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Safe Schools During the COVID-19 Pandemic

New COVID-19 (/English/health-issues/conditions/COVID-19/Pages/default.aspx) vaccines offer families hope that everyday life, including school, can get back to normal.

Vaccines likely will not be available (/English/tips-tools/ask-the-pediatrician/Pages/when-can-children-get-the-COVID-19-vaccine.aspx) for most students this school year. The good news is that reopening schools for in-person learning does not seem to significantly increase community transmission of the virus. But it depends on whether schools are able to follow COVID-19 public health guidance.

All schools should aim to have students attend school in person, which is how they learn best. This means working with public health officials to get community spread of the virus under control. And then, when it is possible to re-open a school for in-person learning, layered safety measures can help keep students, teachers, and staff safe.

Why in-person school is best—when it is safe

Schools provide more than just academics to children and adolescents. In addition to reading, writing and math, students learn social and emotional skills, get exercise, and have access to mental health and other support services. For many children and adolescents, schools are safe and stimulating places to be while parents or guardians are working. For many families, schools are where kids get healthy meals, access to the internet, and other vital services.

The pandemic has been especially hard for Black, Hispanic/Latino, Native American/Alaska native children and adolescents and families living in poverty. One in 5 teens cannot complete schoolwork at home because they do not have a computer or internet connection.

Whether learning plans are in-person or virtual right now, schools need funding so they can provide safe and effective education for children.

What schools can do

To prevent the spread of SARS-CoV-2, the virus that causes COVID-19, there are a number of safety steps schools should take. No single one will completely eliminate COVID-19 risk, but together they can greatly reduce it. Key steps include:

Physical distancing. The goal for students and adults is to stay at least 6 feet apart. However, spacing desks at least 3 feet apart and avoiding close contact may have similar benefits for younger students--especially when they wear masks or cloth face coverings (/English/health-issues/conditions/COVID-19/Pages/Cloth-Face-Coverings-for-Children-During-COVID-19.aspx) and do not have COVID-19 symptoms (/English/health-issues/conditions/COVID-19/Pages/2019-Novel-Coronavirus.aspx). Teachers and staff also should physically distance from each other, limiting in-person meetings and avoiding areas such as staff lounges.

When possible, schools should use outdoor spaces and unused indoor spaces for instruction and meals to help with distancing. Activities like singing, band and exercising, for example, are safest outdoors and spread out.

Cloth face coverings & hand hygiene. All children over age 2 years and all adults should wear masks or cloth face coverings that cover the nose and mouth. When worn correctly, cloth face coverings are effective safe to wear for long periods of time such as during the school day. In addition, frequent hand washing (/English/health-issues/conditions/prevention/Pages/Hand-Washing-A-Powerful-Antidote-to-Illness.aspx) with soap and water is important for everyone.

Classroom routines. To help limit student interaction outside the classroom, schools should consider:

- Having teachers move between classrooms, rather than having students fill the hallways during passing periods. Block schedules (fewer classes in a given day and electives in shorter time periods) can help limit cross-over of students and teachers.

- Allowing students to eat lunches at their desks or in small groups outdoors instead of in crowded lunchrooms.

- Leaving classroom doors open to help reduce high-touch surfaces such as doorknobs.

Testing & temperature checks. Diagnostic testing is recommended when someone has COVID-19 symptoms, or recent known or suspected exposure to the virus. The CDC does not currently recommend (https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/k-12-testing.html) universal testing of all students and staff. Testing (/English/health-issues/conditions/COVID-19/Pages/Should-Your-Child-Be-Tested-for-COVID-19.aspx) only shows whether a person is infected at that specific moment in time and may not be useful in preventing outbreaks in school communities.

Taking all students' temperatures (/English/health-issues/conditions/fever/Pages/How-to-Take-a-Childs-Temperature.aspx)at school may also not be feasible. However, families should monitor students' health and keep them home if they have a fever of 100.4 degrees F or greater, or any signs of illness.

Exposure. Children appear less likely than adults to have symptoms and severe illness (/English/tips-tools/ask-the-pediatrician/Pages/Can-children-get-COVID-19.aspx) from COVID-19. Early studies also suggest those under age 10 may be less likely to be infected with and spread the infection. But schools still need to plan for exposures. If a student or staff member has close contact with someone known to have SARS-CoV-2 infection, they should quarantine for 14 days from the day they were in close contact (or the length of time recommended by local public health officials).

Close contact means being within 6 feet of the person for a total of at least 15 minutes within a 24-hour period. A person is known to be infected if they have a laboratory-confirmed infection or illness consistent with COVID-19.

Symptoms at school. School nurses should take the temperature of anyone who feels ill during the school day. There should be a specific area to separate or isolate students who don't feel well. To stay safe, school nurses should use PPE (personal protective equipment) such as N95 masks, surgical masks, gloves, and face shields.

Cleaning & disinfecting. Schools should follow CDC (https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/index.html) guidelines on proper disinfecting and sanitizing classrooms and common areas.

Buses, hallways and playgrounds

Since these are often crowded spaces, schools can:

- Give bus riders assigned seats and require them to wear a cloth face coverings on the bus. Encourage students who have other ways to get to school, including walking or biking (/English/safety-prevention/on-the-go/Pages/Safety-On-The-Way-To-School.aspx#%3a~%3atext=Walking%20and%20bike%20riding%20are%20healthy%20ways%20to%2cminutes%20of%20physical%20activity%20kids%20need%20each%20day.), to use those options.

- At school, mark hallways and stairs with one-way arrows on the floor to cut down on crowding in the halls. Assign lockers by group or eliminate use of lockers.

- Encourage outdoor activities such as using the playground in small groups. Playground equipment should be included in cleaning plans.

Other considerations

In addition to safety plans, there are other factors that school communities need to address:

Students at higher risk. Some students with high-risk medical conditions (/English/health-issues/conditions/chest-lungs/Pages/COVID-19-Information-for-Families-of-Children-and-Youth-with-Special-Health-Care-Needs.aspx) may need extra accommodations to stay safe. Talk with your pediatrician and school staff, including school nurses, to see if

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How to keep schools safe when reopening:

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- ☑ Clean and disinfect high-touch surfaces
- ☑ **Wash hands!**
- ☑ Desks 3-6 feet apart
- ☑ Fewer students and staff in the classroom
- ☑ Teachers move classrooms, not students
- ☑ Lunches at desks
- ☑ Use **outdoor spaces** when possible
- ☑ **Masks** for all adults and students
- ☑ Flexibility to go virtual if vir**us surges**

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your child needs additional solutions.

Students with disabilities. School reopening plans may have a greater impact on students with disabilities. It may be hard to transition back to in-school learning after missing out on instruction time. They may have had less access to school-based services such as occupational, physical and speech-language therapy (/English/health-issues/conditions/developmental-disabilities/Pages/Speech-Language-Therapy.aspx) or mental health support counseling. Schools should review the needs of each child with an Individualized Education Program (/English/health-issues/conditions/developmental-disabilities/Pages/Individualized-Education-Program.aspx) (IEP) before they return to school, and provide services even if virtual learning.

> **Immunizations & well-child exams (/English/family-life/health-management/Pages/Well-Child-Care-A-Check-Up-for-Success.aspx).** It is especially important for students to be up-to-date on their immunizations, including the flu (/English/health-issues/conditions/COVID-19/Pages/How-is-the-Flu-Different-From-COVID-19.aspx) vaccine, during the pandemic.

Behavioral health/emotional support. Your child's school should be prepared to support a wide range of mental health needs during the pandemic. This includes recognizing signs of anxiety or distress. Students may be grieving (/English/healthy-living/emotional-wellness/Building-Resilience/Pages/Grieving-Whats-Normal-When-to-Worry.aspx)loved ones lost to COVID-19, for example. They may fear that they and others will get sick, or face the stress of lost family income. Schools also can help students with suicidal (/English/health-issues/conditions/emotional-problems/Pages/Ten-Things-Parents-Can-Do-to-Prevent-Suicide.aspx) thoughts or behavior get needed support.

Screenings. Vision and hearing screening should continue in schools, when possible. These services help identify children in need of treatment as soon as possible to prevent interference with learning.

Nutrition. Many students receive healthy meals through school meal programs. More students might be eligible for free or reduced meals than before the pandemic. Schools should provide meal programs even if the school closes or the student is sick and stays home from school.

Remember

School during the COVID-19 pandemic may not feel like normal – at least for a while yet. But whatever form school takes, it continues to require everyone's support to make sure that it is healthy, safe and equitable for students, teachers, staff, and families.

More information

- Ask the Pediatrician: When can children get the COVID-19 vaccine? (/English/tips-tools/ask-the-pediatrician/Pages/when-can-children-get-the-COVID-19-vaccine.aspx)
- Working & Learning from Home During COVID-19 (/English/health-issues/conditions/COVID-19/Pages/Working-and-Learning-from-Home-COVID-19.aspx)
- Cloth Face Coverings for Children During COVID-19 (/English/health-issues/conditions/COVID-19/Pages/Cloth-Face-Coverings-for-Children-During-COVID-19.aspx)
- Ask the Pediatrician: Is it OK to see my pediatrician during COVID-19? (/English/tips-tools/ask-the-pediatrician/Pages/Is-it-OK-to-call-the-pediatrician-during-COVID-19-even-if-Im-not-sure-my-child-is-sick.aspx#%3a~%3atext=It%27s%20safe%2c%20necessary%2c%20and%20your%2cscreenings%2c%20and%20other%20needed%20care.)
- COVID-19 Guidance for Safe Schools (https://services.aap.org/en/pages/2019-novel-coronavirus-covid-19-infections/clinical-guidance/covid-19-planning-considerations-return-to-in-person-education-in-schools/) (AAP.org) (https://services.aap.org/en/news-room/news-releases/aap/2020/pediatricians-educators-and-superintendents-urge-a-safe-return-to-school-this-fall/)

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