VDH Interim Guidance for Mitigation Measures in K-12 School Settings

To guide decisions about community mitigation measures needed to reduce the impact of COVID-19 on Virginians, VDH recommends local government and school officials work with local health districts to evaluate epidemiologic and other data to assess the extent of SARS-CoV-2 (the virus that causes COVID-19) transmission within their region, its effect on Virginians, and the ability of the healthcare system to function. These data should then be interpreted within the context of the local jurisdiction. VDH recommends that decisions to alter K-12 school programming, including decisions about in-person instruction, school dismissals or closures be handled at the most local level possible, considering both regional and local epidemiology, community characteristics, and local capacity. Although locality perspective is vital, it may be important to also consider the trends and indicators in neighboring localities. For example, individuals may live in one county but often work in another and/or schools may draw staff or students from multiple localities.

On September 15, 2020, the Centers for Disease Control and Prevention (CDC) published Indicators for Dynamic School Decision-Making in which they propose core and secondary indicators that states, localities and schools can use to aid in decision-making regarding school reopening for in-person learning. CDC recommendations are based on current knowledge of COVID-19 in the United States; it is intended to supplement state and local laws, rules, and regulations with which schools must comply. VDH will continue to monitor COVID-19 activity, guidance and scientific literature and update guidance as needed.

VDH recommends that communities and schools use the CDC Indicators for Dynamic School Decision-Making framework to assess the risk of introduction and transmission of SARS-CoV-2 in schools and to help inform decisions about school operations and necessary mitigation strategies. The CDC framework is best used together with the Interim VDH Guidance for Mitigation Measures in K12 Settings. To the extent possible, the CDC Indicators have been aligned to the Phase Guidance for Virginia Schools previously issued by the Commonwealth to further inform local approaches. Below is a summary of how these state and federal guidance documents on school reopening plans should be considered by local school leaders. As per the CDC framework, local data and capacity to successfully implement mitigation strategies should be carefully considered.

VDH created a pandemic metrics dashboard, inclusive of a "CDC School Metrics" tab that includes the CDC Indicators for Dynamic School Decision-Making. CDC recommends the core measures of incidence and RT-PCR test positivity be assessed for the surrounding community (e.g., county) and not for the schools or school divisions themselves. On the CDC School Metrics tab, users can find the following metrics:

Core Indicators:

- Total number of new cases per 100,000 persons within the last 14 days
- Percentage of RT-PCR tests that are positive during the last 14 days

Secondary Indicators:

The following secondary indicators can be used to support the decision making process in local communities but should not be used as the main criteria for determining the risk of disease transmission in schools.

- Percent change in new cases per 100,000 population during the last 7 days compared with the previous 7 days
- Percentage of hospital inpatient beds in the region that are occupied
- Percentage of hospital inpatient beds in the region that are occupied by patients with COVID-19
- Existence of localized community/public setting COVID-19 outbreaks

In addition to considering the extent of COVID-19 transmission, schools should assess their own ability to implement and adhere to the following key mitigation strategies intended to decrease transmission of COVID-19 in their facilities when making decisions to offer in-person classes.

- Consistent and correct use of masks
- Physical/Social distancing to the extent possible

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- Hand hygiene and respiratory etiquette
- Cleaning and disinfection
- Contact tracing in collaboration with local health department

More information about these mitigation strategies can be found here. These strategies are most effective when compliance is universal and when the strategies are all used together.

Evaluating the core disease transmission indicators together with the self-assessed measure of school implementation of mitigation strategies can help a community assess the risk of introduction and transmission of SARS-CoV-2 in schools. Secondary indicators can be used to support the conversations, but are not intended to be used as the main criteria to determine the risk of disease transmission in schools. Regardless of what the indicators determine, the more students or staff who interact and the longer that interaction, the higher the risk of SARS-CoV-2 spread. While risk of introduction and transmission in a school may be lower when community transmission is lower, this risk is dependent upon the implementation of school and community mitigation strategies. Adherence to mitigation strategies in schools and the broader community will reduce the risk of introduction and subsequent spread of SARS-CoV-2 in schools. Notably, even when a school carefully plans and prepares, cases of COVID-19 may still occur. Expecting and planning for the occurrence of cases in schools can help quickly mitigate the impact and may allow the school to remain open for in-person learning if deemed appropriate in collaboration with the local health department.

No matter the level of transmission risk in a school, the following recommendations currently apply:

- Remote learning exceptions and teleworking should be options for students and staff who are at high risk of severe illness (as defined by the CDC).
- Implement the relevant Department of Labor and Industry (DOLI) 16VAC25-220, Emergency Temporary Standard, which provides guidance for employers regarding COVID-19. More information can be found in the Coronavirus (COVID-19) FAQs webpage.
- At a minimum, schools should implement the 5 key mitigation strategies. Other mitigation strategies are outlined in Phase Guidance for Schools and within the CDC Indicators for Dynamic School Decision Making, "Mitigation strategies to reduce transmission of SARS-COV-2 in schools":
    - Consistent and correct use of masks
    - Social distancing to the extent possible
    - Hand hygiene and respiratory etiquette
    - Cleaning and disinfection
    - Contact tracing in collaboration with local health department

Messaging/Communications for all levels of transmission risk:

- Wear a cloth face covering while in public and when around other individuals who are not part of your household.
- Follow recommendations for physical distancing when attending social gatherings or while in public spaces.
- Encourage students and teachers to avoid large gatherings and other events or activities that may have high potential for COVID-19 transmission.
- Stay home when sick and follow all recommendations from public health officials. More information about Isolation and quarantine can be found here. Knowing when to end isolation/quarantine can be found here.

Considerations for Schools At "Lowest"
or "Lower" Risk of Transmission in School

Use Phase 3 Guidance for Virginia Schools for recommendations on the scope of programming and mitigation strategies and consider the following:
- In-person instruction may be offered for all students, as space allows to maintain 6 feet of physical distance between individuals.
- If distancing standards can not be met with all students present, priority should be given to providing in-person instruction to the students for whom in person instruction is most important (e.g., students with disabilities, preschool through third grade students, English learners).
- Consider restricting the mixing of classes/groups of students.
- Strongly encourage and/or consider requiring the use of cloth face coverings for staff and students (as developmentally feasible).
- Close or stagger the use of communal spaces.
- Discourage large school gatherings; gatherings should be limited to no more than 250 people.
- Recreational sports may occur if ten feet of physical distance can be maintained by all participants.
- Child care for working families may operate in schools.

Considerations for Schools At Moderate
or Higher Risk of Transmission in School

Use Phase 2 Guidance for Virginia Schools for recommendations on the scope of programming and mitigation strategies and consider the following:
- Prioritize specific learners for limited in-person instruction including students with disabilities (if the Individualized Education Program (IEP) team agrees it is appropriate and the parent consents), preschool through third grade students, and English learners.
- Consider remote instruction for all other students.
- Strongly encourage and/or consider requiring the use of cloth face coverings for staff and students (as developmentally feasible).
- Offer remote learning exceptions and teleworking options for students and staff who are at high risk of severe illness (as defined by the CDC).
- Eliminate or limit extracurricular activities that are not for the purpose of providing childcare.
- Restrict mixing classes/groups of students.
- Cancel social activities and gatherings that are not part of providing regular school services.
- Gatherings/recess should be limited to no more than 50 people. Indoor gatherings should be held only as necessary, and be limited in duration.
- Child care for working families may operate in schools.

Considerations for Schools At Highest Risk of Transmission in School

Use Phase 2 and Phase 1 Guidance for Virginia Schools for recommendations on the scope of programming and mitigation strategies and consider the following:

- Remote learning should be considered as the primary method of instruction, as described in Phase 1 Guidance for Virginia Schools.
- If at " highest" risk of transmission, limit in-person instruction to students with disabilities if the Individualized Education Program (IEP) team agrees it is appropriate and the parent consents.
- If at "higher" risk schools may consider in-person instruction for other priority student groups, such as preschool through third grade students and English learners.
- Eliminate or limit extracurricular activities that are not for the purpose of providing childcare.
- Cancel social activities and gatherings that are not part of providing regular school services.
- Child care for working families may operate in schools but should be limited to children in the local geographic area.
- Strongly encourage and/or consider requiring the use of cloth face coverings for staff and students (as developmentally feasible).

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References:

White House Opening Up America Again: https://www.whitehouse.gov/openingamerica/

CDC Implementation of Mitigation Strategies for Communities with Local COVID-19 Transmission: https://www.cdc.gov/coronavirus/2019-ncov/community/community-mitigation.html

CDC Activities and Initiatives Supporting the COVID-19 Response and the President's Plan for Opening America Up Again: https://www.cdc.gov/coronavirus/2019-ncov/downloads/php/CDC-Activities-Initiatives-for-COVID-19-Response.pdf

CDC Considerations for Schools: https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/schools.html

CDC Indicators for Dynamic School Decision-Making: https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/indicators.html

CDC Considerations for Monitoring and Evaluation of MItigation STrategies IMplemented in K-12 Schools: https://www.cdc.gov/coronavirus/2019-ncov/php/monitoring-evaluation-k-12.html

Resolve to Save Lives Fact Sheet (Draft): When and How to Close due to COVID-19 Spread: https://preventepidemics.org/wp-content/uploads/2020/04/COV020_WhenHowTightenFaucet_v3.pdf

Prevent Epidemics COVID-19 Playbook https://preventepidemics.org/covid19/resources/playbook/#Response-4-2

COVID-Local Metrics for Phased Reopening (RAND): https://covid-local.org/metrics/

The Urgency and Challenge of Opening K-12 Schools in the Fall of 2020, Sharfstein and Morphew, JAMA 2020: https://jamanetwork.com/journals/jama/fullarticle/2766822

COVID-19 Planning Considerations: Guidance for School Reentry, American Academy of Pediatrics. 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/

CDC Decision Tree for School Reopening: https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/Schools-Decision-Tree.pdf

National Academies of Sciences, Engineering, and Medicine 2020. *Reopening K-12 Schools During the COVID-19 Pandemic: Prioritizing Health, Equity, and Communities.* Washington, D.C.: The National Academies Press. https//doi.org/10.17226/25858

Revisions were made on August 31, 2020 to reflect the following:
- Added links to the Department of Labor and Industry (DOLI) guidance for employers
- Added "Approaching Moderate" and "Approaching Substantial" categories to reflect technical changes in dashboard.

Revisions were made on September 25 to reflect the following:
- Guidance from the CDC released September 14, 2020: Indicators for Dynamic School Decision-Making