

Guidance for Providers on Indications for Distance Learning

Q: What health conditions are allowed for distance learning? And, is there guidance on whom we should or should not be writing excuses? There are wildly different opinions from parents!!

A: The AAP and our local chapters have provided guidance to encourage dialogue with hesitant families to encourage school attendance for all children. Find the most recent [AAP Guidance on Return to School](#) here which starts with this statement: The AAP continues to strongly advocate that all policy considerations for school COVID-19 plans should start with a goal of having students physically present in school. Local chapter guidance is here: [Virginia AAP Return to School Guidance](#); [DC AAP Toolkit](#).

The DC Form: DC's medical certification form refers providers to the CDC list of higher risk conditions as a reference, but we note that CDC has not defined a list of conditions that require virtual learning. DC government has similarly not articulated an approved list of conditions for this purpose -- rather, such a decision must be made based on a clinician's best professional judgment. Schools will accept any medical certification that is complete, legible and explains how a student's condition requires the student's participation in distance learning and enroll that student in distance learning.

The Fairfax Form: Fairfax County Public Schools (FCPS) reviews each [COVID-19 Health Eligibility form](#) submitted to ensure that it is completed in its entirety; signed by both the parent/guardian and a licensed physician, nurse practitioner, psychiatrist or licensed clinical psychologist; and to determine alignment with at-risk underlying medical conditions as identified by the CDC. In cases where further clarification or medical information is needed, FCPS works directly with the family to determine if virtual enrollment is appropriate for the student based on the documented health condition.

Please refer to the individual school district websites (provided in an associated document) to learn about language provided by each jurisdiction.

Q: Is illness in a family member included as a medical indication for distance learning?

A: No. Only the student's physical or mental health condition that requires distance learning, as documented on the medical certification form by a licensed physician or nurse practitioner, may be used to approve registration in distance learning. This and other FAQs regarding DC's medical certification are available for healthcare providers via the link [here](#).

Addressing Parental Concerns About the Safety of the School Environment

Q: Is there data on classroom spread?

A: Spread in classrooms is very infrequent. The majority of the cases identified are community-acquired.

For DC Schools, further data and details can be found in DC Health's dashboard here: <https://coronavirus.dc.gov/data/schools>. CDC science brief on COVID in schools is here: https://www.cdc.gov/coronavirus/2019-ncov/science/science-briefs/transmission_k_12_schools.html. DC Health recently published an MMWR piece on COVID and its presence in District childcares. Link is here: https://www.cdc.gov/mmwr/volumes/70/wr/mm7020a3.htm?s_cid=mm7020a3_x.

Fairfax County Public Schools makes COVID-19 data available to the public at <https://www.fcps.edu/return-school/fcps-confirmed-covid-19-case-reporting>. Between the dates of September 8, 2020 to June 7, 2021, 1,594 cases occurred in students, staff and visitors in our schools and facilities. Although community transmission rates were at times high and substantial, our in-school transmission rates have remained low at less than 1% due to our implementation of [layered prevention strategies](#). FCPS recently earned the [WELL Health-Safety Rating](#) for all schools and offices. In so doing, FCPS has joined a community of organizations pushing the boundaries of what health and safety look like in a post-coronavirus environment. Find out more at [FCPS earns WELL Health-Safety Rating](#).

Q: How is an outbreak defined in schools/childcares? 2+ cases?

A: In [DC Health's dashboard](#), an outbreak is defined as 2+ cases with a plausible epidemiologic link within a given school or childcare setting.

As noted, the majority of cases presenting in schools and childcare settings are community acquired.

The [K-12 Schools Reporting Outbreaks of COVID-19](#) publishes data related to the outbreak of COVID-19 in public and private K-12 schools in the Commonwealth of Virginia. The outbreak data lists those schools and localities in which an outbreak has occurred among students or staff. An outbreak is defined in this dashboard as "the identification of two or more laboratory-confirmed cases of illness that are epidemiologically linked by person, place, and time." Beginning on May 7, 2021, the Virginia Department of Health (VDH) will publicly report outbreaks with laboratory evidence from any diagnostic test meeting the COVID-19 outbreak definition. Previously, VDH only publicly reported COVID-19 outbreaks with laboratory

confirmed cases from molecular amplification tests (MATs), like PCR tests. Now, VDH will report COVID-19 outbreaks with cases identified by any diagnostic test, such as antigen tests, to more accurately represent the burden of COVID-19 outbreaks. [Additional information about outbreaks in Virginia is available](#)

Q: How will the schools be performing outreach and education to families to increase comfort and confidence in return to in person learning?

A: Every school and local education agency (DCPS or charter network) is engaging its community in different, targeted ways – but there is broad appreciation that engagement between schools and families is critical to build confidence in returning to schools.

Within DCPS, school personnel will be attending ward- based meetings, but also setting up school-specific meetings and tours, focusing on schools with lower demand. Also, DCPS and Children’s National are working to get out clear messages to families on vaccines and provide clear information about the safety and efficacy.

FCPS is planning ahead to Return Strong to five days of in-person learning in the fall. FCPS is preparing for a smooth transition to five days in the fall, while following health and safety guidelines, with the following actions:

- Updating bell schedules and bus schedules
- Expanding outdoor learning capacity ([Watch video about Centreville ES outdoor learning.](#))
- Expanding lunch capacity, preparing to offer breakfast and lunch at no cost
- Developing master schedules for five day a week of in-person instruction
- Reinstating School Age Child Care (SACC) to its before and after school model
- Monitoring health and vaccine updates
- Exploring COVID-19 screening and diagnostic testing pilots.

More information is available at <https://www.fcps.edu/return-school/fall-2021-planning>

Q: What is the DCPS guidance re cohorting and feasibility of after school programming?

A: Before and after school programming will be allowed next school year. Cohorting is encouraged at all DCPS schools, but that should not be a barrier to bringing back all students next school year.

Q: With more masked kids in classrooms, and maintaining 3ft between desks, what happens when the kids have to eat unmasked? How do they shift to the required 6ft for unmasked kids?

A: DC Health's and OSSE's guidance for District schools recommends 6 feet of distancing, to the extent feasible, during meals. Schools are encouraged to consider classrooms as well as larger spaces, including outdoor spaces, for meals to accommodate distancing as appropriate.

At DCPS, there will be distancing of 6ft to the extent feasible during eating. We will be leveraging bigger spaces like cafeterias, multi-purpose rooms for dining to support distancing when possible.

Q: In addition to HVAC upgrades, was any outdoor infrastructure added to school facilities, like more outdoor covered eating area, or even outdoor educational facilities - in case of increased caseloads ...to avoid repeat school closure?

A: DC Public Schools is investing \$9M to increase outdoor learning opportunities. This will be spent on outdoor matters (tents, chairs, tables, etc) and things like outdoor wifi access. DC charter schools are similarly investing in outdoor learning, and the DC Office of the State Superintendent of Education is investing in numerous resources (see here: <https://osse.dc.gov/page/outdoor-learning-resources>) and consultative services for schools to support the use of outdoor spaces.

Q: What is the policy on giving nebulized albuterol in schools?

A: Nebulizers are allowed in District schools when necessary, but students are strongly encouraged to replace the nebulizer with oral inhalers whenever possible. If nebulized treatments are administered in a school setting, schools have detailed guidance to support safe administration. Schools are also encouraged to work with families and the school nurse to identify opportunities to transition the schedule for the administration of nebulized medication to before or after school, if medically appropriate.

Q: What has been the vaccine uptake by DCPS teachers and staff?

A: DCPS does not currently have this data, but DCPS have hosted well-attended mass vaccination events for DCPS staff. Additionally, DCPS has partnered with DC Health to utilize four DCPS schools for public vaccination sites

Q: Has all of the HVAC work been completed or still in process. Are all of the air filters in place and running?

A: In DC Public Schools, all HVAC work is complete, now in the maintenance stage (filter changes, etc).