COVID-19 Prevention Guidance for Summer School

DETAILED GUIDANCE AND HEALTH RESOURCES

6/30/2021

This detailed guidance is intended to complement the COVID-19 Prevention Guidance for Summer School: Executive Summary and provide health recommendations and resources to pre-K through grade 12 schools that have completed the 2020-2021 school year. This document also references a limited number of requirements from the federal government and existing Minnesota Rules.

While fewer children overall have become seriously ill with COVID-19 than adults during the pandemic, children can be infected with the virus that causes COVID-19, get sick with COVID-19, spread the virus to others, and have severe outcomes. Vaccine eligibility has been expanded to include some school-aged populations, however children aged 12-15 have only recently become eligible and children under 12 years of age are still ineligible to be vaccinated. For these reasons, the Minnesota Department of Health (MDH) continues to recommend the consistent use of layered mitigation strategies to help limit the spread of COVID-19 in school communities. This document provides pre-K through grade 12 school leaders an overview of key recommendations to help protect the health and safety of their school communities, including reference materials to support implementation. This guidance and the included resources will be updated as federal and state recommendations evolve over the coming months.

MDH also recommends schools review these resources for additional mitigation strategies and toolkits:

Federal government and Minnesota Rule requirements

- **Face coverings:** All people are required by Centers for Disease Control and Prevention (CDC) order to wear face coverings on all indoor public transportation conveyances (airports, public buses, etc.), including school buses.

- **Handling a suspected or confirmed case of COVID-19:** Minnesota Rule 4605.7070 requires any person in charge of any institution, school, child care facility, or camp to report cases of COVID-19 to MDH.
  - Reportable Disease Rule (www.health.state.mn.us/diseases/reportable/rule/index.html)

Recommendations for mitigating COVID-19 transmission in K-12 schools

The following sections address key recommended strategies that reduce the risk of getting sick from or transmitting COVID-19. K-12 schools are encouraged to consider these recommendations when crafting local policies and plans. Minnesota also recommends following CDC K-12 guidance: CDC: Operational Strategy for K-12 Schools through Phased Prevention (www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/operation-strategy.html#anchor_1616080084165).

For a summary of evidence on the impact of COVID-19 among children and adolescents, as well as what is known about preventing transmission in schools, school communities are encouraged to review the CDC Science Brief: Transmission of SARS-CoV-2 in K-12 Schools (www.cdc.gov/coronavirus/2019-ncov/science/science-briefs/transmission_k_12_schools.html).

Face coverings

It is strongly recommended that all people present in school buildings and district offices wear a face covering.

This recommendation is aligned with CDC’s guidance for fully vaccinated people in the CDC: Operational Strategy for K-12 Schools through Phased Prevention (www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/operation-strategy.html#fully-vacc), which advises schools to continue this prevention strategy due to lower vaccination rates among youth between ages 12-15 and lack of eligibility for vaccination among youth under 12 years of age.

The face covering recommendation does not apply to those who are unable to tolerate wearing a face covering because of a medical condition, mental health condition, or disability. Children under age 2 years must not wear face coverings. Children between the ages of 2 and 5 years old are encouraged to wear a face covering when in public if they can do so reliably (i.e., without frequently touching or removing the face covering).
In addition to the recommendation above, it is recommended that schools:

- Consider developing and implementing policies for face coverings and ensure the policy is clearly posted and communicated to students, staff, families, and potential visitors to the school building.

- K-12 face covering policies should allow students and staff to temporarily remove their face coverings in situations where it is difficult or impossible to wear a face covering, provided that social distancing is maintained, including:
  - When eating or drinking.
  - When swimming or participating in another activity that involves submerging or soaking a face covering in water.
  - When communicating with a person who is deaf or hearing impaired or who has a disability, medical condition, or mental health condition that makes communication with a face covering difficult.
  - When performing, speaking in public, or playing an instrument that cannot be played with a face covering.
  - When staff are working alone, including when alone in an office, a room, a cubicle with walls that are higher than face level, a vehicle, or an enclosed or separated work area.
  - When sleeping or going to sleep.
  - For schools that have career and technical program where there are already existing industry safety requirements defined within state and federal laws, staff and students should follow those safety standards when engaged in activities requiring those safety measures.

- Schools are encouraged to maintain a supply of face coverings for students or staff who forget to bring them. Staff and students may choose to wear their own face covering, but all such face coverings should fit well and cover the nose and mouth.

For more detailed guidance about face coverings, refer to the following resources:

- **Recommendations for Wearing Masks**
  (www.health.state.mn.us/diseases/coronavirus/facecover.html)

- **CDC: How to Wear Masks**

- **CDC Science Brief: Community Use of Cloth Masks to Control the Spread of SARS-CoV-2**

**Physical distancing and cohorting**

Maintaining social or physical distance provides protection by reducing risk of exposure and limiting the number of close contacts when someone is infected with COVID-19. The terms “social distancing” or “physical distancing” mean keeping a safe space between yourself and other people. Similarly, the practice of “cohorting,” which refers to identifying small groups of students and staff and keeping them
together throughout an entire day, reduces the risk of additional exposures in the school setting by limiting unnecessary mixing of multiple groups.

Minnesota recommends schools follow CDC's guidance on physical distancing and cohorting:

- **CDC: Operational Strategy for K-12 Schools through Phased Prevention**
  (www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/operation-strategy.html#anchor_1616080084165)

In addition to the recommendation above, it is recommended that schools:

- Evaluate classroom capacity with the goal of creating as much space between students as possible. The CDC and American Academy of Pediatrics recommend placing student desks at least 3 feet apart at a minimum, and up to 6 feet apart in areas of high community transmission in settings where cohorting is not possible.
  - Face desks in the same direction, where possible.
  - Daily documentation of student seating is strongly recommended to support notification of close contacts in the event of an exposure.
- Per CDC’s guidance, maintain 6 feet of distance in the following settings:
  - Between school staff and all other adults in the building, and between adults and students, whenever possible.
  - Between any visitors, volunteers, or others coming into the school building.
  - When face coverings cannot be worn, such as when eating, particularly when cohorting is not possible.
  - During activities when increased exhalation occurs, such as singing, shouting, band, or sports and exercise. Consider holding these activities outdoors whenever feasible.
  - In common areas where many people from different cohorts are intermixing.
- Develop and keep students and staff in small cohort groups that stay together as much as possible throughout the day and from day to day, particularly among student groups who are not currently eligible for vaccination (e.g., elementary age students). Maintain 6 feet of distance between cohorts and limit unnecessary mixing between cohort groups as much as possible (e.g., during lunch, bathroom breaks, arrival and dismissal, free periods, recess).
- Student support programs such as special education, English language learner, gifted and talented, and counseling—which pull students from their primary classrooms in order to provide essential support services—are encouraged to keep groups as small and as consistent as possible from day to day, creating as much physical distance as possible between group members.
- Stagger arrival and dismissal times to minimize crowding. Whenever possible, student pick-up and drop-off should occur outside.
Cleaning, disinfection, and hygiene practices

The virus that causes COVID-19 is mainly spread by respiratory droplets. The virus can also be spread if you touch a surface contaminated with virus and then touch your eyes, nose or mouth, although this is not the primary way the virus spreads. In most situations, the most reliable way to prevent infection from surfaces is to regularly wash hands or use hand sanitizer.

Schools should review the following resources for detailed guidance on cleaning, disinfection, and hygiene practices in school settings:

- Use the U.S. Environmental Protection Agency’s (EPA) list of disinfectant products that meet its criteria at About List N: Disinfectants for Coronavirus (COVID-19) (www.epa.gov/coronavirus/about-list-n-disinfectants-coronavirus-covid-19-0).

It is also recommended that schools:

- Establish a daily schedule for routine environmental cleaning and disinfection of high-touch surfaces in classrooms and common spaces. Schedule routine environmental cleaning when students and teachers are not occupying the space.
- Ensure the availability of appropriate supplies to support healthy hygiene behaviors (e.g., soap, hand sanitizer, paper towels, disinfectant wipes, and tissues) and strategically place supplies in areas where they may be frequently used.
- Build routines of hand hygiene into the daily school schedule for all students and staff, including handwashing and sanitation breaks during or between classroom activities. 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 students.
  - Supervise the use of hand sanitizer by students and ensure that children and staff with sensitivity or skin reactions to hand sanitizer can use soap and water.
  - Reinforce handwashing during key times including but not limited to arrival and dismissal; before, during, and after preparing or eating food; after using the bathroom; after blowing one’s nose, coughing, or sneezing; after touching objects with bare hands that have been handled by other people.

Additional cleaning, disinfection, and hygiene practice resources:

**COVID-19 Prevention Guidance for Summer School**

- **Hand Hygiene** ([www.health.state.mn.us/people/handhygiene/index.html](http://www.health.state.mn.us/people/handhygiene/index.html))
- **Cover Your Cough** ([www.health.state.mn.us/people/cyc/index.html](http://www.health.state.mn.us/people/cyc/index.html))
- **Why Hand Hygiene is Important and When to Wash Your Hands** ([www.health.state.mn.us/people/handhygiene/why/index.html](http://www.health.state.mn.us/people/handhygiene/why/index.html))
- **CDC: When and How to Wash Your Hands** ([www.cdc.gov/handwashing/when-how-handwashing.html](http://www.cdc.gov/handwashing/when-how-handwashing.html))
- **CDC Handwashing: Health Promotion Materials** ([www.cdc.gov/handwashing/materials.html](http://www.cdc.gov/handwashing/materials.html))

## Health screening, isolation, and quarantine

All members of the school community, including staff, students, families, visitors, and others should continue to be vigilant in monitoring for symptoms of illness and protect others by staying home when they are feeling ill and following COVID-19 specific exclusion and self-quarantine guidance when appropriate.

It is strongly recommended that schools:

- Follow the [Recommended COVID-19 Decision Tree for People in Schools, Youth, and Child Care Programs](http://www.health.state.mn.us/diseases/coronavirus/schools/exguide.pdf) to determine who should stay home and when staff or students may return.
- Educate staff, students, and families about the signs and symptoms of COVID-19, when their children should stay home, and when they can return to school.
- Develop policies to prevent the spread of disease, including:
  - Staff and students staying home if they have tested positive for COVID-19, have symptoms of COVID-19, or are ill and waiting for a COVID-19 test result.
  - Staff and students staying home when they have had recent close contact with a person with COVID-19. For more information, visit [CDC: When to Quarantine](http://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/quarantine.html).
- Post signage at main entrance(s) requesting that people who have been symptomatic not enter the building. Example signage:
  - [Stop! Go home if you have any of these symptoms](http://www.health.state.mn.us/diseases/coronavirus/materials/symptoms.pdf)
- Educate staff, students, and families about the signs and symptoms of COVID-19, when they or their children should stay home, and when they can return to school.

## Additional resources:

- [If You are Sick: COVID-19](http://www.health.state.mn.us/diseases/coronavirus/sick.html#stayhome)
- [What to Do While You Wait for a COVID-19 Test Result](http://www.health.state.mn.us/diseases/coronavirus/waiting.html)
Handling a suspected or confirmed case of COVID-19

It is strongly recommended that schools:

- Develop policies for managing case follow-up and notifying exposed people, consistent with Recommendations for Handling a Confirmed Case of COVID-19 (www.health.state.mn.us/diseases/coronavirus/schools/casehandle.pdf).

- Put systems in place to allow staff and families to self-report to the school if they or their student have symptoms of COVID-19, a positive test for COVID-19, or recently had a close contact to someone with COVID-19 in a manner that is consistent with applicable laws and privacy policies, including the Family Educational Rights and Privacy Act (FERPA).

- Designate a staff person responsible for responding to COVID-19 concerns (e.g., school nurse) and coordinating with local health authorities regarding positive COVID-19 cases. All school staff and families should know who this person is and how to contact them.

- Establish a dedicated space for symptomatic people who are waiting to go home. Distinguish this space from areas where student health services will be delivered to those who are well and need routine types of care (e.g., medication administration or first aid).

- Immediately isolate symptomatic people in the designated space at school and send them home. Ensure that symptomatic students who are waiting to be picked up remain under the visual supervision of a staff member who is at least 6 feet away. Both the symptomatic student and the supervising adults should wear a face covering or a surgical mask.

  - Do not place face coverings or surgical masks on anyone who is unconscious or has trouble breathing, anyone who is incapacitated or otherwise unable to remove the face covering without assistance, or anyone who cannot tolerate a face covering due to developmental, medical, or behavioral health needs.

- Develop a plan for how to transport an ill student or staff member home or to medical care if needed.

Additional resources:

- CDC: Considerations for Case Investigation and Contact Tracing in K-12 Schools and Institutions of Higher Education (IHEs) (www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/contact-tracing.html)

Delivering direct student support services

Personal protective equipment is strongly recommended for staff providing direct student support services to reduce the risk of COVID-19 transmission in situations that involve close, physical, or prolonged contact.

Schools should review MDH guidance on the recommended personal protective equipment for the provision of these services:


Additional resources:

- CDC: Strategies for Protecting K-12 School Staff from COVID-19 (www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/k-12-staff.html#ppe)

Ventilation systems

Ventilation is an important factor in preventing COVID-19 transmission indoors. Facility owners and operators are strongly recommended to evaluate the operational capacity of ventilation systems and increase and maintain ventilation provided throughout the building.

Schools should review the following resources for guidance on ventilation in school settings:

- Coronavirus (COVID-19) Response Resources from ASHRAE and Others (www.ashrae.org/technical-resources/resources)
Transportation

Schools should review the following resources for guidance on reducing the risk of transmission on school transportation, including regular school day and any after school activity or sports-related transportation used for students and school staff:

- CDC: Strategies for Protecting K-12 School Staff from COVID-19 (www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/k-12-staff.html#school-bus-drivers)
- Reference the “Federal government and Minnesota Rule requirements” and “Face coverings” sections above for additional details on the use of face coverings on school transportation vehicles.

It is also recommended that schools:

- Arrange seating to maintain 6 feet of distance between the driver and all riders.
- Systematically review and evaluate school transportation capacity with the goal of creating as much space between riders as possible. Consider reducing capacity or adding routes to allow for more physical space between riders.
- Assign and document seating for riders to assist with notifications when there is a person who is found to be infectious on the bus. Riders should remain seated in their assigned seat.
- Make sure the vehicle is well ventilated and use natural ventilation (e.g., opening windows) to mix fresh outdoor air with indoor air. Consider consultation with a specialist to inform specific strategies for maximizing cross-ventilation under different conditions.
- Clean and disinfect transportation vehicles regularly, focusing on frequent cleaning of touched surfaces in the vehicle (e.g., surfaces near the driver’s seat, hard seats, door handles, seat belt buckles, light and air controls, doors and windows, grab handles) between routes.
- Keep doors and windows open when cleaning the vehicle and between trips to let the vehicles thoroughly air out.
- People who become ill during the day should not use group transportation to return home.
  - Create a plan for getting students home safely if they are ill.
  - If a driver becomes sick during the day, they should follow protocols outlined for people who are ill and should not return to drive students.

Additional resources:

Resources for music, sports, and other activities


- Review MDH’s COVID-19 Prevention Guidance for Certified Child Care, Youth Programs, and Camps (www.health.state.mn.us/diseases/coronavirus/youthguide.pdf) for guidance on operating other extracurricular activities.