MSDH Guidelines for K-12 Reopening During COVID-19

In the midst of unprecedented times, everyone will agree that continuing the education of our children is imperative. Educators are striving to determine the safest ways to provide educational experience, from classroom time to extracurricular activities. School systems and districts should expect cases among students, faculty and staff. For educational activities to start back and continue, the spread of coronavirus within the school community must be minimized.

Each school/school district should continue to put in place measures to reduce transmission and maintain a safe school environment; there are many challenges due to this ongoing pandemic.

General considerations

The virus spreads primarily from person-to-person.

- Between people who are in close contact with one another (within about 6 feet).
- Through respiratory droplets produced when an infected person coughs, sneezes, talks or sings.
- These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs.
- The longer people remain in close proximity, the higher the likelihood of spread from one to another.
- COVID-19 may be spread by people who are not showing symptoms.

The virus that causes COVID-19 is spreading very easily and sustainably between people. In general, the more closely a person interacts with others and the longer that interaction, the higher the risk of COVID-19 spread.

It may be possible that a person can get COVID-19 by touching a surface or object that has the virus on it and then touching their own mouth, nose, or possibly their eyes. We are still learning about how the virus spreads.

The highest risk for exposure from an infected person is in situations involving full-capacity in-person classes, activities and events. This is especially critical when children and teachers are not spaced apart, the activity requires students and staff to interact closely or when supplies are shared (see risks in school setting from CDC below)

1. **Lowest Risk:** Students and teachers engage in virtual-only classes, activities, and events.
2. **More Risk:** Small, in-person classes, activities, and events. Groups of students stay together and with the same teacher throughout/across school days and groups do not mix. Students remain at least 6 feet apart and do not share objects (e.g., hybrid virtual and in-person class structures, or staggered/rotated scheduling to accommodate smaller class sizes).
3. **Highest Risk:** Full sized, in-person classes, activities, and events. Students are not spaced apart, share classroom materials or supplies, and mix between classes and activities.

**All recommended measures for source control should be utilized as feasible,** including:
- Routine symptom and temperature screening.
- Adequate supplies to maintain hygiene.
- Maintaining a six-foot separation between students.
- Cloth face coverings or face shields by all staff.
- Cloth face coverings for students as feasible dependent on age and other factors (difficulty breathing, unable to remove face covering without assistance).
- Frequent environmental cleaning of frequently touched areas.
- Staggered cafeteria times.
- Mask use for school bus drivers and maintaining six feet from students.
- Determining the level of risk associated with an activity based on the MSDH Activity Decision Matrix provided.
- Testing: Universal testing of all students and staff without symptoms or known exposure is **not** recommended.

**Resources:**

**ACTIVITY DECISION MATRIX**

The following is a planning matrix developed by educators in conjunction with healthcare providers to help planners analyze each activity or event in seven critical areas- proximity, duration, group size, congestion, movement, touch and respiratory output.

This matrix will assist as educators plan activities and develop strategies to lower the risk of transmission of COVID-19 to all involved in the educational experience. If an activity is found to have a higher risk of disease transmission without feasible or reasonable mitigation measures, the administration will need to weigh the value of providing that activity versus the risk.

Brainstorm and share ideas with your colleagues. Some general strategies have been suggested but planners need to develop specific guidelines and require adherence to these. Considering the consequences of failure to protect all involved, thinking outside the box may make the difference in whether or not an activity or event can be scheduled or continued. Failure to maintain adherence to mitigation strategies may result in unwanted closures to prevent community spread to vulnerable populations.
Activity Decision Matrix

<table>
<thead>
<tr>
<th>Factor</th>
<th>Lower Risk</th>
<th>Higher Risk</th>
<th>Mitigation Strategies</th>
</tr>
</thead>
<tbody>
<tr>
<td>Proximity</td>
<td>&gt;6 feet</td>
<td>&lt; 6 feet</td>
<td></td>
</tr>
<tr>
<td>Duration</td>
<td>&lt; 15 minutes</td>
<td>&gt; 15 minutes</td>
<td></td>
</tr>
<tr>
<td>Group Size</td>
<td>&lt; 10</td>
<td>&gt;10</td>
<td></td>
</tr>
<tr>
<td>Congestion</td>
<td>Low</td>
<td>High</td>
<td></td>
</tr>
<tr>
<td>Movement</td>
<td>Directed</td>
<td>Undirected</td>
<td></td>
</tr>
<tr>
<td>Touch</td>
<td>Low</td>
<td>High</td>
<td></td>
</tr>
<tr>
<td>Respiratory Output</td>
<td>Normal</td>
<td>Increased</td>
<td></td>
</tr>
</tbody>
</table>
# Definitions of Situational Characteristics

<table>
<thead>
<tr>
<th>Proximity</th>
<th>How close together are people in this space?</th>
</tr>
</thead>
<tbody>
<tr>
<td>&gt; 6 Feet</td>
<td>It is possible, either naturally or with minimal interventions, to maintain a 6-foot distance</td>
</tr>
<tr>
<td>&lt; 6 Feet</td>
<td>It is not possible to maintain a 6-foot distance; the activity cannot be done if social distance is maintained</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Duration</th>
<th>How long are people in this space?</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt;15 minutes</td>
<td>Less than 15 minutes is typically spent in the space</td>
</tr>
<tr>
<td>&gt;15 minutes</td>
<td>More than 15 minutes is typically spent in the space</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Group Size</th>
<th>Who is in the space?</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt;Recommended Limit</td>
<td>A small group of people, mostly part of the same social circle</td>
</tr>
<tr>
<td>&gt;Recommended Limit</td>
<td>A large group of people from different households and social circles</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Congestion</th>
<th>Are there points of high congestion?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low</td>
<td>The design of the space and activity do not result in congregations of people (e.g. entry points, lines, security, etc.)</td>
</tr>
<tr>
<td>High</td>
<td>Because of the design of the space or the nature of the activity, people must gather closely together at times</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Movement</th>
<th>How do people move around in the space?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Directed</td>
<td>Movement is restrained or highly controlled, people are confined to a specific area, not much intermingling</td>
</tr>
<tr>
<td>Undirected</td>
<td>Movement is unrestrained or uncontrolled, people can wander in the space, there is intermingling</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Touch</th>
<th>How do people engage with objects or fixtures in the space?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low</td>
<td>People do not interact much with each other or with objects in the space</td>
</tr>
<tr>
<td>High</td>
<td>People frequently interact with each other or touch objects in the space</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Respiratory Output</th>
<th>How are people breathing in the space?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Normal</td>
<td>People are breathing normally, low respiratory output</td>
</tr>
<tr>
<td>Increased</td>
<td>People are breathing heavily, from exercising, laughing, cheering, singing etc.</td>
</tr>
</tbody>
</table>
How to use the Activity Decision Matrix:

**Step 1:** Identify the event or activity you wish to analyze
- Ex: Classrooms, changing classes, meals, choirs, sports practice and/or games, transportation

**Step 2:** Complete the risk matrix assignment for each risk factor
- See Matrix

**Step 3:** Identify if the broader population is at risk vs. individual or a small group

**Step 4:** Identify mitigation strategies
- Brainstorm as many mitigation strategies as possible in each area. Many ideas can be found on various education websites. General examples:
  - Proximity - Increase distance; wear cloth face coverings; hold activities outdoors
  - Duration - Limit duration
  - Group Size - Break into smaller groups; keep groups cohorted together without intermingling; limit spectators
  - Congestion - Stagger entry and exit; hold activities outdoors
  - Movement - Place directional guides in entrances and hallways
  - Touch - Limit sharing of items; hand hygiene
  - Respiratory Output - Avoid singing or shouting in activities as possible
- Be innovative and specific.

**Step 5:** Make a determination if the activity is allowable or requires additional modification
- Is the risk high for >2 elements?
- Are the mitigation steps adequate?
- Is there risk to the entire student body?
- Does the educational value of the activity justify the risk?

Additional considerations:
- What is the COVID-19 activity locally?
- What would trigger a discontinuation of the activity?
  - Increasing community spread?
  - Increased cases in the school?
- Proper documentation of participants, etc. in the event of an outbreak to identify those in need of quarantine or testing

[https://www.cdcfoundation.org/covid-19-seminars](https://www.cdcfoundation.org/covid-19-seminars) for a downloadable working document including an example of developing mitigation strategies.
Guidelines for K-12—COVID-19 Cases or Suspected Outbreaks in K-12 Setting

Recommendations around Individual Cases and Suspected Outbreaks*

A. COVID-19 in a student or staff member:
   1. Be prepared to separate ill children and faculty with symptoms consistent with COVID-19 and place in an isolation room. Per the school policy the student’s parent/guardian should be notified.
   2. Any COVID-19 test-positive student or staff member should be isolated at home and excluded from the school setting for 14 days after onset of symptoms (14 days after test date if person had no symptoms);
   3. An individual who is 14 days past the onset of symptoms (or test date if no symptoms) and has been fever free for 24 hours can be allowed to return to the school setting. A negative test should not be required for return to the school setting. It is also recommended that a return not from the child’s provider should not be required.
   4. Close contacts are identified as any individual within 6 feet of the infected person for at least 15 minutes or greater.

5. Recommendations for students and staff identified as close contacts (based on the above definition)
   i. Send quarantine instructions to those students and staff who are identified as close contacts as described above (see attached).
   ii. Contacts should be excluded from the school setting and should be under quarantine at home for a full 14 days after last exposure even if they test negative.
   iii. Contacts should be instructed to undergo testing for COVID-19 (at their primary care provider or at one of the clinics/testing sites listed at https://msdh.ms.gov/msdhsite/_static/14,21912,420,874.html) even if they have no symptoms.
   iv. Contacts should further be instructed to monitor their symptoms and temperature and contact their provider for evaluation and need for retesting if they develop symptoms.
   v. Contacts should not be required to have a negative test prior to return to school if they have remained symptom-free for the 14-day quarantine period.

6. In a classroom or group setting (such as a sports team, or other activity) when it is difficult to determine specific contacts, then consideration should be given for exclusion, quarantine and testing recommendations as above for the whole group or classroom, rather than limiting to a few known close contacts.

7. Parent notification: The school should notify the parents of children in the affected group or classroom (see sample notification).

8. Close off areas used by the sick person and do not use those areas until after cleaning and disinfecting (CDC recommends waiting at least 24 hours prior to cleaning and disinfecting the area). Follow CDC recommendations for

9. Report a known case to the MSDH Office of Epidemiology at 601-576-7725 (MSDH is working on a process for schools to report new cases once daily—additional guidance is forthcoming).

B. Suspected Outbreak among students or staff members:

1. An outbreak is defined as ≥3 cases of COVID-19 in a classroom or group (sports team, group activity, band, or other) within 14 days.
2. In this setting 3 or more cases may not indicate ongoing transmission, but the risk of exposure and transmission to the group or classroom is increased.
3. The individual cases should be excluded and isolated as described in the previous section.
4. In the event of a suspected outbreak, the entire class or group should be quarantined and excluded the school setting as defined in the previous section.
5. School Dismissal Considerations. The school may consider dismissal of the entire student/faculty under the following conditions:
   i. If ≥3 individual classroom settings, defined groups, or defined buildings are experiencing simultaneous outbreaks, or
   ii. If multiple absentees or exclusions of students and staff are leading to disruptions in on-campus functioning and impacting the learning environment as determined by the school.
   iii. If decided upon, dismissal should be for at least 14 days to interrupt transmission. Appropriate cleaning and disinfection should occur (waiting at least 24 hours) following the CDC guidelines linked in the previous section.
   iv. In the event of a school dismissal, extracurricular group activities and large events, such as performances, field trips, and sporting events should also be cancelled. This may require close coordination with other partners and organizations (e.g., high school athletics associations, music associations).
   v. Also, in the event of a school dismissal, discourage students and staff from gathering or socializing anywhere, like at a friend’s house, a favorite restaurant, or the local shopping mall.

*Roles of School/District

Follow the district plan for prevention of spread of infection to students and staff in the school setting.

• If a case of COVID is reported in the school, the school should identify contacts and determine whether they would be considered larger group contacts or close contacts.
To more easily identify the level of contact, the school might establish a plan (such as assigned seats with a copy of the seating chart for each class) to assist in their identification of contacts.

- Notify the families of the status of their child’s contact. This document contains three sample notification letters:
  - Case of COVID- Letter to the student or staff who has been diagnosed regarding the requirement for isolation at home for 14 days and requirements for return to class.
  - Group contacts- Letter to contacts within a larger group, classroom or activity but not within 6 feet for more than 15 minutes. These students or staff:
    - Should monitor for symptoms of fever, cough, etc. twice daily for the next 14 days.
    - May continue to attend classes unless symptoms develop.
    - Do not need to get COVID testing unless they develop symptoms.
  - Close contact- Letter to a student or staff who was likely to have spent greater than 15 minutes in close contact to the case. These individuals should:
    - Contact their physician for COVID testing.
    - Remain isolated at home for 14 days after last exposure and monitor for symptoms.
    - Return to class after 14 days if no symptoms have developed.

Roles of Parent/Guardian
- Screen their child for symptoms and keep the child home if they are not well.
- Follow the testing or isolations directions if they receive a case or contact letter.

Roles of Mississippi State Department of Health (MSDH)
- Provide guidance regarding safer return to school and activities.
- Provide consultation and advice, if needed, surrounding a single case.
- Provide consultation and advice in the case of an outbreak.
- Provide online data and resources to assist the school district in decision-making.
COVID Case letter
Instructions for Individuals with COVID-19 in the School Setting

Dear Parent/Staff member,

You have reported to the school that you or your child have recently tested positive for COVID-19. Please see the following instructions:

- You or your child may not return to the school setting until 14 days from the day your symptoms started. If you or your child had no symptoms, you may not return until 14 days from the date of the positive test.
- You or your child must also be fever-free for at least 24 hours (without fever-reducing medication) with improvement of symptoms prior to returning to school.
- During this time your child may not participate in any extracurricular school activities or sports.
- The individual who tested positive should stay away from all persons at home. He/she should not be in contact with anyone, including the other people in the home.
- A negative test will not be required prior to return to school as long as the above criteria are met.
- A note from your physician is not required for return to school.

For additional information please see:
- Mississippi State Department of Health https://msdh.ms.gov/msdhsite/_static/14,0,420.html
Dear Parent,

A student (or teacher/coach) in your child’s class (or name the classroom, group or team) has been diagnosed with COVID-19. The last time the infected person was in the school setting while they were contagious is _______(date).

- The most common symptoms of COVID infection are cough, fever and shortness of breath; muscle aches, sore throat and fatigue are also common.
- Symptoms usually develop between 2 to 14 days after last exposure.
- Some infected people never develop symptoms.

You should:
- Monitor your child for symptoms and do temperature checks at least twice daily for 14 days after the last exposure to the infected person while they were contagious.
- Consult with your child’s physician for evaluation and need for testing if your child develops symptoms.

Some children in this classroom may be at higher risk due to close contact (within 6 feet of the infected person for 15 or more minutes). These children will receive a separate notification instructing them to quarantine and not return to school for 14 days after the last exposure.

As a reminder, always keep your child at home if they are ill for any reason.

For additional information please see:
Mississippi State Department of Health https://msdh.ms.gov/ MSDbsite/_static/14,0,420.html
COVID Close Contacts Letter
Notification/Instructions for Close Contacts to COVID-19 in the School Setting

Dear Parent/Teacher/Staff,

You or your child have been identified as a close contact to a case of COVID-19 in the school setting. A close contact is defined as any individual within 6 feet of the infected person for at least 15 minutes or greater. Based on this close contact the following instructions are provided.

For 14 days following potential exposure, you or your child:
- Will be excluded from the school setting for a minimum of 14 days after last exposure to the case of COVID-19.
- Should remain quarantined at home for 14 days after your (or your child’s) last exposure to the case.
- Are instructed to get tested for COVID-19 following your exposure even if you do not have symptoms. MSDH maintains a list of testing sites on the website at https://msdh.ms.gov/ MSDHsite/ static/14,21912,420,874.html. (Please let your provider know that you have been exposed before you go in for testing.)
- Should monitor for symptoms and take your (child’s) temperature twice a day for a minimum of 14 days from your last exposure.
  - If at any point your (child’s) temperature is 100.4°F or more, feel like you are developing fever, or start having any of the symptoms (e.g. fever, cough, shortness of breath), contact your healthcare provider for evaluation and retesting if indicated.
- May return to school following the 14-day quarantine and school exclusion period if no symptoms develop. A repeat negative test is not required.

For additional information please see:
Mississippi State Department of Health https://msdh.ms.gov/ MSDHsite/ static/14,0,420.html