

Providing Targeted, Specialized Support and Services at School

Note: The following guidance is an update to the previous school cohort FAQ released on September 4, 2020.

UPDATED January 26, 2021

On August 24, 2020, the California Department of Public Health (CDPH) issued Guidance Related to Cohorts (Cohorting Guidance), which sets minimum health and safety guidelines across multiple sectors serving youth, including childcare and schools (public and private). The following is intended to supplement the Cohorting Guidance with responses to frequently asked questions specific to the provision of school-based targeted, specialized support. Insofar as a question is not addressed, local school officials—in collaboration with local health departments and school-based staff (including, if applicable, organized labor)—should implement measures consistent with local operations and needs.

Background: On March 4, 2020, the Governor proclaimed a <u>State of Emergency</u> in California as a result of the impacts of COVID-19 to make additional resources available and help the state prepare to respond to an increasing number of individuals requiring medical care and hospitalization as a result of a broader spread of COVID-19. Since that time, the State Public Health Officer and the CDPH have issued multiple public health directives to combat the COVID-19 pandemic, including, the January 14, 2020, K-12 School Guidance that supersedes the July 17 school guidance document.

The <u>K-12 School Guidance</u> prohibits in-person instruction at schools operating within a county in the Purple Tier due to high rates of COVID-19, while permitting grades K-6th to reopen in those counties once their COVID-19 School Safety Plan is submitted, approved and posted. On August 24, 2020, CDPH issued the Cohorting Guidance regarding permissible small-group in- person services.

Existing state law requires public schools to provide in-person instruction to the greatest extent possible (Education Code section 45304(b)). State law further requires that distance learning ensure access to connectivity and devices that allow students to participate in the educational program and complete assigned work. In addition, state law requires that students with disabilities and English learners receive educational and related services to which they are entitled under the law, among other requirements (Education Code section 45303(b) (1), (4) & (5)). The Cohorting Guidance therefore provides an important avenue for schools that have not yet reopened under this guidance to provide supervision, instruction and support to small cohorts of students to ensure students receive necessary services even while students are generally participating in distance learning.



Does the Cohorting Guidance apply to K-12 school settings?

Yes. The Cohorting Guidance authorizes small-group, in-person services in controlled, supervised, and indoor environments, such as those operated by local educational agencies (LEAs). The Cohorting Guidance applies to schools that cannot reopen for in- person instruction pursuant to the January 14 K-12 School Guidance and to schools that did not reopen under the July 17 Framework.

Schools that have been authorized to reopen for in-person instruction under the July 17 Framework including elementary schools operating pursuant to a waiver, must adhere to the January 14, 2021 K-12 School Guidance and any applicable order or directive of the local public health office.

Is the intent to allow for in person instruction for all students?

No. The purpose of this guidance is to establish minimum parameters for providing specialized services, targeted services and support for students while schools are otherwise closed for in-person instruction in ways that maintain the focus on health and safety to minimize transmission.

If a school is closed for in-person instruction, is it permissible for a small set of students to receive in-person targeted, specialized support and services on campus?

Yes. In-person targeted, specialized support and services in stable cohorts is permissible when the school is able to satisfy all of the conditions detailed in the Cohorting Guidance, including:

- Limiting cohort size
- Restricting cohort mixing
- Maintaining proper physical distancing, masking, cleaning and other safety measures

Does the Cohorting Guidance <u>require</u> schools to provide small-group, in-person services if they are otherwise prohibited to reopen under the January 14 K-12 School Guidance?

No. It clarifies the conditions that must be met to offer in-person services for small groups of students if a school is otherwise unable to reopen under state public health directives. This guidance enables schools to provide supervision and care for students, including specialized services for students with disabilities and English learners, access to internet and devices for distance learning, and in-person support and instruction for at-risk and high- need students.

Which students can be served in cohorts during school closures?

The determination is made at the LEA- and school-level based on the needs of students. Students with disabilities should be prioritized by the LEA and school for receiving targeted supports and services. In addition, English learners, students at higher risk of further learning loss or not participating in distance learning, students at



risk of abuse or neglect, foster youth and students experiencing homelessness may also be prioritized.

What qualifies as a specialized and targeted support services?

Specialized services are determined by LEAs and include but are not limited to occupational therapy services, speech and language services, and other medical services, behavioral services, educational support services as part of a targeted intervention strategy or assessments, such as those related to English learner status, individualized educational programs and other required assessments.

What are cohorts?

In the K-12 Schools setting, cohorts are stable groups of students with no more <u>than 16 individuals</u>, who are meeting for targeted supports and intervention services, under the direction of the LEA, while the school is closed to in person instruction and in addition to distance learning. Regardless of the name (e.g., "learning hubs" or "pods"), all of the provisions in the Cohorting Guidance must be followed for such cohorts to meet, whether they are operated by LEAs, non-profits, or other providers.

How should stable cohorts be established?

As outlined in the Cohorting Guidance, stable cohorts are groups of students, with the same supervising adult(s), that stay together throughout the day. The cohort must operate so that students and supervising adults within the group only have physical proximity with members of their cohort during the day. Supervising adults and students must not interact with other cohorts. This practice decreases opportunities for exposure to or transmission of the virus; facilitates more efficient contact tracing in the event of a positive case; and allows for targeted testing, quarantine, and isolation of a cohort instead of requiring the suspension of all such groups operating on a site in the event of a positive case or cluster of cases.

What is the maximum size for cohorts?

Can more than two "supervising adults" be assigned to a cohort if, for example, a student (or students) require(s) continuous assistance from adult staff (e.g., an instructional aide) and the cohort already includes two "supervising adults"?

Yes. The number of adults assigned to a cohort should be minimized and is ideally limited to two. However, cohorts may include more than two adults, provided the total size of the cohort does not exceed 16 individuals (students and adults together).

Can students receive additional specialized services or targeted support and services if they are not part of a cohort or outside of their cohort from a different supervising adult(s)?

Yes. Students may receive one-on-one services and supports from other qualified adults. These additional supports and services must be done individually and cannot be done with other students. Staff who are providing specialized services or targeted support – such as speech or occupational therapy or intensive tutoring -- should be assigned to work with students in as few cohorts as possible and must observe appropriate precautions to prevent transmission, including wearing appropriate personal



protective equipment (PPE), as specified in the January 14 Framework . It is also important to prevent other staff people (e.g., administrators, counselors, or nurses) who are not a supervising adult in a cohort or providing one-on-one services from interacting with cohorts unless necessary to respond to exigent health or safety issue, as they can transmit the virus from one cohort to another, thus greatly increasing the number of contacts for any given case.

Can different cohorts of students interact with each other?

No. Group stability is important to minimize exposure and for effective contact tracing so students and supervising adults cannot interact with different cohorts. Separation between cohorts is maintained either by having each cohort in a separate room or in its own space created by partitions. Given the layout of K-12 schools with multiple classrooms, schools should generally maintain separation between cohorts by assigning each cohort to its own classroom. Outdoor space or other dedicated space may be used when it allows for separation from other cohorts and adequate physical distancing.

Can schools have different cohorts on different days?

Yes. Schools can have cohorts of students who participate only on certain days or certain times during the day. Proper cleaning must be done in between different cohorts of students occupying the same space. For example, a school can have cohort(s) of students receiving services and supports Monday and Tuesday with separate cohort(s) on Wednesdays and Thursdays.

Can students change cohorts?

Students changing cohorts must be avoided, unless a change is needed for the student's overall safety and wellness.

How many cohorts can be established on a single school site?

The number of cohorts will depend on the school's enrollment size and available building capacity. Local school officials – in collaboration with local health departments and school-based staff – should determine the number of cohorts that can be safely established to avoid interactions between cohorts. In general, given the need for physical distancing and separation of cohorts, the number of students on a given school site should generally not exceed 25% of the school's enrollment size or available building capacity.

How will physical distancing be maintained within cohorts?

Groups must be no larger than can be accommodated by the space available in the facility to provide at least 6 feet of distance between each person, including staff, but in no instance larger than 16 individuals total. The smaller the group, the less risk of spreading disease. As cohort groups increase in size, or as they have any contact with other cohorts, the risk of spreading disease increases.



Can staff meet?

Group meetings with staff from different cohorts <u>must</u> be done remotely, outdoors or in large spaces such as gymnasiums or multipurpose rooms, with windows open, as much as possible, avoiding small spaces with windows closed. All staff must wear appropriate face coverings and maintain at least 6 feet of physical distancing.

How often should cleaning be done while students are on campus?

Cleaning and wiping surfaces (e.g., desks, door handles, etc.) must be maintained between multiple student uses, even in the same cohort. For additional guidance around health and safety standards including cleaning and masking, refer to January 14 K-12 Student Guidance and local health guidance.