

FRAMEWORK FOR SAFE RE- OPENING OF SCHOOLS: IRAQ

2020

Foreword

This document has been produced by the Strategic Advisory Group (SAG) for Iraq Education Cluster and it is a follow up to the Business Continuity Plan which was developed at the onset of the COVID-19 Pandemic in March 2020. The purpose of this document is to assist education partners to prepare for the eventual re-opening of schools and to make suggestions on how partners can support the Ministries of Education and the Directorates of Education to keep children safe. The document concludes with a checklist which every partner should use daily as they plan their education interventions.

Special thanks go to **Petra Bachtrog, Gioia Benedetti, Umasree Polepeddi** and **Elsa Dahan** in leading the development and adaptation of this framework for Iraq.

We sincerely hope all the Education Cluster Partners find this document useful and will refer to it as we continue to make access to quality education a reality for all children in Iraq.

Yours sincerely,

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Acronyms

CwD... Children with disabilities

DoE... Directorate of Education

KRI... Kurdistan Region of Iraq

MoE... Ministry of Education

PTA... Parent Teacher Association

SMC ... School Management Committee

Introduction

The COVID-19 pandemic led to the closure of all school in Iraq during the month of February 2020. As a result, over 10 million children were affected throughout the country. While the Ministries of Education prepare for end of year examinations for transitional grades as well as the gradual reopening of schools, it is important to keep the risk of contracting COVID-19 at a minimum and the safety and wellbeing of the children at the centre.

This framework and accompanying checklist build upon international standards and resources and ***aim to give guidance to education partners*** in Federal Iraq and the Kurdistan Region of Iraq for the safe re-opening of schools and other learning spaces. It is important to note that any guidelines developed by the Ministries of Education ***will supersede this guidance*** note and this note will serve as a supplementary resource.

For consistency, this document refers to schools as education spaces which include all formal and non-formal learning spaces, child-friendly spaces and other facilities where learning activities occur.

Key Principles:

Key principles for the safe re-opening of schools that should be considered throughout the process include:

- **Gender, inclusion and accessibility:** When returning back to school, children will have different needs based on their gender, age, disability, ethnicity, refugee/asylum-seeker status, socio-economic status or other factors. School re-opening must be inclusive and accessible for ALL children!
- **Build on existing structures:** It is important to consider existing support structures such as PTA's, SMCs, youth-led groups, etc. and include them in the different stages of school reopening.
- **Participatory approach:** Ensure active engagement with the community (children, youth, parents and caregivers, teachers, school administration, etc.) in the re-opening process.
- **Integrated approach:** COVID-19 is calling for a holistic approach during the reopening process. This includes not only education consideration but also aspects of mental health and psychosocial support, health or hygiene.
- **Child Safeguarding:** It is key to consider the safety and wellbeing of children throughout the entire process. Protecting children, young people and adults from any form of abuse and exploitation from staff, volunteers and partners should remain paramount as schools reopen.

Structure of the Framework:

The framework is divided in 3 phases covering the following:

- I. **Before school re-opening:** During this phase an analysis of the situation should be conducted, and partners and the DoEs should start preparing for a reopening.
- II. **During school re-opening:** This includes the period immediately before and after school re-opening (roughly 1-2 months before and after).
- III. **After schools reopen:** This period covers the period when schools are open again. Specifically, long term effects, the continuity of protective measures and behavioural changes as well as the provision of quality learning and additional offers are in the centre of this stage.

Additionally, the checklist at the end of this document should help partners throughout all phases. The checklist can further be used to assess the status of implementation of the framework.

I. Before schools re-open

Schools in Iraq have already been closed for over 3 months and many children have lost out on learning. Unfortunately, access to quality education was challenging even before the pandemic hit. Though the MoE have made attempts for children to access education through different platforms, not all children have managed to utilize these platforms fully.

The timing for re-opening of schools needs to be specifically informed by and aligned with national health and education plans which consider the stage of the pandemic and the preparedness activated within Iraq. While the decision on when schools will re-open is the prerogative of the Ministries of Education, partners together with the MoE/ DoE will also need to consider the following questions throughout the reopening process to ensure children can return safely to school:

- **Protection risks:** Are there protection-related risks related to children not attending school? (e.g. domestic violence or sexual exploitation against girls and boys)
- **Accessibility:** Was remote learning accessible for all children (age groups, marginalised groups, CwD, etc.)? Have remote learning pathways had a positive impact on learning outcomes for all children (this refers to the quality of remote learning and monitoring of it)?
- **Transitioning:** How are the ‘high stakes’ key transition points on the learning journey (school readiness; primary completion and transition; secondary completion and transition to tertiary) affected by the pandemic and responses to it?
- **Access to other services:** Do school closures compromise other support services provided by schools, such as school health and nutrition activities?
- **Long-term effects:** What are the social, economic and well-being related implications of children not attending school?

The considerations stated above, help to build a case to reopen schools especially where staying at home has exposed children to all manner of abuse and the self- learning materials have not yielded the desired outcomes. Partners should remember that they can only push for re-opening of schools if it is in-line with guidance issued by the government and the Ministry of Health in particular.

Finally, the **modalities for re-opening** will be designed according to pre-pandemic conditions and newly identified needs. In Iraq overcrowded classrooms and inadequate resources (clean water, lack of wash facilities, inadequate teachers) have been a challenge even before school closure due to COVID -19. These conditions will be re-assessed and will result in different re-opening modalities based on the keeping children safe and limiting the transition of COVID -19 among learners.

Partners may need to consider a **progressive reopening** (step-by-step) and / or **blended learning¹ approach** which entails developing new learning schedules and re-structuring of classrooms where partial remote learning is considered, based on grade specific objectives and outcomes, age groups’, attention span of children and the need to maintain social distancing.

Partners must identify and plan for a progressive reopening approach which is consistent to the specific needs identified in the field location in order to prioritize the most appropriate structure and measures to be taken. This stage must be characterised by an ongoing exercise of analysis of risks and needs assessment to better tailor the interventions.

¹ Combination of online/distant learning modalities within class teaching.

Example for a progressive (step-by-step) reopening of schools

- 1) Analysing transversal/ common/ similar needs of school aged children to create small groups for progressive reopening. i.e. a) boys and girls in final grades who need support in exams preparation; b) For the other grades boys and girls can be prioritised according to previous school results/ performance and the previous rate of absence.
- 2) Creation of groups/ structure for children attending school with a scattered timing and days. It is important to set short term objectives. (Plan of study/ curriculum and objective need to be shared with caregivers to help them support their children when studying from home) Three types of lessons can take place: i) In school face to face lessons, with reduced groups of children, are aimed at explaining new topics, correcting exercises, Q&A. ii) Home schooling: during the face to face lesson children received the exercises to practice on the topic explained through copies/ practical material. Iii) Complementary explanation from teachers, Q&A can take place through virtual classrooms on WhatsApp or via phone/telegram/sms where network is not available. In this case families need to be informed of the hours in which teachers are available for distance learning.

1.1. Safe operations

- Develop detailed protocols (through the engagement of community and school personnel) on hygiene measures, including handwashing, respiratory etiquette, use of protective equipment, social distancing, cleaning procedures for facilities and safe food preparation practices
- Identify best channels to inform beneficiaries and communities about new protocols in place: radio, TV, Facebook, WhatsApp, SMS chain, etc;
- Procure wash supplies, soap, hand sanitiser
- Disinfect and sanitize schools and learning spaces²
- Revise schools' transportation options
- Identify a school COVID-19 Focal Point among the personnel and/or community.

1.2. Focus on learning

- Foresee partial remote mechanisms and/ or blended approach. Where a progressive return to school is the best fitting option develop the indicators to determine who need to be prioritised in phasing back to school considering: 1) level of vulnerability, 2) level of access to distance learning, 3) final grade students/ examination classes
- Start the design of new schedules for classes and shifts considering reduced classes, social distancing based on Iraq's/KRI's standards, available alternative learning spaces in the community
- Design clear guidelines for enrolling new children in school, entering and exiting the learning spaces

² The cleaning and disinfecting of school buildings, classrooms, kitchens, dining facilities, and WASH facilities should be budgeted for and completed by skilled professionals before reopening. It is important to regularly clean water tanks. Use sodium hypochlorite at 0.5% (equivalent 5000ppm) for disinfecting surfaces and 70% ethyl alcohol for disinfection of small items (or hypochlorite at 0.5% here as well if need be) and ensure appropriate equipment for cleaning staff. Leave buildings for 24 hours and open windows for ventilation before use

- Consult with MoE on an adapted curriculum that requires teachers to facilitate such as introduction to new concepts; how children can practice and work through content on their own including self-assessment and the aspects which can be done through home/alternate approach. It is important to coordinate with the Cluster and MoE to ensure a consistent and coordinated response.

1.3. Well-being and Protection

- Update existing referral system and/or develop new referral pathway which includes direct connection with closest health facilities
- Take specific measures to mitigate protection risks while girls and other marginalized groups are out of school through increased community engagement and improved referrals
- Establish and / or strengthen Child Friendly feedback mechanism to ensure full expression of boys and girls feelings related to the disruption of the learning process.

1.4. Monitoring, evaluation, accountability, and learning

- After the long break, there is a risk of increased drop out but also the detection of possible infections must be monitored. To closely monitor this, attendance management systems have to be designed or strengthened and at least one school management staff (education Counsellor when available or School Principal/ deputy) is appointed to carry out face to face follow up in case of drop out and link the child/ family with existing referral system; ensure clear responsibilities for monitoring attendance.

II. During school re-opening

Following the pandemic, the closure of schools left children and adolescents without the normalcy of going to school. Everyone, (children, caregivers & teachers) had to readjust to learning from home using digital media/education television and other alternatives available. The school re-opening phase will focus on restoring that sense of normalcy at the same time blending it in with the new way of teaching and learning that children had adapted to during the lockdown. Additionally, activities in this phase will focus on safe school operations, pre-requisites to ensure that learning happens, measures for well-being and protection and monitoring and evaluation of interventions.

The first week when the schools reopen should be used to orient parents, caregivers and children on how school and learning will resume. This will include sessions with parents, caregivers and children on how the schools will function and learning will happen while ensuring social distancing and other mitigation measures. The orientation will also include the role of parents and caregivers to support the learning of children at home, the use of self-learning material as well as the safe school operations in place for protective learning environments.

2.1 Safe operations

During the school reopening safe school operations guidelines must be rolled out including monitoring. Activities proposed include (more details in the checklist):

- Orientation to students and parents on safe school reopening protocols through identified channels (see I.1) and face-to-face
- Promote and monitor the practices to be followed while in school
- Develop and distribute IEC material on hygiene and other prevention measures in all relevant languages and ensure messages are child friendly
- Institutionalize handwashing/hygiene practices in school
- Ensure WASH facilities are accessible for all children, including children with disabilities (CwDs)
- Assign clear responsibilities for attendance tracking and design a procedure for handling a possible infection among school staff and/or children
- Design and implement regular school disinfection and cleaning activities
- Design a comprehensive contingency plan for school closure which looks at all eventualities³ such as natural disasters, conflicts including COVID-19
- Develop clear communication plans (for e.g. school closure, infection among staff/children, etc.) and ensure contact lists are updated
- Establish/Activate the SMCs/PTAs and involve them in reopening procedures
- Reorient SMCs/PTAs on their roles and responsibilities in light of the way schools may have to function with the protocols

2.2 Focus on learning

The functioning of schools will be dependent on the COVID-19 preventive measures and safe school guidelines that will be in place. It is very much anticipated that all children may not be able to attend the school at the same time (progressive re-opening). For e.g. grade 3 with 45 children may have to

³ In case of COVID-19 the added challenge is the mitigation measures such as social distancing which create a different kind of challenge beyond school closure

be split at a minimum into two or three small groups to ensure social distancing is maintained. And each group comes physically to school on certain days of the week. The children not coming physically to school will need alternative learning modalities to be in place on those days.

- **Grouping:** teachers to form smaller groups of children that allow for physical distancing; ideally different groups will not mix to support a quick case tracing in the event of an infection; consult and share with parents and children; displayed in school and classrooms
- **Schedule:** Finalise schedules for children should be provided for in-school and home/alternate learning. Define the help needed by parents/caregiver to support learning of children. Clearly specify achievable learning goals
- **Complementing modalities:** For the home-based learning the schedule of tv programmes and the self-learning materials should be clearly specified for the concerned duration.
- **Material availability:** ensure all children have textbooks, notebooks and pencils as well as required additional material for home-based learning modalities
- **Co-curricular activities:** Include physical education, games/sports and art and other hobby/leisure activities in the schedule considering transmission mitigation measures
- **Alternative learning spaces:** If alternative learning spaces were identified in the community, it is advised to sign an agreement to ensure learning continuity. The agreement should cover rights and responsibilities of all parties (e.g. schedule for learning, cleaning and disinfection responsibilities, material storage modalities, etc.). It is advised that a Code of Conduct is also signed by the lessor with special focus on child safeguarding.
- **Teacher support:** Ensure additional support for teachers to manage alternative learning modalities and consider supporting teachers with data packs for accessing online material and supporting children remotely. E.g. regular teacher learning circles, peer-support groups using WhatsApp groups, etc.

Monitoring learning

- Formative assessments have to be in-built in the timetables/ term plans (coordination with Cluster is advised to receive standardised tools once available)
- Self-assessment/ parent or care giver support assessment, classroom-based assessment and end of term assessment should be indicated in the school calendar (coordination with Cluster is advised to receive standardised tools once available)
- Multiple ways of assessing should be available for teachers to choose from and guide parents and caregivers to use
- Coordinate with cluster to develop alternative ways of examination especially for the critical grades such as 6, 9 and 12.

2.3 Well-being and Protection

For the well-being and protection of teachers and children and other school personnel the following will be required:

- Handwashing and hygiene practices are facilitated at scheduled times during the school hours and closely monitored

- Physical distancing norms to be ‘normalized’ in the most conducive manner⁴ keeping in mind that children naturally socialize and can participate in group activities. Monitor a possible long-term effect of physical distancing on children
- Physical education, sports and games, Art etc should be integral part of co-curricular activities as part of physical and mental well-being
- Ensure additional PSS activities are part of the schedule, both, as an integrated component and as structured PSS sessions
- Sessions and support for teachers and children for psychosocial well-being to be ensured
- Ensure that schools are violence free and a greater alertness to be exercised
- Identify children in need of further support; use referral system.

2.4. Monitoring, evaluation, accountability, and learning

The functioning of schools is anticipated to be different when they reopen. This will require that the functioning is monitored, school days and hours be clearly documented including when children are learning from home and using alternative modalities.

- Upon MoE/DoE guidance, review the definition of ‘school days’ in an academic year and redefine taking into consideration the new modality of functioning
- Attendance monitoring needs to be strengthened including tracking the participation through education tv/self-learning/online/digital learning and other modalities
- Teacher attendance in school as well as when providing distance support will be monitored and requisite mechanisms established
- SMCs and PTAs should have a monitoring plan for ensuring school functioning and optimal and safe learning environment. This can feed into (see next point)
- Monthly reviews of school functioning, challenges faced and a discussion with teachers and head teachers/ Principals to find solutions
- To increase accountability at the end of each term, it is advised that schools and PTAs/SMCs present a review of actions taken to ensure quality and safe learning for children
- Ensure that accountability of supervisors and teachers, Principals and SMCs is clearly stated and understood
- An ongoing classroom-based assessment of learning should be part of school timetable
- School performance report from the perspective of the rights holder (students) to be introduced

III. After schools are re-opened

Monitoring aspects of the two previous phases and the key principles outlined in the introduction are crucial during this phase. The reopening of schools provides an opportunity not only to strengthen existing education, but also to improve health, protection and disaster preparedness systems, by making them more accessible, inclusive, participatory and protective. Efforts should therefore be made on a longer term to consider lessons learned from the COVID-19 pandemic, and for all schools actors

⁴ Social distancing in the classrooms and schools has to be preceded by a strong communication strategy with parents, teachers and children at the centre. In case only small groups of children can attend on certain days then there should be also a way of reforming the groups periodically to ensure that all children get to interact with most of classmates as much as is possible. The transition between the time in school and alternative modalities should be smooth and guided.

(including the government, school staff, parents/caregivers, children themselves, etc.) to, better prepare and reduce risks of future crises – including crises that may affect the school system - related to health, natural, and everyday hazards, and opening up to chances of increased violence and conflict, as seen in past history at country & regional levels.

3.1 Safe operations

- Ensure a plan for continuous cleaning and disinfection activities is followed; behaviour change should be emphasized; consider revisiting and improving waste management practices
- Ensure national regulations on the use of personal protective equipment are followed
- Information on hygiene practices and standards should continue to be widely available and accessible in all languages used by schools (Arabic, Kurdish - *various dialects* -, Turkmen, English, etc.), including accessible to CwD (braille for visually impaired children, sign language for hearing impaired children, etc.), and using a child-friendly language as much as possible.⁵ Hygiene practices and standards should also apply when considering transportation of children to and from school.
- Revisit contingency plan for potential future school re-closing and re-opening; consider including a clear decision model and communication structures are put in place – *including referral system to nearby health facilities in place and revised frequently.*

3.2. Focus on learning

- Consider increasing investments in remote learning, first as a way of preparing for future potential occurrences of school closures, second in order to strengthen teaching and learning where closures remain in effect, and third in order to supplement instructional hours with a blended model where schools may be operating on partial schedules. This point includes the necessity of increased funding for teacher capacity-building and training, as much as possible, and including the implementation of innovative teacher support methods, such as online professional development, coaching, or use of tutors to scale more rapidly. – *COVID-19 Focal Point could be assisting in the training of other teachers, and / or on a more formal note, training and skills building could also be integrated into formal pre- and in-service teacher trainings*
- Scale up of remedial programmes to mitigate learning loss and prevent exacerbation of learning inequality, with a focus on literacy and numeracy for primary-age children and accessibility accommodations for children with disabilities
- Accelerated education models can be implemented in parallel to integrate previously out-of-school or over-age children
- Advocate for adapted examination procedures taking into consideration modalities to be used for remote learning. Wherever possible, considering universal promotion and assess students' levels of learning following school closures to inform remedial efforts might be a satisfactory option
- Partners should ensure that learning materials / platforms, information, services and facilities are accessible to all, including in multiple/accessible formats, with a focus on CwD

⁵ Some posters with key messages can be found on the WHO website to download ([here](#)) or UNICEF website (available [here](#)). It is also advised to reach out to the Cluster for possible resources available for Iraq/KRI specifically.

- Records of students that are originally most marginalized by access to education should be kept track of, on a frequent basis, and remedial actions should be taken in case the numbers are decreasing (*Why is it decreasing? What can be done to improve the declining situation?*).

3.3. Well-being and Protection

- Share clear, concise, and accurate information about Covid-19⁶
- Share messages about fear and anxiety, and promote self-care methods for all school-related communities (children, parents / caregivers, teachers, other school staff)⁷
- Continue to monitor the functionality of the referral systems. In addition, all providers should be aware of alternative care services, including referral to services for GBV / PSEA and Child Protection, and should be able to either provide those services or refer to other trustworthy providers located nearby. *Services should be youth-friendly and fully accessible, provided the use all confidentiality standards.*

3.4. Monitoring, evaluation, accountability, and learning

- In line with using a participatory approach, actors should conduct rapid (multi-sectoral) needs assessments at the time that schools are reopened, in order to assess, how much children / youth continued learning during school closure, and what support has been perceived as needed in order to return to school. An analysis with specific needs, disaggregated by sex, age, ethnicity, language, disability, socio-economic status, etc., could be conducted as well, in order to use results from this analysis to reach marginalized groups
- Existing feedback mechanisms should be strengthened and accessible for children, caregivers and teachers. Continuous feedback is key during this unprecedented time and could be used either internally and/or externally to inform further planning and ensure equal, safe and quality access to education opportunities. *Options must be available for CwD, limited literacy, speakers of all used languages, and using several methods such as PTAs, anonymous feedback boxes, etc.*
- Regular monitoring of attendance of children and teachers to ensure possible COVID-19 cases are identified quickly and transmission tracking implemented smoothly. However, attendance monitoring is further key to identify children at risk of drop out; Early identified, children at risk can be supported through adequate measures
- Analyse attendance and performance data against pre-pandemic data to adapt respond plans and ensure needs of rights holders are addressed

⁶ For reliable information consult the latest key messages shared on the WHO website (available [here](#)).

⁷ Consult the INEE COVID-19 resource website for material on stress management (available [here](#)).

Annex 1: Checklist

The checklist below should give guidance for partners to ensure children can safely return to school. Furthermore, it can serve as a tool to monitor the status of actions taken to reopen schools. The checklist was influenced by the information provided in the sections above and tries to find a balance between providing specific guidance for action while acknowledging different operational modalities of education partners.

Organisation					
Date					
Location					
Name of school/learning space/centre					
	Yes	No	Ongoing	Planned date	Comments
Hygiene & Health					
Hygiene and personal protective equipment (PPE) supplied are procured, available and safely stored (cleaning material, disinfectants (at least 60% alcohol), soap, hand sanitizer, paper towels, masks, gloves, etc.)					
Entire school is disinfected before reopening ⁸					
Schedule developed for daily and weekly cleaning and disinfection of surfaces (door handles, desks, toys, features reserved for people with disability (handrails, etc.), toilets, etc.)					
School personnel trained on cleaning procedures and safe use of PPE					
School support staff (cleaners and guards) provided with PPE					
At least 1 toilet for every 30 girls and 1 for every 60 boys is available ⁹					
A minimum of 3l water per student is available and accessible ¹⁰					
Menstrual hygiene materials are available and safe disposal of them is possible					
Hygiene stations placed at strategic spots (entrance, exit, common areas, etc.)					
IEC material on COVID-19 and good hygiene practices are visible and accessible in strategic spots of schools					
Children and caretakers are trained on COVID-19 key messages and proper behaviour related to hygiene and steps to be taken when showing symptoms					

⁸More information available here:

https://resourcecentre.savethechildren.net/sites/default/files/documents/3_covid_19_returning_to_school_kit_v3_en.docx

⁹ INEE and Sphere standards

¹⁰ INEE and Sphere standards



	Yes	No	Ongoing	Planned date	Comments
School personnel is trained on good hygiene practices					
Hygiene awareness sessions are included throughout the lessons					
Guards/staff at the entrance ensure that no one steps into the site without washing their hands for 20 seconds/using sanitizer					
Thermometers procured and available at school					
Good ventilation of the class (natural air preferred, open windows)					
If possible, procure additional notebooks and pencils to avoid the sharing of those among children					
Physical distancing					
Child friendly messages are displayed for children's movement within the school and for entering and exiting school					
Tables are at least 2 metres apart from each other and classrooms are rearranged to ensure physical distancing					
School schedule is revised based on the school's capacity, including a staggered start of the day, adaption of shifts, etc.					
Identify smaller groups of children who learn and play together (groups should not mix)					
Protocols and Procedures					
COVID-19 focal point is identified and trained on protocols and procedures					
Children and caregivers are informed of school reopening procedures and precaution measures					
Track attendance (students and staff) closely and have clear follow up procedure in place to ensure cases are detected					
Establish protocol when a student or colleague displays symptoms of COVID-19 (temporary quarantine on site, recording of cases, referral to health actors, etc.)					
Contingency plan for new school closure and continuation of learning is developed					
Preferred communication channel (school personnel) is identified and calendar for regular meetings in place					
Emergency contact lists (caregivers, staff, health actors, etc.) are updated and available					
Wellbeing and Protection					
School personnel and PTAs/SMCs are trained on CP, safe identification, and referral mechanism					

	Yes	No	Ongoing	Planned date	Comments
School personnel and PTAs/SMCs are trained on Code of Conduct and PSEA and CoC is visible in schools including contact of Focal Points for reporting misconduct					
Plan for a progressive re-establishing of routines that includes at least 2 dedicated days of transition before changeover to an integrated approach that includes re-establishing routines and sharing experience.					
Specific sessions dedicated to COVID-19 related discussion are planned throughout the lessons schedule					
Include PSS and SEL activities into daily routine					
Establish/strengthen teacher support groups/TLCs/etc. and provide referrals to MHPSS services for teachers as needed					
Community engagement					
Community/PTAs/SMCs (including children and young people) are consulted to coordinate and support the back to school campaign					
Caregivers and children are informed about the reopening of schools (date, time, procedures and protocols)					
Community is sensitized with positive messages challenging stigmatisation of confirmed or suspected COVID-19 cases					
Regular meetings with the PTAs/SMCs are scheduled to discuss phases of safe school reopening					
Access to quality education					
Advise for a rearranged curriculum delivery was considered (check with MoE/Cluster for formal, NFE WG for non-formal)					
Indicators to determine children who are prioritised in phasing back to school are developed					
Clear system (face-to-face learning, home-based learning) for learning has been identified and communicated					
School personnel trained on blended learning approach					
Education monitoring procedures established, and responsibilities distributed for follow up					
Learners in need of additional support are identified					

References

- *Iraqi Education Cluster: Business Continuity for Education in Iraq* (available [here](#))
- *Global Education Cluster: Safe Back to School: A practitioner's guide* (available [here](#))
- *INEE Minimum Standards for Education: Preparedness, Response, Recovery* (available [here](#))
- *The Sphere Handbook: Humanitarian Charter and Minimum Standards in Humanitarian Responses* (available [here](#))
- *INTERSOS: COVID-19 Education in Emergency: Safe School Reopening Checklist*
- *War Child UK COVID-19 checklist for staff safety*