COVID-19 Guidance for School Closures and Dismissals

The Utah Department of Health (UDOH) and Utah’s thirteen local health departments are actively monitoring the ongoing outbreak of novel (new) coronavirus, or COVID-19. UDOH, the Governor’s Coronavirus Task Force, the Centers for Disease Control and Prevention (CDC), and the Utah State Board of Education (USBE) are coordinating efforts involving communication, preparedness, and prevention within our school communities.

Local health departments have the authority to close schools when necessary to protect the public. In the event that a school closure is necessary, the local health department will work closely with the impacted LEA(s), USBE, and UDOH to make the determination that best addresses the specific circumstances.

Currently, children are not at a high risk for getting severe illness but can act as carriers, which can potentially put family and other community members at-risk. On the contrary, not having children in school may increase community exposure, as those children may visit entertainment and other community venues. Decisions about school closures will be made carefully, and with consideration of unintended consequences. This threshold guidance is intended to assist in the decision-making process regarding school closures due to COVID-19.

Local and State Trigger of NPI Arrangements

No evidence of community transmission of COVID-19 in Utah:

- Transmission of COVID-19 acquired within the local community and not related to travel has not yet begun in Utah.
- Schools, businesses and other institutions may consider minimally invasive mitigation measures

Evidence of local community transmission of COVID-19:

- More than 4 cases of COVID-19 linked to a specific business or healthcare setting or more than 4 cases within a 1-mile radius of each other (here on referred to as a cluster) * in 14 days OR
- A cluster of COVID-19 cases without an explanatory epidemiologic link (i.e. travel to another state or country with community transmission or contact to a confirmed case) within a local health jurisdiction in 14 days

Evidence of widespread transmission of COVID-19 in Utah:

- Two or more Utah LHDs meeting the following criteria:
  - A cluster of COVID-19 cases without an explanatory epidemiologic link in 14 days OR
  - Influenza-like Illness rate at least two times above the seasonal baseline while the COVID-19 epidemic is occurring
o Two or more concurrent clusters of COVID-19 indicating local community transmission of COVID-19 within a Utah local health jurisdiction

• Sustained community transmission COVID-19 in one LHD for which the rate or location of transmission means that it is likely to spread to other Utah local health jurisdictions.

• This radius may be larger in rural areas.

School Closures and Dismissals

Data suggests that school closures and dismissals in the event of severe outbreaks or pandemics can reduce the spread of disease. However, the burden experienced by the community can be great, so the decision to close schools must be weighed carefully. The following items are to be considered when deciding if school closures are appropriate:

• Caregiving difficulties faced by parents (loss of income, consequences of missed work)
• Students congregating in alternate locations
• Supervision of students if parents become sick or are required to work
• Vulnerable student populations needing additional care
• Vulnerable student population programs (e.g., free school meals) that will be discontinued temporarily
• Education and mental health considerations if closures are prolonged

Facilities subject to school closures include childcare facilities, K-12 schools, and colleges and universities.

A school dismissal means that students would be sent home, but facilities would be kept open and staff would be allowed to continue to work. A school closure means that all students and staff would be sent home. Coordinated school closures and dismissals can allow for 1) time to assess transmissibility of the disease and 2) to slow the spread in the early stages of circulation. Strategies for social distancing in schools include the division of classes into smaller groups of students and spacing so that students are not seated closely.

Note: Closures and dismissals could also be applied selectively to single schools serving high-risk populations or reactively to schools with high rates of absenteeism from illness. These are often not considered non-pharmaceutical interventions because (1) single-school closures may not be effective at slowing community spread and (2) closures of schools where high rates of illness have already occurred are not purely preventive interventions (though they may somewhat slow spread).

Proposed actions:

If there is no evidence of community transmission in Utah:

• Stay informed about the local COVID-19 situation. Ensure that people know where to turn for reliable, up-to-date information in your local community. Monitor the CDC COVID-19 website and the Governor’s Coronavirus Task Force website, www.coronavirus.utah.gov, for the latest information.
• Develop or review your emergency operations plan. Review or update your emergency operations plan to include strategies to reduce the spread of disease and establish mechanisms for ongoing communication with staff, students, families, and the community. This should be done in collaboration with local health departments and other relevant partners.
• Consider cancellation, or postponement, of various mass gatherings, activities, and events.
• Encourage sick individuals to stay home. Local educational authorities (LEAs) should direct all staff, students, families, and volunteers to self-screen and stay home if sick with coughing, sneezing, and/or fever.
  o If individuals have symptoms of fever, cough, or difficulty breathing, direct them to stay home for 10 days or 72 hours after fever resolution, whichever is longer.
• Perform routine environmental cleaning. LEAs should maintain their routine cleaning and disinfection program. Emphasize cleaning and disinfecting frequently touched objects and surfaces (e.g. doorknobs, light switches, toilet handles, sink handles, countertops, desks).
• Emphasize normally recommended actions to prevent the spread of disease.
  o Frequent hand washing with soap and water for at least 20 seconds, especially after going to the bathroom, before eating, and after they blow their nose. Help young children do the same. If hands are visibly dirty, use soap and water to clean hands.
  o If soap and water are not readily available, use an alcohol-based hand sanitizer with at least 60% alcohol.
  o Advising people to avoid touching their eyes, nose, and mouth with unwashed hands.
  o Covering coughs or sneezes with a tissue, then throwing the tissue in the trash and cleaning hands with soap and water or hand sanitizer.
• Provide adequate supplies for good hygiene.
  o Clean and functional handwashing stations, soap, paper towels, and alcohol-based hand sanitizer.
  o
If there is evidence of local community transmission:
• Continue all strategies suggested prior to the initiation of community transmission.
• Consider closure.
  o LEAs in an impacted LHD should consider closing schools and canceling all extra-curricular activities for two weeks after identifying a cluster of community transmission. Closures should be considered for facilities within a 5-mile radius of a cluster.
• Utilize early dismissal or closing school facilities as a social distancing measure. It may reduce face-to-face contact in community settings to reduce the spread of diseases transmitted by contact, droplets, or air. Choose social distancing measures depending on the severity of the disease.
• Assess the impacts of any recommendations you make on the families and students you serve. There are equity implications for any decisions that facilities may make, and the families and students you work with will be able to provide the best feedback and guidance on how to move forward in a student- and family-centered way.

If there is evidence of widespread transmission across Utah OR healthcare system compromise:
• Continue all strategies recommended for when community transmission is occurring.
• Transition to statewide implementation of pandemic influenza NPIs and messaging. Consider amplifying the following mitigation strategies:
  o Increase handwashing and use of alcohol-based sanitizer
  o Practice respiratory hygiene and cough etiquette
  o Keep distance from others (> 6 feet)
  o Frequently clean and disinfect surfaces
  o Remain home during a respiratory illness
• Support voluntary isolation of sick persons
• Support voluntary quarantine of contacts of sick persons

• Consider or order closures of schools.
• Consider or order cancellation of various mass gathering, activities, and events at schools.

Factors to Consider in Decision-Making

Continuity of education:
• The academic year may need to be extended or delayed.
• A school closure resulting from efforts to control a pandemic or public health emergency would meet the definition of an emergency closure, which would allow the Utah State Board of Education (USBE) to waive the school day and hour requirement under Utah Administrative Code (UAC) R277-419-12. School, Inclement Weather, or Other Emergency School Closure Days. Additional information and guidance about emergency school closures is available on USBE’s Coronavirus Resources website.
• Assess the feasibility of distance learning opportunities.
  o USBE encourages an LEA to provide electronic or distance learning services to affected students for the period of the pandemic or other public health emergency to the extent of personnel and funds available under UAC R277-419-12. (linked above).
  o Additionally, it is important to encourage the use of an equity lens when making these plans. School districts must ensure equal access to education for all students. Visit USBE’s Coronavirus Resources website to view recommendations for LEAs to consider before implementing a distance learning plan.

Impacts to parents and families:
• School closures will result in the need for additional childcare. However, childcare facilities may also be considering closures or delays in service.
• Closures may disproportionately affect certain groups.
  o Families with parents or guardians that work full-time and/or have two or more jobs may struggle to find childcare, creating the possibility that children will be unsupervised during school hours.
  o Families with low incomes may rely heavily on school food programs to feed their children during the day. These families may not be able to afford enough food for their families during the closure.
  o Older family members may be negatively impacted by taking over responsibilities for childcare while parents are working if children are exposed prior to being sent home.
  o Families and students that are experiencing homelessness may not have anywhere to go if normal operations of schools are suspended. Some shelters have set hours that do not allow for individuals to remain in the shelter during the day.
• Adults and families may miss work and lose income if they must stay home to care for children.

Impacts to students:
• Students rely on meal services at schools.
  o Approximately 50 percent of K-12 students rely on breakfast and lunch provided through the school system.
    ▪ Continuity of food services, particularly for our most vulnerable students and families, is an important consideration. Consider students who rely on
school meals when assessing the need for school closures. The United States Department of Agriculture (USDA) child nutrition programs, including the National School Lunch Program, operate through group feeding sites. During major outbreaks, USDA allows waivers to certain requirements. USBE is currently seeking four waivers from USDA to assist local schools.

- Provision of education for students with disabilities.
  - In the event of extended school closures, LEAs remain responsible for the free appropriate public education of its students eligible for special education services with an individualized education program. LEAs will want to plan how they will continue to meet the requirements of the Individuals with Disabilities Education Act (IDEA).

Impacts to employees:
- Delayed or extended school year may have a negative financial impact on staff who have summer jobs to supplement their income.
- Delayed or extended school year may have a negative impact on staff ability to obtain continuing education units over the summer months.

If schools are closed or dismissed, consider the following additional steps:
- Provide education to discourage students, staff, and employees from gathering in alternative locations.
- Consider alternatives for ensuring that students receive necessary medical and social services.

Tactics to Reduce Impacts
- Maintain an open line of communication with corresponding Local Health Department leadership, including ensuring the local health officer has current contact information for the superintendent.
- Create clear and concise plans to communicate accurate and timely information to the students, families, and communities you serve.

Note: Anyone who has had close contact with a confirmed COVID-19 case or has recently returned from a geographic area with a CDC Level 2 or 3 travel alert (https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html), will be asked to self-quarantine for 14 days from their last exposure. They are not sick and do not have COVID-19, but out of an abundance of caution, public health recommends they stay at home and avoid large crowds. There is no risk of COVID-19 to those who have come into contact with the quarantined student, and thus no need to take any special precautions.