Responding to COVID-19 in Schools (K–12)

12/4/2020

How to Reduce the Spread Within the School

- Physical distancing (separation of all employees and students by at least 6 feet) and assign seats within the classrooms
- Implement multiple COVID-19 mitigation strategies (e.g. social distancing, cloth face coverings, and use of cohorting)
- Communicate, educate, and reinforce appropriate hygiene and social distancing practices in ways that are developmentally appropriate for students, teachers, and staff.
- Maintain healthy environments (e.g. cleaning and disinfecting frequently touched surfaces)
- Repurpose unused or underutilized school spaces to increase classroom space and facilitate social distancing
- Educate parents, caregivers, and staff on the importance of monitoring for symptoms before students and staff enter the school. Students or staff with symptoms should not go to school.
- Reinforce sick policies for both students and staff, encouraging everyone to stay home when ill. Additionally, allow staff to stay home to care for sick household members or quarantine if close contact to a case.

Cohorting

An important strategy that school administrators should strongly consider is cohorting (or forming "pods"). Cohorting forms groups of students, and sometimes teachers or staff, who stay together throughout the school day to minimize exposure for students, teachers, and staff across the school environment.

Students and staff within a cohort would only have physical proximity with others in the same cohort. This practice may help prevent the spread of COVID-19 by limiting crossover of students, teachers, and staff to the extent possible, thus:

- Decreasing opportunities for exposure to or transmission of COVID-19
- Facilitating more efficient contact tracing in the event of a positive COVID-19 case
- Allowing for targeted testing, quarantine, and isolation of a single cohort instead of school-wide measures in the event of a positive COVID-19 case or cluster of cases

Identifying Cases and Contacts

Once COVID-19 is identified among the school attendees or staff, school administrators should determine all close contacts associated within the school who had exposure to the case during the infectious period. A case is typically considered to be infectious from 2 days before symptoms first appear (or date of specimen collection for the first positive laboratory test for

people without symptoms) up to 10 days afterwards. Depending on the school's ability to cohort, the number of close contacts may be limited to one classroom or to a broader group of persons at the school.

A close contact is any individual, irrespective of whether a cloth face covering or face shield was used, who was within 6 feet of the case for a cumulative of 15 minutes or more within a 24-hour period, while they were infectious. School health staff or others using full PPE with face shields and surgical masks or N95 respirators would only be considered close contacts if there was a breach in their PPE protection.

Schools should work closely with the local county health department staff to facilitate contact tracing by providing a line list of known contacts and their phone numbers. In coordination with the CHD, schools should notify parents and other relevant contacts of the exposure. In addition, the school should clean and disinfect where the COVID-19 case spent time.

Exclusion from School

Schools should immediately exclude anyone from campus who is symptomatic, who has tested positive for COVID-19, or who is a close contact to a case of COVID-19. It is recommended that students and staff with symptoms of COVID-19 should be evaluated by a medical provider and tested. Cases and contacts should be allowed to return according to the criteria described in the section below.

Returning to School

Cases of COVID-19 should be allowed to return to school after meeting the following criteria:

- At least **10 days** have passed since symptoms first appeared **and**
- At least **24 hours** have passed without fever and without the use of fever-reducing medications **and**
- Symptoms (e.g., cough, shortness of breath) have improved

For cases of COVID-19 who were never symptomatic, individuals should be allowed to return after at least 10 days have passed since the specimen collection date of the first positive lab test.

Please note that based on the recommendation from a health care professional, persons with severe illness or patients who are severely immunocompromised may need to be isolated for 20 days.

Ideally, close contacts to cases of COVID-19 may return after completing a 14 day quarantine from the date of last exposure to the case. An alternative quarantine option that asymptomatic close contacts may follow includes being tested by PCR on Day 6 or later. If negative, they may leave quarantine after Day 7. Without testing, quarantine can end after Day 10, if no symptoms have been reported during daily monitoring. In both of these scenarios, individuals should continue to monitor for symptoms and practice social distancing, good hand hygiene, correct and consistent mask use, etc… through Day 14. Close contacts who develop symptoms within the 14 days should seek medical care and testing. Once the contact's symptoms resolve, if they test PCR-negative for COVID-19 on Day 6 or later after exposure, the contact may return to

school and activities after the 7-day quarantine period ends. If the contact tests positive or does not seek testing at all, then the individual is considered a case and should follow the release from isolation guidance for cases of COVID-19.

Important Role of Parents/Guardians

School administrators and teachers should communicate clearly and frequently with parents and guardians about keeping students home if they are symptomatic, have tested positive for COVID-19, or have had close contact to a case of COVID-19. Additionally, parents and guardians should screen their children prior to bringing them to school to ensure that students are not symptomatic. Symptomatic children should be taken to a medical provider to be appropriately evaluated and tested.

COVID-19 Testing

School administrators and teachers should be educated about the general characteristics of currently available COVID-19 tests and their uses. In general, the PCR test is more accurate than antigen tests; however, the PCR test may take longer to obtain results. While antigen tests typically provide quicker turnaround times for results, they are less precise than PCR tests.

Broad testing of all students and staff at the beginning of the school year or semester is **not** recommended.

Schools should consider the following options for COVID-19 testing of staff/students who have been excluded from school:

- Staff/students obtain testing through their private medical provider
- Staff/students obtain testing at a [public testing site](#) in their community
- County health departments facilitate testing, particularly when school outbreaks occur or if testing is needed to support decision making, such as closing a classroom or a school for cleaning.

Additionally, school districts may consider procuring their own COVID-19 testing capacity to support their operations. Antigen testing of symptomatic students or staff may be feasible using testing platforms such as Quidel's Sofia or BinaxNow. While the test is less sensitive and should not be used for screening of asymptomatic persons, it does produce results within roughly 15 minutes.

Decision to Close a School

The decision to close schools for in-person learning should be made together by local officials and the Department of Education in a manner that is transparent for students, staff, parents, caregivers and guardians, and all community members.

The decision to close schools for in-person learning should be based on a number of factors, such as:

- The importance of in-person education to the social, emotional, and academic growth and well-being of students;

- The [level of community transmission;](#)
- Whether cases have been identified among students and staff;
- Other indicators that local public health officials are using to assess the status of COVID-19 in their area; and
- Whether student and staff cohorts have been implemented within the school, which would allow for the quarantining of affected cohorts rather than full school closure.

Resources

[CDC Reopening Schools FAQs](#)

[CDC Options to Reduce Quarantine](#)