Steps for Schools to Respond to an Outbreak

1. Defer to health department protocols.
   The Centers for Disease Control and Prevention says “schools are not expected to make decisions about dismissal or canceling events on their own,” nor to screen students or staff to determine a COVID-19 diagnosis. Those tasks are the responsibility of state and local health departments, which have liaisons who will work with school districts as cases arise.

   When making contact with health department officials, schools should have data ready to support their initial findings, said Em Stephens, a respiratory disease coordinator for the Virginia Department of Health. That includes: total number of students and staff; number of students and staff who are ill or have been diagnosed with COVID-19; and number of COVID-19 cases from the same classroom.

2. Develop a tentative plan for how school closures will work.
   Closing schools as a preventative measure at the first sign of outbreak could have “downstream” negative effects that school leaders need to consider, says Rachel Orscheln, associate professor of pediatrics and infectious diseases at Washington University School of Medicine in St. Louis.

   “It disrupts [students’] normal routine, likely causes anxiety in the children, disrupts their educational process, and certainly impacts parents who now need to offer alternative child care which may not be readily available.” That move could also sideline parents who are healthcare workers and other emergency personnel, leaving them unable to contribute in their communities. Health officials will help schools make decisions about when to close and for how long.

3. Monitor absenteeism patterns.
   Abnormal spikes in absences over a short period can be an indication that disease of some kind is quickly spreading in the school. Health departments will be interested in finding out how many of those absences appear to be connected to respiratory illnesses like the common cold or “the flu,” which share symptoms with COVID-19 including fever, cough, and shortness of breath.

   During this period, the CDC recommends, “perfect attendance awards and initiatives” should be actively discouraged.

   “Viruses can live on surfaces for a long time after they’ve been touched,” Orscheln said. It’s important for schools to routinely clean high-touch surfaces—the CDC says doorknobs, light switches, and countertops. The American Chemistry Council’s Center for Biocide Chemistries has put together a list of products that have been pre-approved by the U.S. Environmental Protection Agency for use in situations like this.

5. Create communications plans.
   Providing staff, parents, and students with as much information as possible will help prevent misconceptions. At the same time, districts must follow privacy restrictions on sharing details about people who have the disease and clear all correspondence with health officials.

   Check with local and state health authorities to see if they have documentation that school districts may use as models rather than starting from scratch, said Stephens from the Virginia health department. “Any information they put together is always a great resource,” she said.

6. Consider limiting big-group gatherings.
   As COVID-19 spreads, it may be best to limit people’s exposure to large groups of people. To that effect, the CDC recommends putting together grab-and-go bagged lunches or meal delivery options for students, rather than having everyone congregate in a cafeteria. The CDC has previously recommended spacing out students’ desks by at least three feet as a mitigation measure.

—Reporting by Mark Lieberman

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