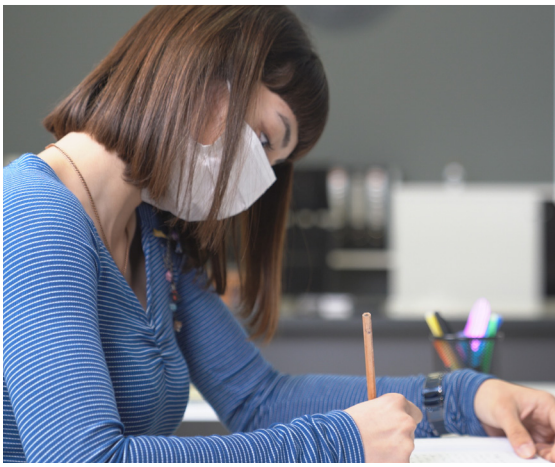
#StayStrongNC

StrongSchoolsNC
Public Health Toolkit (K-12)

INTERIM GUIDANCE AS OF JUNE 8, 2020



NC DEPARTMENT OF HEALTH AND HUMAN SERVICES

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Public Health Toolkit (K-12)

How Was This Guidance Developed?

Governor Cooper has implemented a three-phased approach to slowly lift restrictions while combating COVID-19, protecting North Carolinians and working together to recover the economy.

In order to secure the safety and protection of children and their families across the state, Governor Cooper, in collaboration with the NC State Board of Education (NCSBE) and the NC Department of Public Instruction (NCDPI), closed public school buildings for in-person instruction through Executive Order No. 117 on March 14, and extended through the rest of the 2019-2020 school year via Executive Orders Nos. 120 and 138.

On March 14, 2020, Governor Cooper established an Education and Nutrition Working Group to develop a plan to ensure that children and families were supported while schools were closed. Since then, the NC Department of Health and Human Services (NCDHHS) has worked closely with NCDPI and NCSBE to meet the nutritional, educational and child care needs of students during school closure, and plan for safely reopening schools for the 2020-2021 school year. Throughout the process, school, child care, child nutrition, and community leaders and stakeholders have been engaged to share ideas and provide input.

Why are Additional Health Requirements Needed Now?

COVID-19 is mostly spread by respiratory droplets released when people talk, cough, or sneeze. The virus may spread to hands from a contaminated surface and then to the nose or mouth, causing infection. That's why personal prevention practices (such as handwashing and staying home when sick) and environmental cleaning and disinfection are important practices covered in this Health Guidance.

Any scenario in which many people gather together poses a risk for COVID-19 transmission. While children generally experience mild symptoms with COVID-19, and, to date, have not been found to contribute substantially to the spread of the virus, transmission from even those with mild or no apparent symptoms remains a risk.

Symptoms may appear 2-14 days after exposure to the virus. People with these symptoms may have COVID-19:

- Fever or chills
- Shortness of breath or difficulty breathing
- New loss of taste or smell
- Congestion or runny nose
- Cough
- Fatigue
- Muscle or body aches
- Sore throat
- Headache

This list is not all possible symptoms. Other less common symptoms have been reported, including gastrointestinal symptoms like nausea,

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vomiting, or diarrhea. Fever is determined by measuring a temperature of 100.4 °F or greater, or feeling warm to the touch, or giving a history of feeling feverish.

While symptoms in children are similar to adults, children may have milder symptoms. Reported symptoms in children include cold-like symptoms, such as fever, runny nose, and cough. Children with COVID-19 may not initially present with fever and cough as often as adult patients.

Fortunately, there are many actions that school and district administrators can take to help lower the risk of COVID-19 exposure and spread during school sessions and activities.

How Should this Toolkit be Used?

Families and students should use this guidance to understand what health practices will be in place when students return to school. All public schools will be required to follow certain health practices in this guidance noted as "required." Many schools may also choose to implement some or all of the recommended practices.

Local education leaders are required to use this guidance to understand what health practices they must meet, and to develop detailed district and school plans for how to implement all required health practices described in this toolkit. The Public Health Toolkit should be used in combination with operational guidance provided by NCDPI which includes strategies to implement the health guidance in schools, and to address other non-health areas for reopening planning, including scheduling supports, how to approach instructional practice, and providing staff training.

Who Will Decide How Schools Can Reopen and Stay Open Safely?

The Governor's Office and NCDHHS, in consultation with NCSBE and NCDPI, will determine how schools can reopen safely for the 2020-21 school year based on the state's COVID-19 metrics by July 1st, 2020. Future decisions to increase or ease restrictions will be made if the state's or a region's COVID-19 metrics worsen or improve.

A combination of metrics is used to determine NC's progress in combating COVID-19 and guide the state's path forward. These metrics include:

- The number of lab-confirmed cases
- The percentage of positive tests relative to the total number of tests
- The number of daily hospitalizations
- The number of emergency department visits for COVID-like illness
- Overall state capacity for testing, contract tracing and supply of Personal Protective Equipment (PPE)

How Should Schools Plan for Different Scenarios Depending on COVID-19 Spread and Metrics?

Local education leaders are directed to plan for reopening K-12 public schools under three potential scenarios, depending on what restrictions are necessary when school opens, or at any time in the school year, to control the spread of the disease.

Schools are **required** to create the following three plans:

- **Plan A: Minimal Social Distancing –** Will be implemented assuming state COVID-19 metrics continue to stabilize and/or move in a positive direction. All requirements in this guidance apply to Plan A.
- **Plan B: Moderate Social Distancing –** Will be required if state COVID-19 metrics worsen and it is determined additional restrictions are necessary. All requirements in this guidance apply, with additional requirements in the Social Distancing and Minimizing Exposure section noted for Plan B only.
- **Plan C: Remote Learning Only –** Will be implemented only if state COVID-19 metrics worsen significantly enough to require suspension of in-person instruction and the implementation of remote learning for all students, based on the remote learning plans required by Session Law 2020-3. The requirements listed in this guidance would not apply, as students and staff would not be gathering together in groups on school grounds.

School districts may choose to implement a more restrictive Plan but may not choose to implement a less restrictive Plan than established by NCDHHS, NCSBE, and NCDPI.

Check out the Reopening K-12 Schools Decision Tree for more details.

Requirements and Recommendations

Practices that are **required** must be implemented by all North Carolina public school units. These practices are essential baseline actions in order to minimize risk of exposure to COVID-19 for students, staff, and families across North Carolina. They are intended to be a minimum.

Practices that are **recommended** are additional strategies that schools may choose to use to minimize spread of COVID-19. All recommended practices will not be possible in all settings and should be tailored to each school/district as appropriate.

The following includes sections on:

- Social Distancing and Minimizing Exposure
- Cloth Face Coverings
- Protecting Vulnerable Populations
- Cleaning and Hygiene
- Monitoring for Symptoms
- Handling Suspected, Presumptive or Confirmed Positive Cases of COVID-19
- Communication and Combating Misinformation
- Water and Ventilation Systems
- Transportation
- Coping and Resilience
- Additional Considerations
- Resources

Social Distancing and Minimizing Exposure

Social distancing is a key tool to decrease the spread of COVID-19. Social distancing ("physical distancing") means keeping space between yourself and other people outside of your home.

Schools are required to:

- ☐ Provide social distancing floor/seating markings in waiting and reception areas.
- ☐ Mark 6 feet of spacing to remind students and staff to always stay 6 feet apart in lines and at other times when they may congregate.
- ☐ Provide marks on the floors of restrooms and locker rooms to indicate proper social distancing.
- ☐ Limit nonessential visitors and activities involving external groups or organizations.
- ☐ Have staff monitor arrival and dismissal to discourage congregating and ensure students go straight from a vehicle to their classrooms and vice-versa.
- ☐ Discontinue the use of any self-service food or beverage distribution in the cafeteria (e.g. meals and/or snacks served at school should be individually packaged and served directly to students; milk or juice may be available separately and should also be served directly to students). As always, ensure the safety of children with food allergies.

Under Plan B only, schools are required to adhere to all requirements already outlined, AND:

- ☐ Ensure sufficient social distancing with at least 6 feet between people at all times in school facilities and on school transportation vehicles.
- ☐ Limit density of people in school facilities and transportation vehicles to no greater than 50% maximum occupancy to ensure social distancing of at least 6 feet apart between people.

It is recommended that schools:

- Minimize opportunities for sustained exposure (15 minutes or more) by ensuring sufficient social distancing with at least 6 feet between people whenever possible (e.g., adequate space exists in hallways, classrooms are large enough or class sizes are small enough, students and staff are in large outdoor spaces).
- Provide frequent reminders for students and staff to stay at least 6 feet apart from one another when feasible.
- Place physical barriers such as plexiglass for protection at reception desks and similar areas.
- Arrange desks or seating so that students are separated from one another by 6 feet when feasible. If it is not possible to arrange seating 6 feet apart, consider having all students sit facing the same direction (i.e., all sitting on the same side of a table), or using barriers between students.
- Designate hallways as one-way, posting directional reminders on the walls and/or floor.
- Designate entrance and exit doors for classrooms and restrooms to reduce the chance that people meet face to face.
- Keep students and teachers in small cohort groups that stay together as much as possible during the day, and from day to day. Limit mixing between cohort groups as much as possible (e.g., during recess, lunch in the cafeteria, arrival and dismissal, etc.)
- Follow the recommendations outlined in Interim Guidance for Administrators and Participants of Youth, College & Amateur Sports Programs.
- Discontinue activities that involve bringing together large groups of people or activities that do not allow for social distancing, including assemblies, in-person field trips, large groups using playground equipment simultaneously, etc.
- Incorporate virtual events such as field trips, parents/family meetings, assemblies, and performances where possible.
- If social distancing is not possible in the cafeteria, have meals delivered to the classroom or have students bring food from the cafeteria back to their classrooms to eat.

Cloth Face Coverings

Wearing cloth face coverings is strongly recommended but not required. Cloth face coverings are meant to protect other people in case the wearer is unknowingly infected but does not have symptoms. Cloth face coverings are not surgical masks, respirators, or other medical personal protective equipment. Face coverings should be worn by staff and students (particularly older students) if feasible, and are most essential in times when physical distancing is difficult. Consider cloth face coverings for younger children if it is determined they can reliably wear, remove, and handle masks following CDC guidance throughout the day. Individuals should be reminded frequently not to touch the face covering and to wash their hands.

Cloth face coverings should not be placed on:

- Anyone who has trouble breathing or is unconscious.
- Anyone who is incapacitated or otherwise unable to remove the face covering without assistance.
- Anyone who cannot tolerate a cloth face covering due to developmental, medical or behavioral health needs.

Schools are required to:

- ☐ Share guidance and information with staff, students, and families on the proper use, wearing, removal, and cleaning of cloth face coverings, such as CDC's guidance on wearing and removing cloth face masks and CDC's use of cloth face coverings.

It is strongly recommended that schools:

- Teach and reinforce the use of cloth face coverings for students and staff on buses or other school transportation vehicles, inside school buildings, and anywhere on school grounds, including outside. Wearing cloth face coverings is most important when students and staff cannot maintain six feet apart from each other.

Protecting Vulnerable Populations

Individuals who are considered high-risk for severe illness due to COVID-19 include people who:

- Are 65 years of age or older
- Have a high-risk condition that includes:
  - chronic lung disease or moderate to severe asthma
  - heart disease with complications
  - compromised immune system
  - severe obesity – body mass index of 40 or higher
  - other underlying medical conditions, particularly if not well controlled, such as diabetes, renal failure or liver disease

More information on who is at higher risk for severe illness due to COVID-19 is available from the CDC and NCDHHS.

Schools are required to:

- ☐ Systematically review all current plans (e.g., Individual Healthcare Plans, Individualized Education Plans or 504 plans) for accommodating students with special healthcare needs and update their care plans as needed to decrease their risk for exposure to COVID-19.
- ☐ Create a process for students/families and staff to self-identify as high risk for severe illness due to COVID-19 and have a plan in place to address requests for alternative learning arrangements or work re-assignments.

It is strongly recommended that schools:

- Implement remote or other learning options for students whose families choose for them not to be in a traditional classroom learning environment due to high-risk status for severe disease.
- Enable staff that self-identify as high risk for severe illness to minimize face-to-face contact and to allow them to maintain a distance of 6 feet from others, modify job responsibilities that limit exposure risk, or to telework if possible.

Cleaning and Hygiene

Washing hands with soap for 20 seconds or using hand sanitizer reduces the spread of disease.

Schools are required to:

- ☐ Provide adequate supplies to support healthy hygiene behaviors (e.g., soap, hand sanitizer with at least 60% alcohol for safe use by staff and older children, paper towels, and tissues).
- ☐ Teach and reinforce handwashing with soap and water for at least 20 seconds and/or the safe use of hand sanitizer that contains at least 60% alcohol by staff and older children.
- ☐ Increase monitoring to ensure adherence among students and staff.
  - Supervise use of hand sanitizer by students.
  - Ensure that children with skin reactions and contraindications to hand sanitizer use soap and water.
  - Reinforce handwashing during key times such as: Before, during, and after preparing food; Before eating food; After using the toilet; After blowing your nose, coughing, or sneezing; After touching objects with bare hands which have been handled by other individuals.
- ☐ Provide hand sanitizer (with at least 60% alcohol) at every building entrance and exit, in the cafeteria, and in every classroom, for safe use by staff and older students.
- ☐ Systematically and frequently check and refill hand sanitizers.
- ☐ Encourage staff and students to cough and sneeze into their elbows, or to cover with a tissue. Used tissues should be thrown in the trash and hands washed immediately with soap and water for at least 20 seconds.
- ☐ Incorporate frequent handwashing and sanitation breaks into classroom activity.
- ☐ Allow time between activities for proper cleaning and disinfection of high-touch surfaces.
- ☐ Establish a schedule for and perform ongoing and routine environmental cleaning and disinfection of high-touch areas (e.g., door handles, stair rails, faucet handles, toilet handles, playground equipment, drinking fountains, light switches, desks, tables, chairs, kitchen countertops, cafeteria and service tables, carts, and trays) with an EPA approved disinfectant for SARS-CoV-2 (the virus that causes COVID-19), and increase frequency of disinfection during high-density times and disinfect all shared objects (e.g., gym or physical education equipment, art supplies, toys, games) between use.
  - Paper-based materials, such as books and loose-leaf paper, are not considered high-risk for COVID-19 transmission, and do not need additional cleaning or disinfection procedures.
- ☐ Ensure safe and correct use and storage of cleaning and disinfection products, including securely storing and using products away from children, and allowing for adequate ventilation when staff use such products.
- ☐ Limit sharing of personal items and supplies such as writing utensils.
- ☐ Keep students' personal items separate and in individually labeled cubbies, containers or lockers.
- ☐ Limit use of classroom materials to small groups and disinfect between uses or provide adequate supplies to assign for individual student use.
- ☐ Ensure that all non-disposable food service items are minimally handled and washed with hot water and soap or in a dishwasher, or use disposable food service items such as plates and utensils.

It is recommended that schools:

- Avoid shared use of soft or other items that cannot be easily cleaned and disinfected, (e.g., stuffed toys, clay).

Monitoring for Symptoms

Conducting regular screening for symptoms and ongoing self-monitoring throughout the school day can help reduce exposure. Staff and students should be encouraged to self-monitor for symptoms such as fever, cough, or shortness of breath. If a student develops symptoms throughout the day, they must notify an adult immediately. More information on how to monitor for symptoms is available from the CDC.

Schools are required to:

- ☐ Enforce that staff and students stay home if:
  - They have tested positive for or are showing COVID-19 symptoms, until they meet criteria for return.
  - They have recently had close contact with a person with COVID-19, until they meet criteria for return.
- ☐ Conduct symptom screening of any person entering the building, including students, staff, family members, and other visitors. Screening may be provided at the school entrance, prior to arrival at school, or upon boarding school transportation. Example screening tools:
  - Symptom Screening Checklist: Elementary School Students (English | Spanish). Designed to be administered to person dropping off a young child.
  - Symptom Screening Checklist: Middle and High School Students or Any Person Entering the Building (English | Spanish). Designed to be administered to any person middle-school-aged or older, including students, staff, families, or visitors.
- ☐ Conduct daily temperature screenings for all people entering the school facility or boarding school transportation (see note on optional parent/guardian attestation).
  - Fever is determined by a measured temperature of 100.4 °F or greater.

Schools may choose to utilize a parent/guardian attestation of a symptom screening for their child in lieu of in-person screening for students who are boarding school transportation. However, a student whose parent/guardian submitted an attestation must be screened upon arrival at the school building.

- Example: Parent/Guardian Attestation (English | Spanish)

What About Testing?

The CDC does not currently recommend that universal testing through virology or serology testing be used to inform admitting students or staff into school.

Viral tests can only determine potential infection at a single point in time and may miss cases in the early stages of infection. It is currently unknown whether individuals are protected against reinfection from SARS-CoV-2 following recovery from COVID-19 illness.

- Individuals waiting to be screened must stand six feet apart from each other. Use tape or other markers on the floor for spacing.
- The staff person taking temperatures must wear a cloth face covering, and must stay six feet apart unless taking temperature.
- Use a touchless thermometer if one is available.
- If not available, use a tympanic (ear), digital axillary (under the arm), or temporal (forehead) thermometer. Use disposable thermometer covers that are changed between individuals.
- Do not take temperatures orally (under the tongue) because of the risk of spreading COVID-19 from respiratory droplets from the mouth.
- Staff person must wash hands or use hand sanitizer before touching the thermometer.
- Staff person must wear gloves if available and change between direct contact with individuals, and must wash hands or use hand sanitizer after removing gloves.
- Staff person must clean and sanitize the thermometer using manufacturer's instructions between each use.

Handling Suspected, Presumptive or Confirmed Positive Cases of COVID-19

Schools are required to:

- ☐ Post signage at the main entrance requesting that people who have been symptomatic with fever and/or cough not enter. Examples of signage such as Know Your Ws/Stop if You Have Symptoms flyers (English: Color, Black & White; Spanish: Color, Black & White).
- ☐ Educate staff, students, and their families about the signs and symptoms of COVID-19, when they should stay home and when they can return to school.
- ☐ Establish a dedicated space for symptomatic individuals that will not be used for other purposes.
- ☐ Immediately isolate symptomatic individuals to the designated area at the school, and send them home to isolate.
- ☐ Ensure symptomatic student remains under visual supervision of a staff member who is at least 6 feet away. The supervising adult should wear cloth face covering or a surgical mask.
- ☐ Require the symptomatic person to wear a cloth face covering or a surgical mask while waiting to leave the facility.
  - Cloth face coverings should not be placed on:
    - Anyone who has trouble breathing or is unconscious.
    - Anyone who is incapacitated or otherwise unable to remove the face covering without assistance.
    - Anyone who cannot tolerate a cloth face covering due to developmental, medical or behavioral health needs.
- ☐ Require school nurses or delegated school staff need to provide direct patient care to wear appropriate Personal Protective Equipment (PPE) and perform hand hygiene after removing PPE. Refer to the Infection Control Supplies Checklist for type of PPE needed.
- ☐ Implement cleaning and disinfecting procedure following CDC guidelines.
- ☐ Have a plan for how to transport an ill student or staff member home or to medical care.
- ☐ Adhere to the following process for allowing a student or staff member to return to school.
  - If a person has had a negative COVID-19 test, they can return to school once there is no fever without the use of fever-reducing medicines and they have felt well for 24 hours.
  - If a person is diagnosed with COVID-19 by a medical professional based on a test or their symptoms or does not get a COVID-19 test but has had symptoms, they should not be at school and should stay at home until they (or a family member if younger child) can answer YES to the following three questions:
    1. Has it been at least 10 days since the individual first had symptoms?
    2. Has it been at least 3 days since the individual had a fever (without using fever reducing medicine)?
    3. Has it been at least 3 days since the individual's symptoms have improved, including cough and shortness of breath?

Check out the Handling Suspected, Presumptive or Confirmed Cases of COVID-19 Flow Chart and Protocol.

- ☐ Notify local health authorities of confirmed COVID-19 cases among children and staff (as required by NCGS § 130A-136).
- ☐ Ensure that if a person with COVID-19 was in the school setting while infectious, school administrators coordinate with local health officials to notify staff and families immediately while maintaining confidentiality in accordance with FERPA, NCGS § 130A-143, and all other state and federal laws.
- ☐ If a student/employee has been diagnosed with COVID-19 but does not have symptoms, they must remain out of school until 10 days have passed since the date of their first positive COVID-19 diagnostic test, assuming they have not subsequently developed symptoms since their positive test.
- ☐ If a student/employee that has been diagnosed with COVID-19 or has been presumed positive by a medical professional due to symptoms, they are not required to have documentation of a negative test in order to return to school.
- ☐ If a student/employee has been determined to have been in close contact with someone diagnosed with COVID-19, they must remain out of school for 14 days since the last date of exposure unless they test positive. In which case, exclusion criteria above would apply. They must complete the full 14 days of quarantine, even if they test negative.
- ☐ Provide remote learning options for students unable to be at school due to illness or exposure.

It is recommended that schools:

- Establish and enforce sick policies to prevent the spread of disease, including:
  - Enforcing staff staying home if sick.
  - Encouraging liberal use of sick leave policy.
- Establish and encourage liberal use of sick days for students and discontinue attendance-dependent awards and ratings.
- Develop plans for backfilling positions of employees on sick leave and consider cross-training to allow for changes of staff duties.

Communication and Combating Misinformation

Help ensure that the information staff, students and their families are getting is coming directly from reliable resources. Use resources from a trusted source like the CDC and NCDHHS to promote behaviors that prevent the spread of COVID-19.

Schools are required to:

- ☐ Disseminate COVID-19 information and combat misinformation through multiple channels to staff, students and families. Ensure that families are able to access communication channels to appropriate staff at the school with questions and concerns.
  - Some reliable sources include: NCDHHS COVID-19 Webpage; Know Your Ws: Wear, Wait, Wash; NCDHHS COVID-19 Latest Updates; NCDHHS COVID-19 Materials & Resources, and the additional resources listed in this public health toolkit.
- ☐ Put up signs, posters, and flyers at main entrances and in key areas throughout school buildings and facilities such as those found on the Social Media Toolkit for COVID-19 to remind students and staff to use face coverings, wash hands, and stay six feet apart whenever possible (Wear, Wait, Wash).
  - Know Your W's signs are available in English and Spanish.
  - Teach students who cannot yet read what the signs' language and symbols mean.

It is recommended that schools:

- Make reliable, age-appropriate, and culturally responsive information available to students, families, and staff about COVID-19 prevention and mitigation strategies, using methods such as sharing resources through social media, newsletters that include videos, hosting online webinars, or distributing printed materials like FAQs.
- Share regular announcements on reducing the spread of COVID-19 on PA systems.
- Include messages and updates about stopping the spread of COVID-19 in routine communications with staff, students and families, such as in newsletters, emails, and online.
- Involve students' families in outreach by utilizing the PTA or other local groups/organizations to support disseminating important information on COVID-19.

Water and Ventilation Systems

When reopening a building after it has been closed for a long period of time, it is important to keep in mind that reduced use of water and ventilation systems can pose their own health hazards. There is an increased risk for Legionella and other bacteria that come from stagnant or standing water.

It is recommended that schools:

- Take steps to ensure that all water systems and features (e.g., sink faucets, drinking fountains) are safe to use after a prolonged facility shutdown by following the CDC's Guidance for Reopening Buildings After Prolonged Shutdown or Reduced Operation to minimize the risk of diseases associated with water.
- Ensure ventilation systems operate properly and increase circulation of outdoor air as much as possible by opening windows and doors, using fans, or other methods. Do not open windows and doors if they pose a safety or health risk to people using the facility.
- Provide cups or alternative procedures to minimize use of water fountains.

Transportation

Local education leaders and schools should follow the guidelines below for their transportation vehicles (e.g., buses, vans).

Schools and Local Education Agencies are required to:

- ☐ Clean and disinfect transportation vehicles regularly. Children must not be present when a vehicle is being cleaned.
- ☐ Ensure safe and correct use and storage of cleaning and disinfection products, including storing products securely away from children and adequate ventilation when staff use such products.
- ☐ Clean and disinfect frequently touched surfaces in the vehicle (e.g., surfaces in the driver's cockpit, hard seats, arm rests, door handles, seat belt buckles, light and air controls, doors and windows, and grab handles) prior to morning routes and prior to afternoon routes.
- ☐ Keep doors and windows open when cleaning the vehicle and between trips to let the vehicles thoroughly air out.
- ☐ Clean, sanitize, and disinfect equipment including items such as car seats and seat belts, wheelchairs, walkers, and adaptive equipment being transported to schools.
- ☐ Follow the symptom screening protocol outlined in the Monitoring for Symptoms section above for any person entering a school transportation vehicle, which could be using the option of a parent/guardian attestation. Individuals must stay home and not board transportation if they are experiencing symptoms of COVID-19 or have been exposed to someone positive for COVID-19.
  - Note: Upon arrival at school, students do not need to be rescreened if screening was followed prior to entry into the vehicle. However, as noted above, if a parent/guardian provided an attestation only, students do need to be screened upon arrival at school.
- ☐ Create a plan for getting students home safely if they are not allowed to board the vehicle.
- ☐ Enforce that if an individual becomes sick during the day, they must not use group transportation to return home and must follow protocols outlined above.
- ☐ If a driver becomes sick during the day, they must follow protocols outlined above and must not return to drive students.
- ☐ Provide hand sanitizer (with at least 60% alcohol) to support healthy hygiene behaviors on all school transportation vehicles for safe use by staff and older children.
  - Hand sanitizer should only remain on school transportation while the vehicles are in use.
  - Systematically and frequently check and refill hand sanitizers.

It is recommended that schools and Local Education Agencies:

- Identify at least one adult to accompany the driver to assist with screening and/or supervision of students during screening of on-boarding passengers, and to monitor children during transport.
- Allow for 6 feet of social distancing between students, and between students and the driver, while seated on vehicles if feasible (e.g., by utilizing larger vehicles with more seats, by increasing frequency of routes to reduce occupancy, one rider per seat in every other row).
- Consider keeping windows open while the vehicle is in motion to help reduce spread of the virus by increasing air circulation, if appropriate and safe.
- If feasible, park vehicles in a safe location away from the flow of traffic so that the screening can be conducted safely.

Coping and Resilience

The outbreak of COVID-19 can be stressful for many. Fear and anxiety about a disease can be overwhelming and cause strong emotions in adults and children. Schools can play an important role in helping students and staff cope and build resilience to support the well-being of the school community.

Schools are required to:

- ☐ Provide staff, families, and students (if age-appropriate) with information on how to access resources for mental health and wellness (e.g. 211 and Hope4NC Helpline 1-855-587-3463)

It is recommended that schools:

- Increase capacity to deliver social support services by increasing number of on-site social workers.
- Encourage staff, students, and families to talk with people they trust about their concerns about COVID-19 and how they are feeling.

Additional Considerations

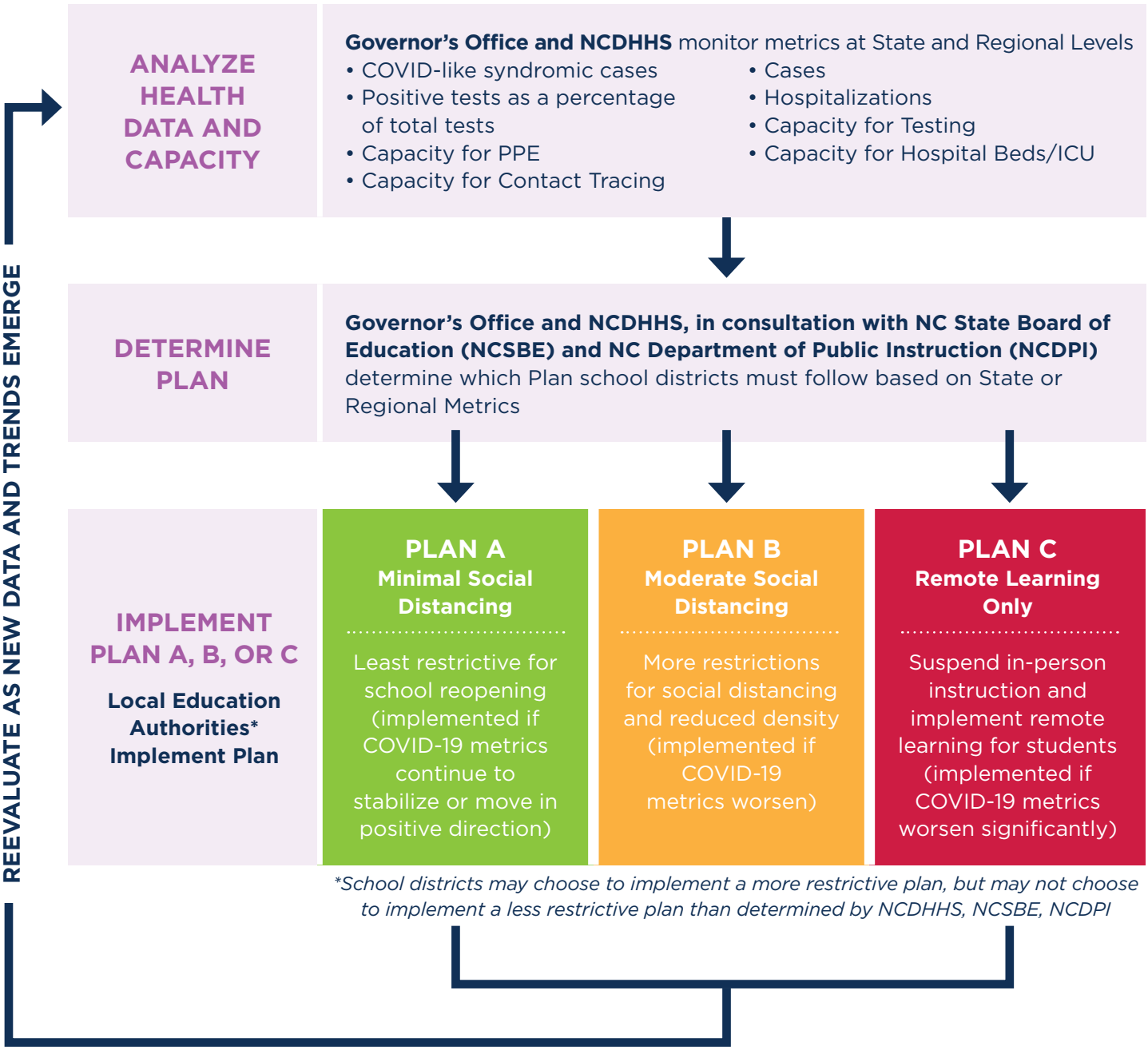
It is recommended that schools:

- Designate a single staff member to be the COVID-19 point of contact for the school in collaboration with district school nurses. Ensure that staff, students, and families know how to contact that individual. If students are old enough, consider a student counterpart for this role to be a source of information for students, thereby supporting student ownership and responsibility for creating a safe and healthy campus.
- Increase capacity to deliver health services by increasing number of on-site school nurses.
- Conduct ongoing regular training among all staff on updated health and safety protocols.
- Partner with other institutions in the community to promote communication and cooperation in responding to COVID-19.

Resources

- NCDHHS: North Carolina COVID-19
- CDC: Considerations for Schools
- CDC: Cleaning and Disinfecting Your Facility
- CDC: Reopening Guidance
- CDC: Coping with Stress
- EPA: Disinfectants for Use Against SARS-CoV-2
- FDA: Food Safety and the Coronavirus Disease 2019 (COVID-19)
- HHS/OSHA: Guidance on Preparing Workplaces for COVID-19
- DHS: Guidance on the Essential Critical Infrastructure Workforce

Reopening K-12 Schools Decision Tree



School districts may choose to implement a more restrictive plan, but may not choose to implement a less restrictive plan than determined by NCDHHS, NCSBE, NCDPI

SYMPTOM SCREENING CHECKLIST:

Middle and High School Students or Any Person Entering the Building

The person conducting screenings should maintain a six-foot distance while asking questions. Ask each person entering the building the following questions prior to entering the facility or school transportation vehicle.

Anyone showing symptoms of COVID-19 or who may have been exposed to COVID-19 should not be at school.

1. Have you had close contact (within 6 feet for at least 15 minutes) in the last 14 days with someone diagnosed with COVID-19, or has any health department or health care provider been in contact with you and advised you to quarantine?

- ☐ Yes > The person should not be at school. The person can return 14 days after the last time they had close contact with someone with COVID-19, or as listed below.
- ☐ No > The person can be at school if they are not experiencing symptoms.

2. Since you were last at school, have you had any of these symptoms?

- ☐ Fever
- ☐ Chills
- ☐ Shortness of breath or difficulty breathing
- ☐ New cough
- ☐ New loss of taste or smell

If a person has any of these symptoms, they should go home, stay away from other people, and call their health care provider.

3. Since you were last at school, have you been diagnosed with COVID-19?

- ☐ Yes
- ☐ No

If a person is diagnosed with COVID-19 based on a test, their symptoms, or does not get a COVID-19 test but has had symptoms, they should not be at school and should stay at home until they meet the criteria below.

Returning to School

A person can return to school when a family member can ensure that they can answer YES to ALL three questions:

- ☐ Has it been at least 10 days since the child first had symptoms?
- ☐ Has it been at least 3 days since the child had a fever (without using fever reducing medicine)?
- ☐ Has it been at least 3 days since the child's symptoms have improved, including cough and shortness of breath?

If a person has had a negative COVID-19 test, they can return to school once there is no fever without the use of fever-reducing medicines and they have felt well for 24 hours.

If a person has been diagnosed with COVID-19 but does not have symptoms, they should remain out of school until 10 days have passed since the date of their first positive COVID-19 diagnostic test, assuming they have not subsequently developed symptoms since their positive test.

If a person has been determined to have been in close contact with someone diagnosed with COVID-19, they should remain out of school for 14 days since the last known contact, unless they test positive. In which case, criteria above would apply. They must complete the full 14 days of quarantine even if they test negative.

LISTA DE VERIFICACIÓN PARA EVALUACIÓN DE SÍNTOMAS EN PLANTELES, DESDE JARDÍN DE NIÑOS, HASTA EL GRADO 12:

Alumnos de secundaria y preparatoria, o cualquier persona que ingrese al plantel

La persona realizando las evaluaciones debe mantener una distancia de seis pies mientras hace preguntas. Antes de entrar al plantel o al transporte escolar, haga las siguientes preguntas a cada persona que entre.

Cualquier persona que muestre síntomas de COVID-19, o que posiblemente haya estado expuesta a COVID-19, no debe estar en la escuela.

1. En los últimos 14 días, ¿ha tenido contacto cercano (a 6 pies de distancia y por lo menos 15 minutos) con alguien diagnosticado con el COVID-19, o algún departamento de salud o algún proveedor de atención médica ha estado en contacto con usted y le ha aconsejado que se ponga en cuarentena?

- ☐ Sí > La persona no debe estar en la escuela. La persona puede regresar 14 días después desde la última vez que tuvo contacto cercano ante alguien con el COVID-19, o según se lista a continuación.
- ☐ No > La persona puede estar en la escuela si no presenta síntomas.

2. Desde la última vez que estuvo en la escuela, ¿ha presentado alguno de los siguientes síntomas?

- ☐ Fiebre
- ☐ Escalofríos
- ☐ Falta de aliento o dificultad para respirar
- ☐ Nueva tos
- ☐ Nueva pérdida del sentido del olfato o del gusto

Si una persona presenta alguno de estos síntomas, debe regresar a casa, mantenerse alejado de otras personas y llamar a su proveedor de atención médica.

3. Desde la última vez que estuvo en la escuela, ¿le han diagnosticado COVID-19?

- ☐ Sí
- ☐ No

Si una persona es diagnosticada con el COVID-19 en base a resultados de una prueba, o a los síntomas que muestra, o bien, no recibe una prueba de COVID-19, pero ha presentado síntomas, no debe estar en la escuela y debe quedarse en casa hasta cumplir con los siguientes criterios.

Regreso a la escuela

Una persona puede regresar a la escuela cuando un familiar pueda asegurarse de que puede responder SÍ a TODAS las siguientes tres preguntas:

- ☐ ¿Han pasado por lo menos 10 días desde que el niño presentó los primeros síntomas?
- ☐ ¿Han pasado por lo menos 3 días desde que el niño tuvo fiebre (sin usar medicamentos para reducir la fiebre)?
- ☐ ¿Han pasado por lo menos 3 días desde que los síntomas del niño mejoraron, incluyendo la tos y la falta de aliento?

Si una persona ha dado resultado negativo a la prueba de COVID-19, puede regresar a la escuela una vez que no tenga fiebre -sin hacer uso de medicamentos para bajar la fiebre,- y que se haya sentido bien durante 24 horas.

Si una persona ha sido diagnosticada con COVID-19, pero no tiene síntomas, debe permanecer fuera de la escuela hasta que hayan pasado 10 días desde la fecha de la primera muestra de prueba de diagnóstico de COVID-19 con resultado positivo, suponiendo que posteriormente no haya desarrollado síntomas desde su resultado positivo a la prueba.

Si se determina que una persona ha estado en contacto cercano con alguien diagnosticado con el COVID-19, debe permanecer fuera de la escuela durante 14 días a menos desde el último contacto conocido, a menos que la prueba resulte positiva; en cuyo caso, se aplicarían los criterios anteriores. Deben completar los 14 días completos de cuarentena, incluso si dan negativo.

SYMPTOM SCREENING CHECKLIST:

Elementary School Students

The person conducting screenings should maintain a six-foot distance while asking questions. Ask the person dropping off the child the following questions before entering the facility or school transportation vehicle. If no person accompanying the child during drop-off, use your best judgment if the child can respond on their own.

Anyone showing symptoms of COVID-19 or who may have been exposed to COVID-19 should not be at school.

1. Have any of the children you are dropping off had close contact (within 6 feet for at least 15 minutes) in the last 14 days with someone diagnosed with COVID-19, or has any health department or health care provider been in contact with you and advised you to quarantine?

- ☐ Yes > The child should not be at school. The child can return 14 days after the last time he or she had close contact with someone with COVID-19, or as listed below.
- ☐ No > The child can be at school if the child is not experiencing symptoms.

2. Do any of the children you are dropping off have any of these symptoms?

- ☐ Fever
- ☐ Chills
- ☐ Shortness of breath or difficulty breathing
- ☐ New cough
- ☐ New loss of taste or smell

If a child has any of these symptoms, they should go home, stay away from other people, and the family member should call the child's health care provider.

3. Since they were last at school, have any of the children you are dropping off been diagnosed with COVID-19?

- ☐ Yes
- ☐ No

If a child is diagnosed with COVID-19 based on a test, their symptoms, or does not get a COVID-19 test but has had symptoms, they should not be at school and should stay at home until they meet the criteria below.

Returning to School

A child can return to school when a family member can ensure that they can answer YES to ALL three questions:

- ☐ Has it been at least 10 days since the child first had symptoms?
- ☐ Has it been at least 3 days since the child had a fever (without using fever reducing medicine)?
- ☐ Has it been at least 3 days since the child's symptoms have improved, including cough and shortness of breath?

If a child has had a negative COVID-19 test, they can return to school once there is no fever without the use of fever-reducing medicines and they have felt well for 24 hours.

If a child has been diagnosed with COVID-19 but does not have symptoms, they should remain out of school until 10 days have passed since the date of their first positive COVID-19 diagnostic test, assuming they have not subsequently developed symptoms since their positive test.

If a child has been determined to have been in close contact with someone diagnosed with COVID-19, they should remain out of school for 14 days since the last known contact, unless they test positive. In which case, criteria above would apply. They must complete the full 14 days of quarantine even if they test negative.

LISTA DE VERIFICACIÓN PARA EVALUACIÓN DE SÍNTOMAS EN PLANTELES, DESDE JARDÍN DE NIÑOS, HASTA EL GRADO 12:

Alumnos de escuela primaria

La persona realizando las evaluaciones debe mantener una distancia de seis pies mientras hace preguntas. Antes de entrar a la instalación o al transporte escolar, haga las siguientes preguntas a la persona dejando al niño. Si ninguna persona acompaña al niño en ese momento, use su mejor criterio si el niño puede responder por sí solo.

Cualquier persona que muestre síntomas de COVID-19, o que posiblemente haya estado expuesta a COVID-19, no debe estar en la escuela.

1. En los últimos 14 días, ¿el niño que está pasando a dejar ha tenido contacto cercano (a 6 pies de distancia, por lo menos durante 15 minutos) con alguien diagnosticado con el COVID-19, o algún departamento de salud o algún proveedor de atención médica ha estado en contacto con usted y le ha aconsejado que se ponga en cuarentena?

- ☐ Sí > El niño no debe estar en la escuela. El niño puede regresar 14 días después desde la última vez que tuvo contacto cercano ante alguien con COVID-19, o según se lista a continuación.
- ☐ No > El niño puede estar en la escuela si no presenta síntomas.

2. ¿Alguno de los niños que está pasando a dejar presenta alguno de los siguientes síntomas?

- ☐ Fiebre
- ☐ Escalofríos
- ☐ Falta de aliento o dificultad para respirar
- ☐ Nueva tos
- ☐ Nueva pérdida del sentido del olfato o del gusto

Si un niño presenta alguno de estos síntomas, debe regresar a casa, mantenerse alejado de otras personas y un familiar debe llamar al proveedor de atención médica del niño.

3. Desde la última vez que estuvo en la escuela, ¿el niño que está pasando a dejar ha sido diagnosticado con el COVID-19?

- ☐ Sí
- ☐ No

Si un niño es diagnosticado con el COVID-19 en base a resultados de una prueba, o a los síntomas que muestra, o bien, no recibe una prueba de COVID-19, pero ha presentado síntomas, no debe estar en la escuela y debe quedarse en casa hasta cumplir con los siguientes criterios.

Regreso a la escuela

Un niño puede regresar a la escuela cuando un familiar pueda asegurarse de que puede responder SÍ a TODAS las siguientes tres preguntas:

- ☐ ¿Han pasado por lo menos 10 días desde que el niño presentó los primeros síntomas?
- ☐ ¿Han pasado por lo menos 3 días desde que el niño tuvo fiebre (sin usar medicamentos para reducir la fiebre)?
- ☐ ¿Han pasado por lo menos 3 días desde que los síntomas del niño mejoraron, incluyendo la tos y la falta de aliento?

Si un niño ha dado resultado negativo a la prueba de COVID-19, puede regresar a la escuela una vez que no tenga fiebre -sin hacer uso de medicamentos para bajar la fiebre,- y que se haya sentido bien durante 24 horas.

Si un niño ha sido diagnosticado con COVID-19, pero no tiene síntomas, debe permanecer fuera de la escuela hasta que hayan pasado 10 días desde la fecha de la primera muestra de prueba de diagnóstico de COVID-19 con resultado positivo, suponiendo que posteriormente no haya desarrollado síntomas desde su resultado positivo a la prueba.

Si se determina que un niño ha estado en contacto cercano con alguien diagnosticado con el COVID-19, debe permanecer fuera de la escuela durante 14 días a menos que la prueba resulte positiva; en cuyo caso, se aplicarían los criterios anteriores. Deben completar los 14 días completos de cuarentena, incluso si dan negativo.

K-12 SCHOOLS SYMPTOM SCREENING:

Parent/Guardian Attestation

Child's First Name: _____ **Child's Last Name:** _____

Parent/Guardian First Name: _____ **Parent/Guardian Last Name:** _____

1. Has your child had close contact (within 6 feet for at least 15 minutes) in the last 14 days with someone diagnosed with COVID-19, or has any health department or health care provider been in contact with you and advised you to quarantine?

- ☐ Yes > The child should not be at school. The child can return 14 days after the last time he or she had close contact with someone with COVID-19, or as listed below.
- ☐ No > The child can be at school if the child is not experiencing symptoms.

2. Does your child have any of these symptoms?

- ☐ Fever
- ☐ Chills
- ☐ Shortness of breath or difficulty breathing
- ☐ New cough
- ☐ New loss of taste or smell

If a child has any of these symptoms, they should stay home, stay away from other people, and you should call the child's health care provider.

3. Since they were last at school, has your child been diagnosed with COVID-19?

- ☐ Yes
- ☐ No

If a child is diagnosed with COVID-19 based on a test, their symptoms, or does not get a COVID-19 test but has had symptoms, they should not be at school and should stay at home until they meet the criteria below.

Example

A child can return to school when a family member can ensure that they can answer YES to ALL three questions:

- ☐ Has it been at least 10 days since the child first had symptoms?
- ☐ Has it been at least 3 days since the child had a fever (without using fever reducing medicine)?
- ☐ Has it been at least 3 days since the child's symptoms have improved, including cough and shortness of breath?

If a child has had a negative COVID-19 test, they can return to school once there is no fever without the use of fever-reducing medicines and they have felt well for 24 hours.

If a child has been diagnosed with COVID-19 but does not have symptoms, they should remain out of school until 10 days have passed since the date of their first positive COVID-19 diagnostic test, assuming they have not subsequently developed symptoms since their positive test.

If a child has been determined to have been in close contact with someone diagnosed with COVID-19, they should remain out of school for 14 days since the last known contact, unless they test positive. In which case, criteria above would apply. They must complete the full 14 days of quarantine even if they test negative.

I attest that the following information is true to the best of my knowledge as of:

_____ / _____ / _____ , _____ : _____ **AM PM** **Signature:** _____

MONTH DAY YEAR TIME CIRCLE ONE

EVALUACIÓN DE SÍNTOMAS EN PLANTELES ESCOLARES, DESDE JARDÍN DE NIÑOS, HASTA EL GRADO 12:

Testimonio del padre, madre o tutor legal

Nombre del menor: _____ **Apellido del menor:** _____

Nombre del padre, madre o tutor legal: _____ **Apellido del padre, madre o tutor legal:** _____

1. En los últimos 14 días, ¿su niño ha tenido contacto cercano (a 6 pies de distancia y por lo menos 15 minutos) con alguien diagnosticado con el COVID-19, o algún departamento de salud o algún proveedor de atención médica ha estado en contacto con usted y le ha aconsejado que se ponga en cuarentena?

- ☐ Sí > El niño no debe estar en la escuela. El niño puede regresar 14 días después desde la última vez que tuvo contacto cercano ante alguien con COVID-19, o según se lista a continuación.
- ☐ No > El niño puede estar en la escuela si no presenta síntomas. .

2. ¿Su niño presenta alguno de los siguientes síntomas?

- ☐ Fiebre
- ☐ Escalofríos
- ☐ Falta de aliento o dificultad para respirar
- ☐ Nueva tos
- ☐ Nueva pérdida del sentido del olfato o del gusto

Si un niño presenta alguno de estos síntomas, debe regresar a casa, mantenerse alejado de otras personas y usted debe llamar al proveedor de atención médica del niño.

3. Desde la última vez que el niño estuvo en la escuela, ¿le han diagnosticado COVID-19 al niño?

- ☐ Sí
- ☐ No

Si un niño es diagnosticado con el COVID-19 en base a resultados de una prueba, o a los síntomas que muestra, o bien, no recibe una prueba de COVID-19, pero ha presentado síntomas, no debe estar en la escuela y debe quedarse en casa hasta cumplir con los siguientes criterios.

Ejemplo

Un niño puede regresar a la escuela cuando un familiar pueda asegurarse de que puede responder SÍ a TODAS las siguientes tres preguntas:

- ☐ ¿Han pasado por lo menos 10 días desde que el niño presentó los primeros síntomas?
- ☐ ¿Han pasado por lo menos 3 días desde que el niño tuvo fiebre (sin usar medicamentos para reducir la fiebre)?
- ☐ ¿Han pasado por lo menos 3 días desde que los síntomas del niño mejoraron, incluyendo la tos y la falta de aliento?

Si un niño ha dado resultado negativo a la prueba de COVID-19, puede regresar a la escuela una vez que no tenga fiebre -sin hacer uso de medicamentos para bajar la fiebre,- y que se haya sentido bien durante 24 horas.

Si un niño ha sido diagnosticado con COVID-19, pero no tiene síntomas, debe permanecer fuera de la escuela hasta que hayan pasado 10 días desde la fecha de la primera muestra de prueba de diagnóstico de COVID-19 con resultado positivo, suponiendo que posteriormente no haya desarrollado síntomas desde su resultado positivo a la prueba.

Si se determina que un niño ha estado en contacto cercano con alguien diagnosticado con el COVID-19, debe permanecer fuera de la escuela durante 14 días a menos desde el último contacto conocido, a menos que la prueba resulte positiva; en cuyo caso, se aplicarían los criterios anteriores. Deben completar los 14 días completos de cuarentena, incluso si dan negativo

Doy fe de que la siguiente información es verdadera, a mi mejor saber y entender, a la fecha del:

_____ / _____ / _____ , _____ : _____ **AM PM** **Firma:** _____

MES DÍA AÑO HORA MARQUE UNO

Handling Suspected, Presumptive or Confirmed Cases of COVID-19 Flow Chart and Protocol

Screening Flow Chart

Screen for COVID-19

NO FLAGS

Proceed to school

EXPOSURE, NO SYMPTOMS

Cannot go to school

- Home for 14 days since exposure

DIAGNOSIS, NO SYMPTOMS

Cannot go to school

- Home for 10 days since first positive COVID-19 test

AT LEAST 1 SYMPTOM

- Fever
- Chills
- Shortness of breath/ difficulty breathing
- New cough
- New loss of taste or smell

Cannot go to school

Home until:

- 10 days since first symptoms
- No fever for 3 days (without fever medicine)
- 3 days of symptom improvement, including coughing and shortness of breath

Positive Screening Protocol: At School or Transportation Entry

WHO	EXPOSURE, NO SYMPTOMS Staff or Student shares they were exposed to someone with COVID-19 within the last 2 weeks but is NOT symptomatic	DIAGNOSIS, NO SYMPTOMS Staff or Student shares they were diagnosed with COVID-19 less than 10 days ago, but is NOT symptomatic	SYMPTOMS Staff or Student presents with at least one of the following COVID-19 symptoms *(Fever • Chills • Shortness of breath or difficulty breathing • New cough • New loss of taste or smell)*
Staff Member **OR** **Student: A designated individual (e.g., parent or guardian) is PRESENT to immediately support child to get home or to medical care safely**	☐ Immediately go home. ☐ Notify Local Health Department and follow their procedures. ☐ Can return to school once it has been 14 days since last close contact, if they do not develop symptoms. ☐ Student and staff can participate in remote learning and teaching (if applicable) while out.	☐ Immediately go home. ☐ May return 10 days since first positive COVID-19 test, if they did not subsequently develop symptoms since their positive test. ☐ Student and staff can participate in remote learning and teaching (if applicable) while out. ☐ Notify Local Health Department and follow their procedures.	☐ Immediately go home. ☐ If a person is diagnosed with COVID-19 based on a test, their symptoms, or does not get a COVID-19 test but has had symptoms, they can return to school when: – At least 3 days (72 hours) have passed since recovery defined as resolution of fever without the use of fever-reducing medications; and – Improvement in respiratory symptoms (e.g., cough, shortness of breath); and – At least 10 days have passed since symptoms first appeared. ☐ If a person has had a negative COVID-19 test, they can return to school once there is no fever without the use of fever-reducing medicines and they have felt well for 24 hours. ☐ Student and staff can participate in remote learning and teaching (if applicable) while out, if they feel well enough. ☐ Notify Local Health Department and follow their procedures.
Student: A designated individual (e.g., parent or guardian) is NOT PRESENT to immediately support child to get home or to medical care safely	☐ If appropriate for that student, they should wear a cloth face covering. ☐ Separate student in designated area with supervision by an adult wearing a cloth face covering standing at least 6 feet away. ☐ Enact plan to safely send student home as quickly as possible. ☐ Notify Local Health Department and follow their procedures. ☐ Can return to school once it has been 14 days since last close contact and they do not develop symptoms. ☐ Participate in remote learning while out.	☐ If appropriate for that student, they should wear a cloth face covering. ☐ Isolate student in designated area with supervision by an adult wearing a cloth face covering standing at least 6 feet away. ☐ Enact plan to get student home safely, and cannot be through using school transportation. ☐ Return 10 days since first positive COVID-19 test, if they did not subsequently develop symptoms since their positive test. ☐ Participate in remote learning while out. ☐ Notify Local Health Department and follow their procedures.	☐ If appropriate for that student, they should wear a cloth face covering or surgical mask. ☐ Isolate student in designated area with supervision by an adult wearing a cloth face covering or surgical mask standing at least 6 feet away. ☐ Enact plan to get student home safely, and cannot be through using school transportation. ☐ If student is diagnosed with COVID-19 based on a test, their symptoms, or does not get a COVID-19 test but has had symptoms, they can return to school when. – At least 3 days (72 hours) have passed since recovery defined as resolution of fever without the use of fever-reducing medications; and – Improvement in respiratory symptoms (e.g., cough, shortness of breath); and – At least 10 days have passed since symptoms first appeared. ☐ If student has had a negative COVID-19 test, they can return to school once there is no fever without the use of fever-reducing medicines and they have felt well for 24 hours. ☐ Student can participate in remote learning while out, if they feel well enough. ☐ Notify Local Health Department and follow their procedures.

Positive Screening Protocol: During the School Day

WHO	EXPOSURE, NO SYMPTOMS Staff or Student shares they were exposed to someone with COVID-19 within the last 2 weeks but is NOT symptomatic	DIAGNOSIS, NO SYMPTOMS Staff or Student shares they were diagnosed with COVID-19 less than 10 days ago, but is NOT symptomatic	SYMPTOMS Staff or Student presents with at least one of the following COVID-19 symptoms *(Fever • Chills • Shortness of breath or difficulty breathing • New cough • New loss of taste or smell)*
Student	☐ Separate student in designated area with supervision by an adult wearing a cloth face covering standing at least 6 feet away. ☐ If appropriate for that student, they should wear a cloth face covering. ☐ Enact plan to safely send student home as quickly as possible. ☐ Notify Local Health Department and follow their procedures. ☐ Can return to school once it has been 14 days since last close contact and do not develop symptoms. ☐ Participate in remote learning while out.	☐ Isolate student in designated area with supervision by an adult wearing a cloth face covering standing at least 6 feet away. ☐ If appropriate for that student, they should wear a cloth face covering. ☐ Enact plan to get student home safely, and cannot be through using school transportation. ☐ Return after 10 days since first positive COVID-19 test, if they did not subsequently develop symptoms since their positive test. ☐ Participate in remote learning while out. ☐ Close off facility areas used by the sick person. ☐ Wait at least 24 hours, THEN ☐ Clean and disinfect those areas with an EPA-registered product. ☐ Notify Local Health Department and follow their procedures.	☐ If appropriate for that student, they should wear a cloth face covering or surgical mask. ☐ Isolate student in designated area with supervision by an adult wearing a cloth face covering or surgical mask and standing at least 6 feet away. ☐ Enact plan to get student home safely, and cannot be through using school transportation. ☐ If student is diagnosed with COVID-19 based on a test, their symptoms, or does not get a COVID-19 test but has had symptoms, they can return to school when – At least 3 days (72 hours) have passed since recovery defined as resolution of fever without the use of fever-reducing medications; and – Improvement in respiratory symptoms (e.g., cough, shortness of breath); and – At least 10 days have passed since symptoms first appeared. ☐ If student has a negative COVID-19 test, they can return to school once there is no fever without the use of fever-reducing medicines and they have felt well for 24 hours. ☐ Participate in remote learning while out. ☐ Close off and ventilate facility areas used by the sick student ☐ Wait at least 24 hours, THEN ☐ Clean and disinfect those areas with an EPA-registered product. ☐ Notify Local Health Department and follow their procedures.
Staff Member	☐ Immediately go home. ☐ Notify Local Health Department and follow their procedure. ☐ Can return to school once it has been 14 days since last close contact. ☐ Can participate in remote teaching while out, if applicable.	☐ Immediately go home. ☐ Return after 10 days since first positive COVID-19 test, if they did not subsequently develop symptoms since their positive test. ☐ Close off facility areas used by the sick person. ☐ Wait at least 24 hours, THEN ☐ Clean and disinfect those areas with an EPA-registered product. ☐ Notify Local Health Department and follow their procedures.	☐ If appropriate for that staff member, they should wear a cloth face covering or surgical mask. ☐ If well enough, immediately go home. ☐ If not well enough, isolate staff member in designated area and provide support to get home or to medical care. ☐ If a person is diagnosed with COVID-19 based on a test, their symptoms, or does not get a COVID-19 test but has had symptoms, they can return to school when – At least 3 days (72 hours) have passed since recovery defined as resolution of fever without the use of fever-reducing medications; and – Improvement in respiratory symptoms (e.g., cough, shortness of breath); and – At least 10 days have passed since symptoms first appeared. ☐ If the staff member has a negative COVID-19 test, they can return to school once there is no fever without the use of fever-reducing medicines and they have felt well for 24 hours. ☐ Close off and ventilate facility areas used by the sick person. ☐ Wait at least 24 hours, THEN ☐ Clean and disinfect those areas with an EPA-registered product. ☐ Notify Local Health Department and follow their procedures.

Infection Control Checklist for K-12 Schools

In anticipation of K-12 school facilities reopening for instruction, this checklist and ordering information reflects predicted items of need for infection control materials and PPE. This checklist will be supplemented with supporting information on how to order items (coming soon). These documents are intended to inform policy decisions.

*Note: This checklist does not address the routine use of PPE as normally indicated for completion of typical, daily medical procedures for students

School Building

- ☐ **Hand Sanitizer (with at least 60% alcohol) –** Provide at every building entrance and exit, in the cafeteria, and in every classroom
- ☐ **Hand Soap**

Teachers

- ☐ **Cloth Face Coverings** – 5/teacher
- ☐ **Hand Sanitizer (with at least 60% alcohol)**
- ☐ **Cleaning Products (EPA registered disinfectants effective against coronavirus) –** See EPA's List N: Disinfectants for Use Against SARS-CoV-2
- ☐ **Tissues**

Students

- ☐ **Cloth Face Coverings –** 5/student

Nurses

- ☐ **Cloth Face Coverings –** 5/nurse, used when not caring for sick individuals
- ☐ **Surgical Masks –** Used when providing care for sick individuals, as needed
- ☐ **Gowns –** Used when providing care for sick individuals, as needed
- ☐ **Gloves –** Used when providing care for sick individuals, as needed
- ☐ **Face Shields –** Used when providing care for sick individuals, as needed
- ☐ **Screening thermometers (temporal, touchless) –** Thermometers are being ordered at the state level for distribution to all public schools

Individual School Staff Delegated by a Nurse to Perform Medical Tasks

- ☐ **Cloth Face Coverings** – 5/teacher
- ☐ **Surgical Masks** – Used when providing care for sick individuals, as delegated by a nurse and as needed
- ☐ **Gowns** – Used when providing care for sick individuals, as delegated by a nurse and as needed
- ☐ **Gloves** – Used when providing care for sick individuals, as delegated by a nurse and as needed
- ☐ **Face Shields** – Used when providing care for sick individuals, as delegated by a nurse and as needed
- ☐ **Screening Thermometers (temporal, touchless)** – Thermometers are being ordered at the state level for distribution to all public schools
- ☐ **Cleaning Products (EPA registered disinfectants effective against coronavirus) –** See EPA's List N: Disinfectants for Use Against SARS-CoV-2

Custodial Staff

- ☐ **Cloth Face Coverings –** 5/staff member
- ☐ **Gloves**

Nutrition Services Staff

- ☐ **Cloth Face Coverings –** 5/staff member
- ☐ **Gloves**

Bus Drivers

- ☐ **Cloth Face Coverings –** 5/staff member
- ☐ **Hand Sanitizer (with at least 60% alcohol) –** Provided to every bus driver
- ☐ **Cleaning Products (EPA registered disinfectants effective against coronavirus) –** See EPA's List N: Disinfectants for Use Against SARS-CoV-2
- ☐ **Tissues**

School Staff Who May Need to Make Home Visits, or Visits to Multiple Schools (e.g., Social Workers, Physical Therapists, Speech Therapists, Instructional Coaches)

- ☐ **Cloth Face Coverings –** 5/staff member
- ☐ **Hand Sanitizer (with at least 60% alcohol)**

All Other School Staff (General – administrators, coaches, etc.)

- ☐ **Cloth Face Coverings –** 5/staff member

Person Who Screens Positive for COVID-19 Symptoms On-Site

- ☐ **Surgical Mask or Cloth Face Covering**

Individual Accompanying or Supervising a Person Who Screens Positive for COVID-19 Symptoms On-Site

- ☐ **Surgical Mask or Cloth Face Covering**
- ☐ **Gloves –** As needed
- ☐ **Hand Sanitizer (with at least 60% alcohol) –** If needed, if soap and water not available