# COVID-19: Role of Public Health and K-12 Schools in Preparedness and Response Efforts

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| **Communication and Coordination** | • Ensure that schools have contact information for Local Health Department (LHD) staff  
• Communicate summary information on the number of cases and contacts in the jurisdiction, district, and/or region to provide situational awareness for schools | • Establish one or more COVID-19 point person(s) at each school to coordinate with the LHD  
• Immediately report suspected outbreaks to LHD  
• Develop communication plans for students, parents and staff for when cases/outbreaks are reported  
• Ensure that students/staff have access to distance learning options  
• Create policy options to support those at higher risk for severe illness to limit their exposure risk (e.g. telework, modified job duties, virtual learning opportunities).  
• Ensure students and employees have related absences excused and have access to mental health services |
| **Testing**                  | • Coordinate specimen collection to confirm the presence of an outbreak in a school setting. This may be done through partnership with providers in nearby healthcare facilities (e.g., doctor offices, urgent care, hospitals located close to a school). | • Assist public health in encouraging testing of individuals with COVID-19 symptoms |
| **PPE and Cloth Face coverings** | • Make recommendations for the appropriate use of personal protective equipment (PPE) [only for clinical staff] and cloth face coverings in schools | • Ensure that clinical staff have access to PPE  
• Ensure that students and staff have access to cloth face coverings. Encourage the use of cloth face coverings in students and staff, when appropriate and feasible. |
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| Prevention Strategies          | • Provide health education messages to reduce the spread of disease  
• Provide specific prevention and control guidance when cases and outbreaks of disease are identified                                                                                                | • Develop recommendations and procedures for daily health screenings of students and staff  
• Widely communicate messages about hand hygiene and respiratory etiquette, steps to take if illness develops/staying home while ill, use of cloth face coverings, and physical distancing  
• Develop a plan for increased environmental cleaning and disinfection; access to cleaning/hygiene materials; and reduction of shared supplies/equipment  
• Promote flu vaccination when available and COVID-19 vaccination (if it becomes available)                                                                                   |
| Identification and Follow-up of Cases | • Follow-up on reports of suspected and confirmed cases  
• Interview cases to identify potential source(s) of exposure and identify all close contacts  
• Enroll cases in monitoring with the LHD  
• Ensure that cases are isolated appropriately and released from isolation, based on the VDH symptom- or test-based strategy  
• Partner with schools to assess any potential workplace exposures  
• Preserve the anonymity of patients and practitioners, according to §32.1-41 of the *Code of Virginia*. In situations where divulging a patient’s name may be required to identify other potentially exposed individuals, VDH will seek permission from the patient/adult proxy for release of information. | • Assist public health in follow-up, such as in identifying students and staff sharing a classroom or common area  
• Distribute educational messages to parents and students about COVID-19 symptoms and steps to take if they become ill  
• Ensure that school clinics can safely evaluate ill students. Partner with LHD to assess any potential exposures and refer exposed staff for LHD monitoring  
• Protect the confidentiality of students and staff who are part of case and contact investigations  
• Implement recommendations for cleaning/disinfection, including areas where cases have been (classrooms, buildings, etc). |
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| Follow-up with Contacts of Cases           | ● Communicate with all contacts identified by the cases or adult proxy. Place contacts in quarantine and enroll in public health monitoring. Refer contacts for testing as recommended.  
                                           | ● Release from quarantine as indicated, or coordinate for medical care/evaluation if symptoms develop. | ● Assist with outreach to students and staff identified as contacts, as requested by LHD |
| Essential Needs of Students and Staff*     | ● Work with local government, community organizations, and the school to ensure that essential needs are met for students and staff | ● Assist in identifying students/staff who may not be able to meet their essential needs while in isolation or quarantine* |
| Physical Distancing                        | ● Provide physical distancing recommendations for schools  
                                           | ● Use case, contact and outbreak data to inform recommendations for social distancing and school closure. | ● Develop plans to increase physical distancing in classrooms, food/dining areas, etc., including modifying the layout of classrooms, common areas and buses.  
                                           |                                                                                       | ● Develop contingency plans to halt classes and shut down in-person operations if disease spread reaches critical values. Communicate to parents and students about plans.  

* Schools with boarding programs should ensure appropriate housing for students in isolation or quarantine as well as other essential needs, including the delivery of meals and access to items such as toiletries.

**Resources:**