



September 10, 2020

TO: Snohomish County Public K-12 Superintendents
Snohomish County Private School Administrators

SUBJECT: Updated Recommendations regarding Remote-vs-In-Person Learning

This letter provides updated Health District guidance on considerations for planning future hybrid and in-person learning in the light of ongoing moderate but declining COVID-19 transmission in Snohomish County. After peaking in late July at nearly 100 cases per 100,000 per 14 days, the incidence of newly reported COVID-19 cases has continued a sustained, five-week decline. For the most recent 14-day period (August 23 – September 5, 2020), the rate was 48.

Since that late July peak when the Health District recommended beginning the fall term via remote learning, circumstances have changed for the better. Not only do we now have over a month of declining COVID-19 rates in Snohomish County, but we also have a framework for proceeding forward in the Washington State Department of Health's (DOH's) [Decision Tree for In Person Learning](#). This guidance based on DOH's decision tree highlights general parameters and overarching considerations from a countywide disease control perspective. The Health District defers to you on how to best serve your students within that general framework and meeting statewide guidelines, recommendations and requirements cited below.

As a result of the improving situation and in accord with DOH's guidance, a reasonable next step is to begin planning for how to expand in-person learning to elementary school students, as well as to any remaining high needs students of any grade level who are not already receiving in-person educational or ancillary services. However, this is not a suggestion to immediately go to full, in-person attendance in all elementary school settings, nor is this a recommendation to proceed with plans for in-person learning by middle and high school students. Furthermore, given the level of COVID-19 activity in the county and the size of the school population, it is inevitable that cases will occur in students and school staff. We all must be prepared for and ready to respond to that in a systematic and sustainable fashion.

Factors to consider when conducting planning to return elementary school students to in-person learning may include, but may not necessarily be limited to, the following:

1. your ability to fully implement COVID-19 health and safety measures as set forth in guidance from [DOH](#) and the [Office of the Superintendent of Public Instruction](#) (OSPI);
2. your readiness to monitor for and ability to respond to suspected cases of COVID-19 as set forth in guidance from DOH and OSPI;
3. the level and trajectory of COVID-19 case and outbreak activity in the school or school district itself and in the community at large;
4. the time elapsed since prior events (e.g., holidays) or modifications in staff or student onsite presence that may impact COVID-19 transmission;
5. findings from other settings in the county and region about the impact of a return to in person learning upon COVID-19 transmission;
6. selecting between hybrid versus full-time in-person learning and accounting for maintenance of social distancing and other prevention measures in making that selection;
7. the timeline along which a school's or district's administration, students and families can be reasonably expected to implement a transition in the learning plan;



8. the willingness of parents, guardians, and staff to attend in person settings; and
9. the ability to provide a stable learning environment and lasting return to in person learning.

In summary, a reasonable approach for the time being is to wait for at least three weeks of observation following both the Labor Day holiday and the re-opening of schools in their current configuration. If at that time COVID-19 activity in the school and community remains stable or improving and a review of the considerations set forth above is favorable, then proceeding with incremental returns of elementary school students to in person learning at your discretion is acceptable to the Health District. I urge you to continue to allow adequate time (e.g., at least three weeks) between increments in order to detect untoward effects prior to making the next move in your planned sequence.

The Health District is addressing this issue with a focus on countywide COVID-19 rates as its key metric due to:

- the overall mobility of the population, including school staff, causing a convergence in area-specific risk of transmission across locations;
- DOH's and the Governor's Safe Start framework being metered at the county level; and
- valuing countywide equity in students' access to in-person learning.

Consequently, the Health District cautions against advancing more rapidly than recommended on the basis of having a lower local COVID-19 rate than the county as a whole. On the other hand, it is not within the Health District's domain or capacity to prescribe or imply a minimum rate at which the process should progress. Local conditions, resources, and other factors within your domain may indeed lead you to move slower than this framework allows for.

Aside from high-needs students in small (e.g., ≤ 5), cohorted groups attending middle and high school in person, this letter communicates no current recommendation or guidance for returning to in person learning by middle and high school students. The Health District finds that teenage students:

- have higher rates of COVID-19 than younger children;
- are probably more likely to spread COVID-19 if infected; and
- as a group, appear to face fewer challenges in remote learning.

Given these factors, the Health District recommends middle and high schools continue to operate remotely (aside from special- or high-needs students). If we are able to return elementary school students to in-person learning in a safe and stable manner and we remain in similar or better COVID-19 circumstances overall, then at that time the Health District will update these recommendations, addressing the addition of hybrid or in person learning for middle and high school students.

In line with DOH guidance, the Health District continues to recommend against in-person extracurricular activities until such time as all students have at least some access to in-person learning, and COVID-19 activity in the community is otherwise so permitting. Also please note that a re-escalation in COVID-19 activity in the county, or in a specific school or district, may lead to modification of these recommendations. If such occurs, the Health District will notify you.



If you have any questions regarding these recommendations, please contact schools@snohd.org.

Meanwhile, we at the Health District look forward to continuing to work with you and your school communities to implement DOH and OSPI guidance, monitor disease activity, and respond to suspected and confirmed cases of COVID-19 that occur in your schools. I also look forward to continuing our regular communication and collaboration as we navigate together through this difficult time and try to implement a successful transition to in-person learning in the midst of the COVID-19 pandemic.

Sincerely,



Christopher Spitters, MD, MPH
Health Officer

cc: Snohomish Health District Board of Health