



Children's National.

# Safe Return to School

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# CONFLICT OF INTEREST DISCLOSURE

- In the past 12 months, I have had no financial relationships with the manufacturer(s) of any commercial product(s) and/or provider(s) of commercial service(s).
- I do not intend to discuss an unapproved/investigative use of a commercial product/device in my presentation.

# LEARNING OBJECTIVES

At the conclusion of the presentation, participants should be able to:

1. Know the key components of the AAP guidance on school re-entry
2. Understand the current state of school re-entry in the US
3. Understand how the plan in our region fits into successful re-opening of schools



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**The AAP strongly advocates that all policy considerations for the coming school year should start with a goal of having students physically present in school.**

[AAP Guidance for School Re-entry](#)

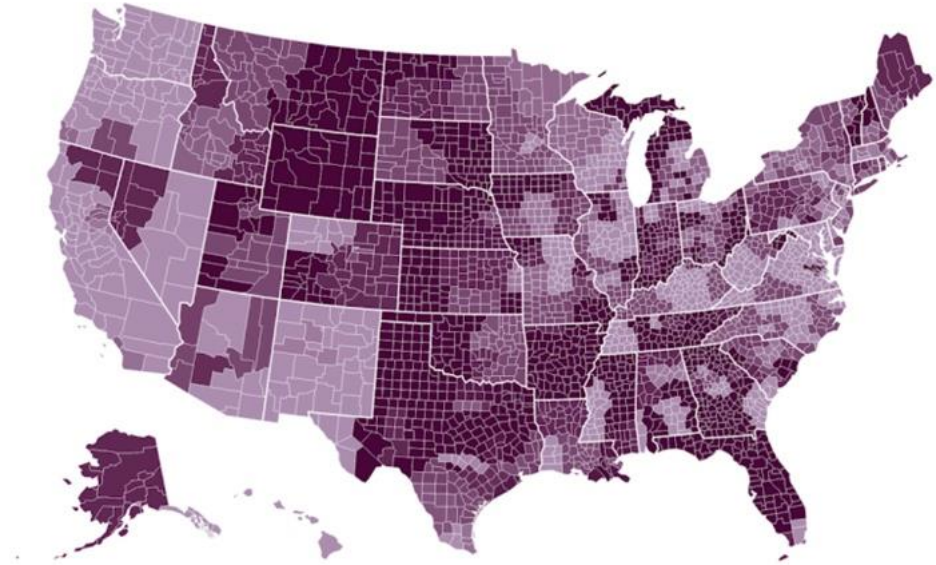
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# RACIAL AND SOCIO-ECONOMIC INEQUITIES

- COVID-19 Impact on Black, Latinx and Indigenous Communities
  - Increased prevalence of COVID-19 and increased severity of disease
  - Patterns consistent in the adult and pediatric population
- Access to virtual learning
  - Lack of access to devices, internet and appropriate spaces to learn
- Access to adequate nutrition
  - Over 30 million children and adolescents rely of free and reduced lunch
- Quality of school facilities
  - School funding models disproportionately impact Black and Brown communities as well as poor communities leading to insufficient investment in school facilities

# STATE OF US SCHOOLS

- 37% all virtual learning
- 63% in-person at least part of the time
  - 37% all in-person and 25% hybrid
  - [Burbio School Opening Tracker](#)
- Student case rates continue to be below community case rates
- Teacher case rates have been slightly higher than community case rates



Map Indicates Virtual Versus In Person Learning For K-12 Public Schools Across the US

# STATE OF DMV

- Public Schools largely remain closed for in-person learning
  - Exceptions:
    - Early childhood and special education in Fairfax
    - Loudon County
- Student and staff rates in DMV remain below community rates in DMV (mostly private school data)

# AAP GUIDING PRINCIPLES FOR RE-OPENING SCHOOLS

- Communities need to take **all necessary measures** to limit the spread
- School policies must be **flexible and nimble** in responding to new information
- Schools must take a **multi-pronged, layered approach** to protect students, teachers and staff
- Develop strategies that **can be revised and adapted** to level of viral transmission in the school and community
- Coordinate with state and/or local public health authorities, school nurses, pediatricians and other health experts
- Policies should be **practical, feasible, and appropriate** for the student's developmental stage
- Special **considerations and accommodations to account for the diversity of youth** should be made, especially for our vulnerable populations



# AAP GUIDING PRINCIPLES FOR RE-OPENING SCHOOLS CONTINUED..

- Pediatricians, families, and schools should partner together to **collaboratively identify and develop accommodations**, when needed
- School policies should be **guided by supporting the overall health and well-being** of all children, adolescents , their families, and their communities
- Policies should be consistently communicated in **languages other than English**, if needed
- Federal, state and local funding should be provided for all schools so they can provide **all the safety measures and support the educational needs** for students and staff including in virtual learning environments

# PHYSICAL DISTANCING GUIDELINES

- CDC guidance
  - 6 feet distance between desk/kids when feasible
- Important to encourage social distancing between adults
  - Increasing evidence of higher degree of spread between adults than from children to adults
- Grade specific:
  - Pre-Kindergarten/Preschool: Cohort classes to decrease crossover
  - Elementary: Spacing of desks and cohorting
  - Secondary: Spacing of desks, minimizing/eliminating lockers, increased spacing if activities include increased exhalation (singing, exercise)

# SPECIAL DISTANCING ISSUES

- Bussing
  - Taking into account physical distancing and recommendations for use of face coverings
- Hallways
  - Strategies to reduce traffic in hallways
- Meals/Cafeteria
  - Maximizing distancing by reimagining where students eat (classrooms and other spaces)
- Playgrounds
  - Enforcing physical distancing outdoors may be difficult and most effective strategy to reduce risk
  - Managing group sizes and cohorting are models to help manage risk

# FACE COVERING AND PPE GUIDELINES

- Universal face covering use in school for children over 2 years old
  - Most children can wear with practice, good adult modeling and breaks in day
- Critical for staff to wear face coverings particularly if closer than 6 feet with students
  - Consideration for when teaching language/reading
- Masking and protective equipment for medical procedures should be based on current CDC recommendations



# CLEANING AND DISINFECTING GUIDELINES

- Frequent handwashing
- Reduce high touch areas as much as possible and at least daily cleaning if not possible to reduce
  - Doors, railings, faucets
- Cleaning of high touch outdoor spaces should be included in plans



# VENTILATION

- Heating, air conditioning and ventilation systems should be optimized to increase air circulation
- Outdoor activities as much as possible
- Open windows and doors as viable
- No use of portable fans



# SCREENING AND TESTING

- Temperature and symptom screening at schools may not be feasible in person
  - Regardless, parents should be encouraged to keep their child or adolescent home if they are ill
- Testing prior to school re-entry will only give a false sense of security
- Staff or students with symptoms should be encouraged to connect with their medical provider to discuss the need for testing

# SCHOOL ATTENDANCE FOR SICK CHILDREN/ADOLESCENTS

- Many more children will be sent home from school when sick this school year
- Schools are likely to require clearance from pediatricians before return is permitted
- Guidance encourages testing for known exposure to COVID-19 patient or COVID-19 symptoms
  - Symptoms are extensive (see to right)
  - Can expect guidance to change as flu season and COVID-19 cases increase

## COVID-19 Symptom List:

- Fever, chills, rigors
- Cough
- Shortness of breath
- Rash
- Nasal congestion or rhinorrhea
- Sore throat
- Nausea or vomiting or diarrhea
- New loss of taste or smell
- Fatigue
- Headache
- Myalgia
- Poor feeding or poor appetite



# CDC RETURN TO SCHOOL CRITERIA

Pediatrician-confirmed alternative diagnosis and afebrile for 24 hours without fever reducing meds or:

- 24 hours without fever reducing meds **and**
- Respiratory symptoms have improved **and**
- 10 days since symptoms first appeared **or**
- 10 days after test if no symptoms **or**
- 14 days after exposure to known contact
  - In households, means 14 days from recovery of household members

# COVID-19 POSITIVE INDIVIDUAL: SCHOOL OPEN OR CLOSED?

## Original recommendations:

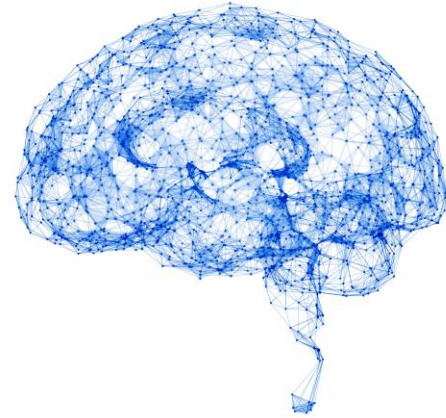
- Individual in one class:  
Close class for cleaning
- More than one individual impacted:  
Close school
- Across multiple schools:  
Close district

## Updated data:

- Increasing evidence of low risk of transmission if control measures are used
- Isolation of sick individuals
- Contact tracing
- Cleaning of spaces

# MENTAL HEALTH NEEDS

- Students needs will be different
  - Schools need to recognize students may not be ready to learn on day one. This includes increased anxiety, decreased attention span, increased traumatic stress, and others
- Staff will have their own mental health needs to be ready to teach and support students



# SPECIFIC ISSUES FOR CHILDREN WITH MEDICAL COMPLEXITY

- PLAN! PLAN! PLAN!
- Connecting the patient, family, medical team and school team and create an ongoing dialogue
- Develop plans based on information currently available and make changes as new information
- IEP and IHP reviews will be critical
- Work together to reduce (not eliminate) risk

# OPPORTUNITIES TO ENGAGE

- Keeping up to date on decisions of schools in the area
- Keeping up to date on rate of COVID-19 in the community
- Asking patients/students and parents about their experience with their schools
- Connecting with the school nurse and primary care provider for patients/students with disabilities
- Connecting patients/students and families with mental health supports

# RESOURCES

- AAP Clinical Guidance: <https://services.aap.org/en/pages/2019-novel-coronavirus-covid-19-infections/clinical-guidance/covid-19-planning-considerations-return-to-in-person-education-in-schools/>
- Healthy Children Website: <https://healthychildren.org/English/health-issues/conditions/COVID-19/Pages/return-to-school-during-covid-19.aspx>
- AAP School Partnership News Release: <https://services.aap.org/en/news-room/news-releases/aap/2020/pediatricians-educators-and-superintendents-urge-a-safe-return-to-school-this-fall/>
- Burbio School Opening Tracker: <https://cai.burbio.com/school-opening-tracker/>

# Questions

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