from IDPH. If they miss the call, they can call Reditus Laboratories.