

## NEA Analysis of Revised CDC Guidance on Reopening School Buildings February 12, 2021

On February 12, the U.S. Centers for Disease Control and Prevention (CDC) released an operational strategy guide for K-12 schools to help communities return to the safe delivery of in-person instruction. CDC advises that for every school in the country, all five of the following measures are “essential to safe delivery of in-person instruction.”

- 1) Requiring the “universal and correct use of masks” by everyone in all settings;
- 2) Strictly enforcing physical distancing of at least six feet if community transmission rates are substantial or high and to “the greatest extent possible” where rates are lower;
- 3) Requiring hand-washing and respiratory etiquette and providing the necessary supplies and training;
- 4) Cleaning and maintaining healthy facilities, which includes disinfection and ventilation; and
- 5) Contact tracing in combination with isolation and quarantine.

CDC also recognizes that the successful reopening of in-person instruction requires engagement of the entire school community, including staff. Importantly, CDC calls for the critical resources and attention necessary to overcoming longstanding inequities as well as the disproportionate racial impacts of the pandemic. CDC also recognizes the important role that vaccines and screening testing can play in making schools safer. Finally, the guidance provides a “phased mitigation” framework for deciding how to provide instruction and extracurriculars based on community transmission rates and whether a COVID-19 screening test regime is implemented.

### Important Guidance on the Five Key Universal Mitigation Strategies

- Universal, correct mask usage required by all students, teachers, staff and visitors, with exceptions for those with or who support individuals with intellectual disabilities, emotional or orthopedic impairments or traumatic brain injury. Masks should be tightly woven fabrics with two or three layers and should not have exhalation valves or vents.
- Physical distancing of at least six feet, enforced strictly in areas with substantial to high transmission, to be accomplished in part through cohorting, staggered and hybrid schedules, as well as physical barriers where people congregate (e.g., reception desks).
- Ongoing instruction and enforcement of hand-washing and respiratory etiquette in schools, as well as provision of the needed supplies (including soap, hand sanitizer of at least 60% alcohol, tissues, no-touch trash cans, etc.).
- Daily cleaning of frequently touched surfaces, including playgrounds and buses, with cleaning “between use as much as possible,” closing communal spaces or staggering use and cleaning after each use, avoiding any self-serve food or drink

options. Also imperative is improving ventilation “to increase the delivery of clean air and dilute potential contaminants.”

- Contact tracing, isolation, and quarantine policies, including diagnostic testing referrals for all staff and students with COVID-19 symptoms or who have had “close contact” (meaning within six feet of someone for a total of 15 minutes in a day—even if masked—within two days of when symptoms occurred or a positive test result).
  - Students and staff should be encouraged to stay home if they have symptoms (temperature of 100.4 or more, sore throat, cough, difficulty breathing, diarrhea or vomiting, new severe headache, new loss of taste or smell) and be provided diagnostic tests or referred for testing.
  - Those who test positive should remain at home and isolated until 10 days have passed since onset, 24 hours have passed without a fever, and other symptoms have improved. Close contacts should quarantine for 14 days.
  - Schools may consider screening testing for individuals that did not have a close contact but were potentially exposed.
  - Flexible sick leave should be considered for staff.

## Vaccines

- States and localities decide vaccine priority. CDC’s guidance reiterates previous recommendations that all educators be placed in group 1b for vaccination, after healthcare workers and long-term-care facility residents, and calls on states and localities to consider prioritizing educators within the 1b group to make schools safer.
- CDC states that educator access to vaccinations is not a precondition for safely reopening schools for in-person instruction, but universal implementation of the five key mitigations measures are preconditions to safe in-person operations.
- Schools need to continue mitigation measures even after educators have been vaccinated.

## Equity Concerns

- Students in under-resourced communities have suffered disproportionately from lost learning opportunities, while also facing the greatest risk of severe effects from COVID-19 and the highest rates of illness and mortality in their communities.
- CDC calls for resources to address these disparities in funding to implement all mitigation measures, address healthcare needs, improve digital learning, and in prioritization for vaccines and testing.
- Schools that serve populations at risk of learning loss should be prioritized for reopening in-person instruction.

## Accommodations for High-Risk Students and Staff

- At all levels of community transmission, high-risk educators should be accommodated (including possibly virtual teaching, modified job requirements, or scheduling flexibility), and these options should also be extended to those with high-risk household members.
- Students who are at increased risk of severe illness (including those with special healthcare needs) and those who live with high-risk family members should be provided with the option for remote learning.

## Special Education

- Schools should consider prioritizing reopening in-person instruction for students with disabilities and others who may benefit from special education services.
- Mitigation strategies may need to be customized and individualized for students with disabilities, in accordance with a student’s Individualized Education Program (IEP), while “maintaining efforts to protect students, teachers, and staff from COVID-19.”

## Testing

- The guidance addresses different types of COVID-19 testing, focusing primarily on diagnostic and screening testing.
  - Diagnostic testing is done on individuals with symptoms or known or suspected exposure to identify individual cases.
  - Screening testing is used even where there is no known exposure in order to identify asymptomatic cases and prevent further transmission.
- At all levels of community transmission, symptomatic students and educators and their close contacts must be referred for diagnostic testing, as a necessary condition for safe in-person instruction.
- CDC also recommends screening testing, especially in communities with moderate or higher community transmission rates, and provides detailed guidance on implementing screening testing programs.

## Community Transmission and Phased Mitigation Strategies

The “first step in determining when and how it is safe to reopen involves assessing the level of community transmission.” CDC uses the following community transmission metrics to phase re-opening decisions and advises that these metrics be reassessed weekly.

This recognition of the role community transmission rates should play in decisions about how to offer instruction reflect CDC’s understanding that “success in preventing COVID-19 in schools begins with and is connected to preventing transmission in communities.” For in-person instruction to be safe, schools must be prioritized and non-essential businesses should be restricted if necessary to bring community rates down to a safer level.

Community Transmission Indicator	Low Transmission Blue	Moderate Transmission Yellow	Substantial Transmission Orange	High Transmission Red
Total new cases per 100,000 persons in the past 7 days	0-9	10-49	50-99	≥100
Percentage of nucleic acid amplification tests (NAATs) that are positive during the past 7 days	<5.0%	5.0%-7.9%	8.0%-9.9%	≥10.0%
<b>*NOTE* – if the two metrics differ, the metric pointing to the higher rate should be used.</b>				

Community transmission indicators for each county can be found here:  
<https://covid.cdc.gov/covid-data-tracker/#county-view>.

CDC provides two phased mitigation frameworks—one for schools that do not implement screening testing and one for those that do—which differ only for schools in communities with high transmission rates. At all levels of transmission, both mitigation frameworks require that schools implement the five universal mitigation measures described above and require that instruction be prioritized over extracurricular activities and sports.

The mitigation framework provides as follows:

- Blue Zone (low community rates): K-12 open for full in-person, with distancing to the greatest extent possible. Sports/extracurriculars with as much distancing as possible.
- Yellow Zone (moderate community rates): K-12 open for full in-person, with distancing to the greatest extent possible in school and full physical distancing required for all sports/extracurriculars.
- Orange Zone (substantial community rates): K-12 in hybrid/reduced attendance, physical distancing required in school. Sports/extracurriculars only outside and with full required physical distancing.
- Red Zone (high community rates):
  - For Schools Without Screening Testing*
    - Elementary in hybrid/reduced attendance, physical distancing required
    - Middle and high school virtual only (unless they “can strictly implement all mitigation strategies, and have few cases”)
    - Sports/extracurriculars virtual only

*For Schools with Screening Testing* (defined as weekly voluntary screening of staff regardless of community transmission rates and weekly voluntary screening of students at community transmission rates of moderate or higher)

- K-12 (elementary, middle and high school) in hybrid/reduced attendance, physical distancing required
  - Sports/extracurriculars virtual only
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- Several new variants of COVID-19, some of which appear to spread more quickly and easily, have been detected in the United States. CDC advises that this heightens the importance of increased and rigorous adherence to mitigation measures, and notes that the agency may adjust school guidance if there is new evidence on the risk of transmission.

Helpful strategies for implementing the new CDC guidance in schools can be found in the *U.S. Department of Education's COVID-19 Handbook Volume 1: Strategies for Safely Reopening Elementary and Secondary Schools*, which was also released today and is available at <https://www2.ed.gov/documents/coronavirus/reopening.pdf>.

The CDC operational strategy guide can be found here:

<https://www.cdc.gov/coronavirus/2019-ncov/downloads/community/schools-childcare/K-12-Operational-Strategy-2021-2-12.pdf>.