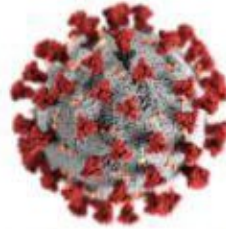


COVID Response and why we
do what we do

Web page changes

SRCDS COVID-19 Information Disclaimer



By continuing to the Santa Rosa County District Schools Coronavirus Information page, you are acknowledging that the material you will see can change on a daily basis, and you will not hold the district responsible for changes observed/experienced between the information on the SRCDS Coronavirus Information page and experiences in a classroom or school.

You are further acknowledging that you will not share information on the SRCDS Coronavirus Information page without including this disclaimer in full.

[I agree. Please take me to the SRCDS COVID-19 Information Page](#)

Web page changes

SRCDS COVID-19 Information



SRCDS COVID-19 Information Page Disclaimer

By using the Santa Rosa County District Schools Coronavirus Information page and the resources thereon, you acknowledge that the material you see and use can change on a daily basis, and that you will not hold the district responsible for changes observed/experienced between the information on this SRCDS Coronavirus Information page and experiences in a classroom or school.

You further acknowledge that you will not share information on the SRCDS Coronavirus Information page without including this disclaimer in full.

Parents / Students

- [Health Department Update](#) (09/03/20)
- [Health Department Flowchart](#) (09/04/20)
- [COVID-19 Decision Tree](#) (09/02/20)
 - [Student is Exposed](#)
 - [Student is Symptomatic](#)
 - [Student Reports Positive](#)

Employees

- [Employee COVID-19 Decision Tree](#) (rev. 09/08/20)
 - [COVID-19 Update VIDEO](#) (09/08/20)
 - Symptoms of COVID-19 may include but are not limited to: fever (100.4 or higher), cough, shortness of breath, fatigue, muscle or body aches, headache, loss of taste or smell, sore throat, congestion, runny nose, nausea, vomiting, and diarrhea.

Key Points/Changes

Tropical Depression 19

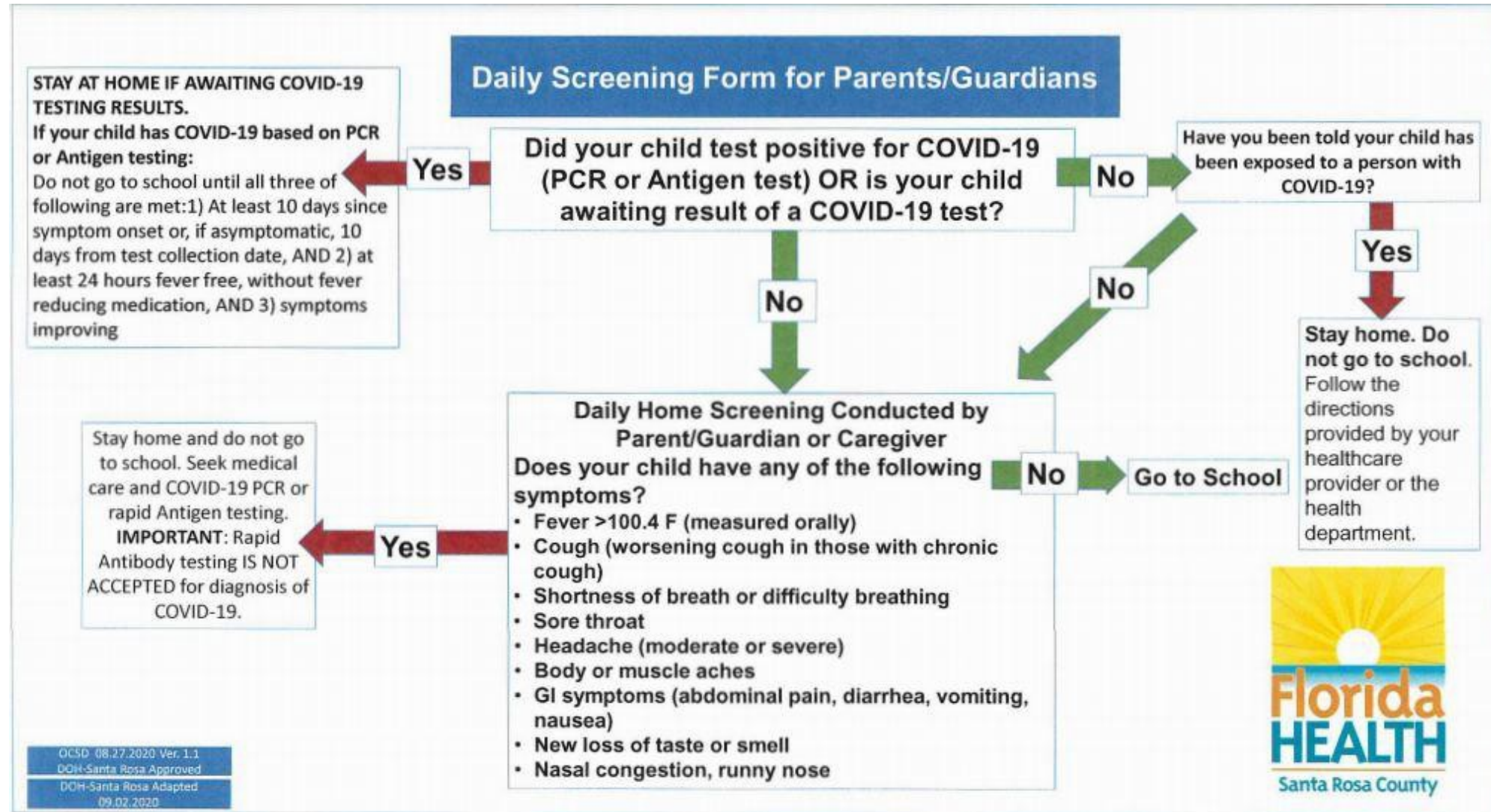


Mobile

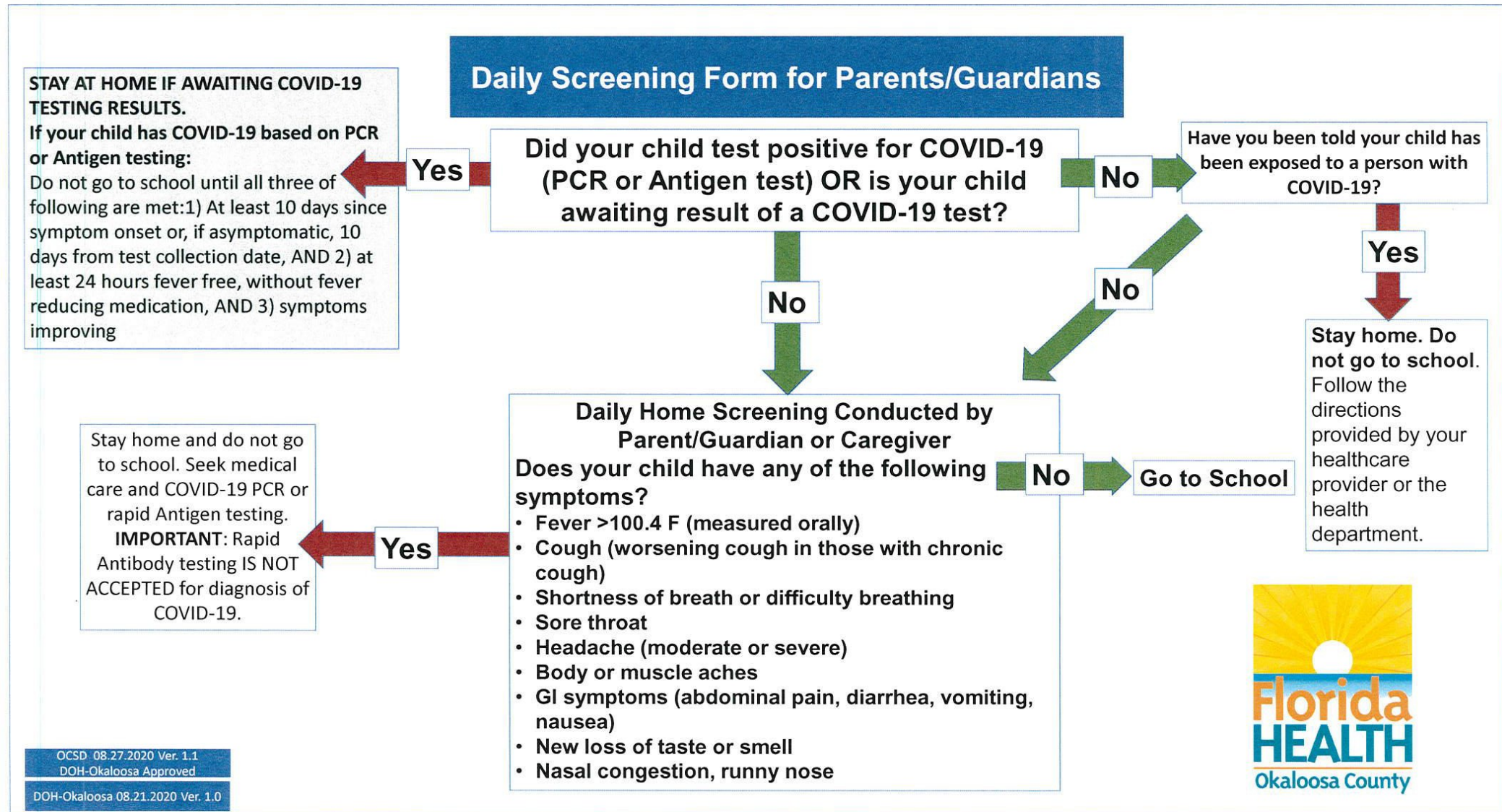
WEATHER FORECAST OFFICE

- Tropical Depression 19 is moving west over extreme southern Florida this morning and will move out over the southeastern Gulf by this afternoon.
- Be ready for short fused changes, especially to the intensity forecast.

We are Santa Rosa Not Okaloosa and Not Escambia....but they receive the same guidance



Okaloosa's Guidance



- Chapter 252, Florida Statutes:
 - Allows Governor's powers during state of emergency.
 - **252.36 Emergency management powers of the Governor.—**
- (1)(a) **The Governor is responsible for meeting the dangers presented to this state and its people by emergencies.** In the event of an emergency beyond local control, the Governor, or, in the Governor's absence, her or his successor as provided by law, may assume direct operational control over all or any part of the emergency management functions within this state, and she or he shall have the power through proper process of law to carry out the provisions of this section. The Governor is authorized to delegate such powers as she or he may deem prudent.
- (b) Pursuant to the authority vested in her or him under paragraph (a), the **Governor may issue executive orders, proclamations, and rules and may amend or rescind them. Such executive orders, proclamations, and rules shall have the force and effect of law.**

STATE OF FLORIDA

OFFICE OF THE GOVERNOR

EXECUTIVE ORDER NUMBER 20-213

(Emergency Management -Extension of Executive Order 20-52-COVID-19)

FILED
2020 SEP -4 AM 9:02
RECEIVED
TALLAHASSEE, FLORIDA

STATE OF FLORIDA

OFFICE OF THE GOVERNOR

EXECUTIVE ORDER NUMBER 20-52

(Emergency Management - COVID-19 Public Health Emergency)

Section 2. I designate the Director of the Division of Emergency Management (“Director”) as the State Coordinating Officer for the duration of this emergency and direct him to execute the State’s Comprehensive Emergency Management Plan and other response, recovery, and mitigation plans necessary to cope with the emergency. Additionally, I designate the State Health Officer and Surgeon General as a Deputy State Coordinating Officer and State Incident Commander.

INCIDENT COMMANDER

- The **incident commander** is the person responsible for all aspects of an emergency response; including quickly developing **incident** objectives, managing all **incident** operations, application of resources as well as responsibility for all persons involved.

Florida Surgeon General/INCIDENT COMMANDER

- **State Surgeon General Scott A Rivkees, M.D.**
- **Dr. Scott A. Rivkees, Florida's Surgeon General**, is focused on protecting, promoting and improving the health of everyone who calls Florida home. As Surgeon General, Dr. Rivkees also serves as state health officer for the Florida Department of Health. In this capacity, he oversees the operations of the state health office in Tallahassee, 67 county health departments, 22 area offices for the Division of Children's Medical Services, 12 regional offices for the Division of Medical Quality Assurance, nine area offices for the Division of Disability Determinations and three public health laboratories.
- Dr. Rivkees has committed his career to building a culture of health that can help each adult and child in Florida live a long and healthy life.
- Before his tenure as Florida's Surgeon General, Dr. Rivkees served as **chair of the department of pediatrics at the University of Florida College of Medicine and physician-in-chief of UF Health Shands Children's Hospital**, part of UF Health Shands Hospital and the University of Florida's Academic Health Center. He also served as academic **chair of pediatrics at Orlando Health and the University of Florida College of Medicine** pediatric chair at **Studer Family Children's Hospital at Sacred Heart in Pensacola**.

purchasing, travel, and the condition of employment and the compensation of employees. For the purposes of this Executive Order, “necessary action in coping with the emergency” means any emergency **mitigation, response, or recovery** action: (1) prescribed in the State Comprehensive Emergency Management Plan (“CEMP”); or (2) ordered by the State Coordinating Officer. The requirements of sections 252.46 and 120.54, Florida Statutes, shall not apply to any such suspension issued by a State agency; however, no such suspension shall remain in effect beyond the expiration of this Executive Order, to include any extensions.

MITIGATION EXAMPLES FOR CAUSES OF MORTALITY IN CHILDREN

Vehicle Crashes

<https://www.flhsmv.gov/driver-licenses-id-cards/licensing-requirements-teens-graduated-driver-license-laws-driving-curfews/>

Motor Vehicle Crash Crude Death Rate, Ages 0-18, Single Year Rates								
	Santa Rosa				Florida			
Years	Count	Denom	Rate	MOV	Count	Denom	Rate	MOV
2019	1	41,460	2.4		188	4,474,328	4.2	0.6
2018	4	40,797	9.8		202	4,433,107	4.6	0.6
2017	2	40,045	5.0		205	4,367,562	4.7	0.6
2016	0	39,437	0.0		225	4,328,925	5.2	0.7
2015	6	38,862	15.4	12.4	186	4,290,734	4.3	0.6
2014	1	38,372	2.6		180	4,261,450	4.2	0.6
2013	1	38,281	2.6		159	4,243,688	3.8	0.6
2012	1	38,328	2.6		174	4,253,256	4.1	0.6
2011	3	38,986	7.7		199	4,282,341	4.7	0.6
2010	0	38,260	0.0		185	4,238,183	4.4	0.6
2009	4	37,410	10.7		222	4,406,100	5.0	0.7

MITIGATION EXAMPLES FOR CAUSES OF MORTALITY IN CHILDREN

- Unintentional Drownings
- http://www.leg.state.fl.us/Statutes/index.cfm?App_mode=Display_Statute&URL=0500-0599/0515/0515.html

Unintentional Drowning Crude Death Rate, Ages 0-18, Single Year Rates								
	Santa Rosa				Florida			
Years	Count	Denom	Rate	MOV	Count	Denom	Rate	MOV
2019	3	41,460	7.2		73	4,474,328	1.6	0.4
2018	2	40,797	4.9		97	4,433,107	2.2	0.4
2017	1	40,045	2.5		97	4,367,562	2.2	0.4
2016	0	39,437	0.0		86	4,328,925	2.0	0.4
2015	0	38,862	0.0		95	4,290,734	2.2	0.4
2014	1	38,372	2.6		90	4,261,450	2.1	0.4
2013	2	38,281	5.2		94	4,243,688	2.2	0.4
2012	0	38,328	0.0		85	4,253,256	2.0	0.4
2011	0	38,986	0.0		82	4,282,341	1.9	0.4
2010	2	38,260	5.2		94	4,238,183	2.2	0.4
2009	1	37,410	2.7		100	4,406,100	2.3	0.4

MITIGATION EXAMPLES FOR CAUSES OF MORTALITY IN CHILDREN

- Suicides
- http://www.leg.state.fl.us/Statutes/index.cfm?App_mode=Display_Statute&Search_String=&URL=0000-0099/0014/Sections/0014.2019.html

Suicide Crude Death Rate, Ages 12-18, Single Year Rates								
Years	Santa Rosa				Florida			
	Count	Denom	Rate	MOV	Count	Denom	Rate	MOV
2019	2	15,957	12.5		97	1,693,643	5.7	1.1
2018	2	15,771	12.7		111	1,672,118	6.6	1.2
2017	1	15,524	6.4		91	1,642,368	5.5	1.1
2016	2	15,256	13.1		86	1,630,708	5.3	1.1
2015	2	14,965	13.4		80	1,621,511	4.9	1.1
2014	2	14,790	13.5		84	1,621,079	5.2	1.1
2013	0	14,864	0.0		71	1,621,071	4.4	1.0
2012	0	14,988	0.0		85	1,641,010	5.2	1.1
2011	0	15,347	0.0		64	1,666,263	3.8	0.9
2010	0	15,133	0.0		51	1,652,379	3.1	0.8
2009	2	14,858	13.5		64	1,658,805	3.9	0.9

THE STATE OF FLORIDA BIOLOGICAL INCIDENT ANNEX

Chapter 252, F.S.

Emergency Management Act

A state of emergency shall be declared by Executive Order or proclamation of the Governor if she or he finds an emergency has occurred or that the occurrence or the threat thereof is imminent.

Section 381.0011, F.S. Duties and powers of the Department of Health

- Assess the public health status and needs of the state.
- Administer and enforce laws and rules related to sanitation, control of communicable diseases, illnesses and hazards to health among humans and from animals to humans, and the general health of the people of the state.
- Coordinate with federal, state, and local officials for the prevention and suppression of communicable and other diseases, illnesses, injuries, and hazards to human health.
- Provide for a thorough investigation and study of incidence, cause, modes of propagation and transmission, and means of prevention, control, and cure of diseases, illnesses, and hazards to human health.
- Provide for the dissemination of information, to the public relative to the prevention, control, and cure of diseases, illnesses, and hazards to human health.
- Manage and coordinate emergency preparedness and disaster response functions to: investigate and control the spread of disease; ensure the safety of food and drugs; and provide surveillance and control of radiological, chemical, biological, and other environmental hazards.

381.0011 Duties and powers of the Department of Health

- (1) Assess the public health status and needs of the state.
- (2) **Administer and enforce laws and rules relating to sanitation, control of communicable diseases,** illnesses and hazards to health among humans and from animals to humans, and the general health of the people of the state.
- (3) **Coordinate with** federal, state, and **local officials for the prevention and suppression of communicable and other diseases,** illnesses, injuries, and hazards to human health.
- (4) Provide for a thorough investigation and study of the incidence, causes, modes of propagation and transmission, and means of prevention, control, and cure of diseases, illnesses, and hazards to human health.
- (5) Provide for the dissemination of information to the public relative to the prevention, control, and cure of diseases, illnesses, and hazards to human health.
- (6) Act as registrar of vital statistics.
- (7) **Manage and coordinate emergency preparedness and disaster response functions to: investigate and control the spread of disease;**

Section 381.0012, F.S. Enforcement authority

- (1) The department may commence and maintain all proper and necessary actions and proceedings to enforce the rules adopted pursuant to this chapter and may defend all actions and proceedings involving the department's powers and duties.
- (3) The department may commence and maintain all proper and necessary actions and proceedings to compel the performance of any act specifically required of any person, officer, or board by any law of this state relating to public health.
- (5) It shall be the duty of every state and county attorney, sheriff, police officer, and other appropriate city and county officials upon request to assist the department or any of its agents in enforcing the state health laws and the rules adopted under this chapter.

Section 381.00315, F.S. Public health advisories; public health emergencies; isolation and quarantines

- The State Health Officer is responsible for declaring public health emergencies, issuing public health advisories, and ordering isolation or quarantines.(1) As used in this section, the term:(a) “Isolation” means the separation of an individual who is reasonably believed to be infected with a communicable disease from individuals who are not infected, to prevent the possible spread of the disease.

Continued...

- (c) “Public health emergency” means any occurrence, or threat thereof, whether natural or manmade, which results or may result in substantial injury or harm to the public health from infectious disease, chemical agents, nuclear agents, biological toxins, or situations involving mass casualties or natural disasters. Before declaring a public health emergency, the State Health Officer shall, to the extent possible, consult with the Governor and shall notify the Chief of Domestic Security. The declaration of a public health emergency shall continue until the State Health Officer finds that the threat or danger has been dealt with to the extent that the emergency conditions no longer exist and he or she terminates the declaration. However, a declaration of a public health emergency may not continue for longer than 60 days unless the Governor concurs in the renewal of the declaration. The State Health Officer, upon declaration of a public health emergency, may take actions that are necessary to protect the public health.

Continued...

- 4. Ordering an individual to be examined, tested, vaccinated, treated, isolated, or quarantined for communicable diseases that have significant morbidity or mortality and present a severe danger to public health. Individuals who are unable or unwilling to be examined, tested, vaccinated, or treated for reasons of health, religion, or conscience may be subjected to isolation or quarantine.
- a. Examination, testing, vaccination, or treatment may be performed by any qualified person authorized by the State Health Officer.
- b. If the individual poses a danger to the public health, the State Health Officer may subject the individual to isolation or quarantine. If there is no practical method to isolate or quarantine the individual, the State Health Officer may use any means necessary to vaccinate or treat the individual.

WHY WAS BIOLOGICAL ANNEX WRITTEN

- Biological Incident Characteristics 1. Naturally-occurring Disease Outbreaks a. Emerging – Caused by newly identified species or strains of disease for which there may be no human immunity. b. Reemerging – Caused by a disease agent that was previously controlled or eradicated, but has been reintroduced.
- 3. Transmissibility a. Communicable – Transmissible from person-to-person via contact, respiration, and/or ingestion of disease causing agent. b. Non-communicable – Cannot be transmitted from person-to-person. c. Vector-borne – Transmitted through a disease vector (animal or arthropod) such as an insect (i.e., mosquito, flea)

INDICATORS	Lowest Risk of Transmission in Schools	Lower Risk of Transmission in Schools	Moderate Risk of Transmission in Schools	Higher Risk of Transmission in Schools	Highest Risk of Transmission in Schools
Number of new cases per 100,000 persons within the last 14 days*	<5	5 to <20	20 to <50	50 to ≤ 200	>200
Percentage of RT-PCR tests that are positive during the last 14 days**	<3%	3% to <5%	5% to <8%	8% to ≤ 10%	>10%
Ability of the school to implement 5 key mitigation strategies: <ul style="list-style-type: none"> • Consistent and correct use of masks • Social distancing to the largest extent possible • Hand hygiene and respiratory etiquette • Cleaning and disinfection • Contact tracing in collaboration with local health department 	Implemented <u>all 5</u> strategies correctly and consistently	Implemented <u>all 5</u> strategies correctly but inconsistently	Implemented <u>3-4</u> strategies correctly and consistently	Implemented <u>1-2</u> strategies correctly and consistently	Implemented <u>no</u> strategies

*Number of new cases per 100,000 persons within the last 14 days is calculated by adding the number of new cases in the county (or other community type) in the last 14 days divided by the population in the county (or other community type) and multiplying by 100,000.

**Percentage of RT-PCR tests in the community (e.g., county) that are positive during the last 14 days is calculated by dividing the number of positive tests over the last 14 days by the total number of tests resulted over the last 14 days. Diagnostic tests are viral (RT-PCR) diagnostic and screening laboratory tests (excludes antibody testing and PT-PCR testing for surveillance purposes). Learn more: <https://www.cdc.gov/coronavirus/2019-ncov/lab/resources/calculating-percent-positivity.html>

Ability of the school to implement 5 key mitigation strategies:

- Consistent and correct use of masks
- Social distancing to the largest extent possible
- Hand hygiene and respiratory etiquette
- Cleaning and disinfection
- Contact tracing in collaboration with local health department

Implemented all 5 strategies correctly and consistently

Responding to a Confirmed Case

Ensure continuity of education: Review and implement continuity plans, including plans for the continuity of teaching and learning.

- ☐ Dismiss the room or building of students and most staff for an initial consultation with local health officials. This initial short-term dismissal allows time for the local health officials to gain a better understanding of the COVID-19 situation impacting the school. **This allows the local health officials to help the school determine appropriate next steps, including whether an extended dismissal duration is needed.**
 - ☐ Ultimately, local health officials have the expertise to determine the necessary length of closure and scale of response.
 - ☐ During school dismissals, also consider canceling extracurricular group activities, school-based afterschool programs and large events (e.g., assemblies, spirit nights, field trips and sporting events).
 - ☐ Schools may need to discourage staff, students and their families from gathering or socializing anywhere.
 - ☐ The district, school or program should update FDOE.

Responding to a Confirmed Case

Consider alternatives for providing essential medical and social services for students:

Work with the county health department to continue providing necessary services for students with special healthcare needs.

- ☐ Make decisions about extending the school dismissal.
 - ☐ During dismissals (after cleaning and disinfection), schools and programs may stay open for staff members (unless ill) while students stay home. Keeping facilities open: a) allows teachers to develop and deliver lessons and materials remotely, thus maintaining continuity of teaching and learning; and b) allows other staff members to continue to provide services and help with additional response efforts.
 - ☐ Decisions on which, if any, staff should be allowed in the school should be made in collaboration with local health officials. Administrators should work in close collaboration and coordination with local health officials to make dismissal and large event cancellation decisions.
 - ☐ Administrators should seek guidance from local health officials to determine when students and staff should return to schools and what additional steps are needed for the school community. In addition, students and staff who are well but are taking care of or share a home with someone with a case of COVID-19 should follow instructions from local health officials to determine when to return to school.
 - ☐ The district, school or program should update FDOE.



STATE OF FLORIDA
DEPARTMENT OF EDUCATION

DOE ORDER NO. 2020-EO-06

IN RE: WAIVING STRICT
ADHERENCE TO THE FLORIDA
EDUCATION CODE, AS SPECIFIED
HEREIN, PURSUANT TO
EXECUTIVE ORDER NUMBER 20-
52, MADE NECESSARY BY THE
COVID-19 PUBLIC HEALTH
EMERGENCY

EMERGENCY ORDER

FILED AGENCY CLERK
2020 JUL -6 AM 11:54
DEPT OF EDUCATION
TALLAHASSEE FLA

WHEREAS, the Governor of the State of Florida issued Executive Order No. 20-114,
ratifying and reaffirming Executive Order No. 20-52, declaring a state of emergency in response
to the COVID-19 Public Health Emergency; and,

I. Reopening Requirements.

- a. All schools open. Upon reopening in August, all school boards and charter school governing boards must open brick and mortar schools at least five days per week for all students, subject to advice and orders of the Florida Department of Health, local departments of health, Executive Order 20-149 and subsequent executive orders. Absent these directives, the day-to-day decision to open or

THIS WEEK

559 students excluded due to close contact with a positive case. This is about 1.9% of our student body. We do this so that we can keep 98% of our students healthy and in school.

The real danger is keeping staff working as they are at higher risk with comorbidities. No teachers, no school.

This week we are excluding many students who participated in hurricane parties with COVID Positive students.

This is a community problem not a school problem, we have to deal with the hand we are dealt.

MY PROMISE TO YOU

- We will continue to make mistakes
- We will try to learn from those mistakes
- We will improve processes/protocols where we can
- We will not make everyone happy