A Guide for Bargaining the Safe Return to Schools and Campuses

As part of our commitment to bargaining for the public good, members of the Massachusetts Teachers Association are laying the groundwork for a safe return to in-person learning. Here are policies and practices you will want to see in place before educators and students can safely return to schools and campuses.

Community transmissions are important to follow: Base all policies for allowing in-person instruction on how COVID-19 cases are spreading in the community and on whether school buildings are proven to be safe. **The state needs to establish the parameters based on agreed-upon scientific and medical data.**

- New COVID-19 cases must be declining within a 14-day window.
- Communities must publicly post statements of these assessments daily. It matters to know what's happening in the community we live in and the community we work in.
- Unions must be included in the discussions with the local health departments, which must establish a transparent process on communicating community transmissions.
- We must have both statewide and local benchmarks plus routine reporting on adherence to them. The MTA and local affiliates need to be included in the setting of benchmarks and apprised of adherence. Local health departments must assess whether the disease is under control in the community, including the success of phased reopening and information about hospital and health care resources.

ONLY WHEN IT'S SAFE WILL WE RETURN

Pre-entry training and real-time reporting: Widespread, age-appropriate training is necessary. People of all ages need to know what COVID-19 is, how it spreads, how preventive measures change the way schools operate, and how to determine whether they have been met.

Develop and deliver training to:

- Students
- Students' families
- Teachers
- Staff

Provide

- Comprehensive daily compliance logs in every room within the school
- Weekly reports on incidents of infection by school

Provide safe indoor air quality: Prove that the HVAC systems are capable and air quality is healthy and safe. For each classroom, independently test and publicly post the results.
Follow ASHRAE's Position Document on Infectious Aerosols. HVAC system benchmarks to establish:

- Provide 100% fresh outside air and exhaust air constantly. If only provided while the building is occupied, then the system must be purged two hours before and two hours after the building is occupied.
- The demand-controlled ventilation systems should be disabled and dampers open 100%.
- Maintain relative humidity levels between 40% and 60%.
- Maintain temperature levels between 72 and 77 degrees.
- The system should maintain CO2 levels at a preferred 600 ppm (to a maximum of 800 ppm) (MA DPH) when the space is occupied.
- The system should provide 20 cfm per person of fresh air.
- Install MERV 13 filters or greater to capture infectious aerosols where recirculation is required.
- Install UVGI (ultraviolet germicidal irradiation) in ductwork to destroy infectious aerosols where recirculation is required.
- Install UVGI/HEPA filtration units in each classroom where building HVAC systems are nonfunctional to the guidelines above and cannot be upgraded in a timely manner.
- Windows should operate properly.

Testing and contact tracing: If you can't prove it's safe, it isn't. Students, staff and faculty need to be tested for infection. Testing needs to be widespread and the results need to be fast.

- COVID-19 testing must be easily accessible and free to all students and staff.
- Demand weekly point-of-care nucleic acid LAMP and rapid antigen tests, which are easy to administer and produce quick results.
- Publicize communications with the local health department.
- In the event of an infection or suspected infection, close areas that the individual entered, test and quarantine individuals (14 days) with whom the infected person came into contact within the 10 days prior to infection being detected.

Personal protective equipment: Follow and enforce the law protecting public employees (OSHA 1920.132).

- Districts and campuses must provide PPE to students and staff and make its use obligatory for all students of all ages.
- Provide appropriate PPE (at least N95 respirators and protective gear) to employees at high risk of infection. Evaluate each job to determine risk. High risk might be nurses, bus drivers, custodians or others. Medium risk might be educators, administrators or others.
- Dispose of PPE as infectious materials; provide required OSHA training and guidelines.

Cleaning and disinfecting: Follow and enforce the law protecting public employees on cleaning protocols (OSHA 1920.132), biohazards (OSHA 1910.1030), and on communicating hazards (OSHA 1910.1200)

- Ensure that protocols for cleaning and disinfecting are followed regularly, especially regarding frequently touched surfaces.
- The law requires all employees using disinfectants to be trained in proper usage, as some products may contain hazardous ingredients.
- If you want students and staff to take hand washing and sanitizing seriously, they need age-appropriate, culturally appropriate training.

- Hand sanitizer needs to be available in each classroom and office with at least 60% ethyl alcohol or ethanol.
- Sinks need to work. That means they have to deliver warm water and have automatic soap dispensers and touchless paper towel dispensers.

In the event of an infection or suspected infection, close infected areas immediately and clean and disinfect appropriate areas.

Social distancing:

- Train students and staff in how to socially distance.
- Include the training protocol in faculty manual, vetted by local safety committees.
    - ❖ Maintain 6 feet of social distance and related class size limits.
    - ❖ Cancel large gatherings.
    - ❖ Create safe student cohort protocols.
    - ❖ Design routines for maintaining the social distance in all settings and include logistically viable, properly staffed contingency plans for when it isn't achieved.
    - ❖ Provide whistleblower protections.

Accommodations:

- Address health conditions that place an educator or their family at increased risk by immediately creating and implementing alternative learning/teaching/work plans.
- Require a full-time nurse in every building.