COVID-19 in Schools: Frequently Asked Questions

Cleaning & Disinfection

Does playground equipment need to be cleaned while in use (i.e. every time a different child uses a slide, swing, etc.)?  
Current studies indicate that the risk of catching COVID through touching objects is low. While increased cleaning measures are not harmful, normal and standard cleaning processes will suffice.

Other than standard disinfection practices, are there other recommendations regarding shared musical instruments?  
Consider suspending musical practices and performances that involve singing or playing wind instruments. If such events are held, musicians should be spaced as far apart as feasible, ideally farther than 6 feet apart. Students also should not share mouth pieces and instruments should be cleaned and disinfected between uses if shared among students.

Are there special considerations or recommendations regarding the use and disinfection of restrooms which are in or attached to the classrooms? Does the teacher need to clean it every time it is used? Does the student need to wear a mask while in the restroom?  
Staff should assure the bathrooms are cleaned and disinfected routinely using disinfectants that are EPA-approved against SARS-CoV-2 virus, while paying special attention to high touch areas. Masks should be worn in the bathroom, including single use restrooms.

If the students share books, how do the books need to be decontaminated?  
Current studies indicate that the risk of catching COVID through touching objects is low. While increased cleaning measures are not harmful, normal and standard cleaning processes will suffice.

Last spring it was suggested to let learning packets that were returned sit for 72 hours. Is it OK for teachers to touch student work in class or collect and grade the work, or should they let it sit for an extended period of time? Do teachers need to wear gloves to touch students’ work?  
The level of risk of potential exposure to the virus by touching objects is low, per current evidence, so there is not currently a recommendation to let items sit for an extended period of time. Teachers, along with all staff and students, need to maintain good hand hygiene practices and avoid touching their faces.

Close Contacts

Is testing recommended for close contacts?
Yes, testing is recommended for close contacts, but no sooner than seven (7) days after first contact with the person when they were contagious with COVID-19.

If a close contact to a case tests negative for COVID during their quarantine, does their quarantine end, thus allowing them to return to school?
No. A close contact to a case must complete their quarantine period regardless of test results. Those who test positive would now need to complete isolation criteria based on the current guidelines.

If a teacher has intermittent close contact with a student positive for COVID-19 throughout the day, would we consider him/her a close contact if the close contacts add up to fifteen minutes or more?
“Close contact” is determined through the case investigation process and is dependent upon each situation. In general, if a teacher is spending periods of time in close contact with a student greater than 15 minutes throughout the day, the teacher would be considered a close contact, regardless of whether the teacher and student were wearing masks.

If the school can assure for 6 feet of social distancing in a classroom, do the students still need to wear a mask in the classroom to be avoid being considered a close contact?
Close contacts will be defined as anyone who is within 6 feet of a positive for greater than 15 minutes case during the infectious period regardless of mask use. Please refer to the SC Department of Education masking guidelines for further information.

If children are sitting at tables with at least 6 feet of distance between them, no barriers and not wearing masks, would they be considered close contacts if there was a positive case at the table?
If social distancing of 6 ft or more is assured, this would not be considered close contact.

What is the isolation guidance for someone who is symptomatic and waiting for test results?
A symptomatic individual who is awaiting test results should remain in isolation until the test results are known.

What is the guidance for a student living in a house with someone who has been on isolation? Are household members advised to quarantine?
Students who live in a house with someone positive for COVID-19 and are able to isolate from the individual will need to quarantine for 14 days since last exposure. If they are unable to isolate from the individual in the household, the student will need to quarantine for the entire isolation period of the family member plus an additional 14 days to assure they do not develop symptoms. See the CDC Quarantine calendar for a visual representation.

Can close contacts be “cohorted” in the same classroom instead of excluding them?
This is not recommended at this time.

Would students be considered a close contact to a case if they are seated in their classroom 3 feet apart, not wearing masks, but do have plexiglass shields surrounding their desk and workspace?
Three-sided Plexiglass shields, if appropriately sized and utilized so that they extend well above each child’s head and have sides that extend well beyond the sides of the child’s head, likely
would decrease the risk of virus spread, though this has not been studied. In a scenario such as described above at a distance of at least three feet, when utilized in combination with mask wearing, the students would probably not be considered close contacts. However, the Plexiglas shields do not serve as a substitute to mask-wearing.

**Social Distancing**

If a chorus class can maintain excesses (greater than 6 feet) of social distancing while singing, but not wearing a mask, would that eliminate the considerations of close contacts in the class?

Chorus classes are of concern as singing might increase the distance respiratory droplets travel. It is highly recommended that chorus students spread at least 6 feet apart AND wear a mask. It is preferable to hold practice outdoors when possible.

Is it OK for students to throw a football, kick a soccer ball, etc. in PE class if they maintain at least a 6-foot distance?

Yes. Students can participate in physical activities if they are maintaining a 6-foot distance and wearing a mask is recommended when social distancing cannot be assured. PE activities that allow for adequate social distancing should be prioritized.

There have been varying reports regarding young children stating that only 3 or 4 ft of distance is needed. Is this true for younger children?

No. Per CDC recommendations social distancing must be maintained at 6 feet.

**Case Investigations**

What will the case investigation process look like?

When notified of a positive case, DHEC case investigators and epidemiology staff will interview the case (or if a child, then their parent/guardian) to determine the infectious period, potential close contacts, and to reiterate education about isolation. If there is an association with the school, DHEC will reach out to the school to confirm close contacts and determine the appropriate course of action. Both the case and close contacts will be contacted routinely via phone by the DHEC contact monitoring team to assure there are not continued questions or concerns.

If a student or faculty are tested, how long will it take to receive results?

Resulting is dependent upon which testing site the individual attends. Testing sites are sponsored by a variety of partners and resulting time is dependent upon the lab company being used by the site. The client should receive their results directly from the medical partner conducting the testing event.

What is the difference between quarantine and isolation?

Isolation and quarantine are measures taken to physically separate people to reduce the risk of spreading the virus. Isolation separates those believed to be contagious with COVID-19. Quarantine separates those at risk of becoming contagious because they are believed to have been exposed. More information is available on DHEC’s [COVID-19 Frequently Asked Questions](https://dhec.sc.gov/coronavirus/faq) webpage.
If a teacher tests positive for COVID-19 but is asymptomatic, can he/she still work?
No, they cannot work. They should isolate as instructed.

If a teacher/staff is a close contact to a case but is asymptomatic, can he/she continue to work?
Teachers and school staff are considered critical infrastructure employees so they may continue to work if it is necessary to maintain school operations and staff limitations exist. The individual should assure for vigilant social distancing, monitor for symptoms and isolate if they develop symptoms. In addition, the individual should quarantine when not in the school setting. DHEC’s interim school guidance provides more information on continuing to work while in quarantine.

How will the schools be notified if there is a positive case in the school?
Notification may happen in a couple of different ways. The student’s parent/guardian or the staff member may notify the school before DHEC is aware of the case. If this occurs, the school will need to report the case to the regional DHEC epidemiology office during normal business hours. If DHEC is aware of the case prior to the school, a DHEC epidemiologist will call the principal of the school or his/her designee. Maintaining two-way communication between the school and the epidemiology staff will be vital to the case investigation process. The school should maintain the case’s confidentiality.

What is the expectation of the school nurse during a case investigation? Will the school be responsible for contact tracing?
The school nurse must report any known positive test results that have not already been discussed with DHEC to DHEC’s regional epidemiology office. During the case investigation, the nurse, principal or teacher may be asked to help assess and confirm close contacts. Once close contacts are confirmed DHEC staff will work with the principal and nurse to determine appropriate next steps and potentially send out letters to parents from the school. The school nurse will not be responsible for doing a case investigation or ongoing contact tracing but will inform the process.

Will DHEC send letters to the parents or will the schools? Is there a template letter that can be used?
There is a template letter that can be customized and sent to the parents of contacts in the schools. These letters can be sent by the schools after coordination and communication with DHEC is confirmed.

Who is responsible for sending notification letters to parents, the schools or DHEC?
Schools are responsible for the notification process.

Is it advisable for the districts to have a central point of communication (i.e. a website) for communicating with parents?
This would need to be approved through the school district and SC Department of Education. DHEC is currently developing its own communication plan regarding school COVID-19 data.

Exclusion

What document has the correct exclusion criteria?
Please assure that you are using the exclusion criteria and guidance documents dated August 2020.
If an individual has symptoms but their physician will not perform the test, do we exclude them without a positive test?
The individual can return if their physician thinks there is another likely diagnosis (i.e. test positive for strep), or if they receive a negative test result, or if they complete the isolation period. Individuals interested in free, community testing can visit the DHEC testing page or mobile testing webpage. These sites are updated daily.

Can school nurses conduct testing?
This is not available at this time but is being discussed and problem solved.

There is concern regarding the likelihood that flu symptoms may mimic COVID-19 symptoms and this could complicate the school nurse triage process. Are there any recommendations regarding triaging a sick child with no fever?
School nurses should defer to the school exclusion list when making decisions about allowing school attendance.

What is the guidance for students suspected of having COVID-19 but refuse testing? Do we send the child home?
Yes, the child should be isolated until it has been at least 10 days since their symptoms began, they have been free of their fever for 24 hours without the aid of fever reducing medication, and other symptoms are improved.

If an employee has been in a group setting and is now showing COVID-19 symptoms and has test results pending, how do you handle others in the group? Are others OK to continue working?
If the others in the group are asymptomatic, they can continue working with heightened awareness and monitoring for symptoms.

If a teacher lives in a house with a family member who is positive for COVID-19, do they have to quarantine?
No, teachers are considered critical infrastructure workers and therefore would not have to quarantine as long as they are asymptomatic, maintain proper social distancing, wear masks, and are monitored closely for symptoms. DHEC’s interim school guidance provides more information on continuing to work while in quarantine.

Miscellaneous

What is the data threshold for closing a school or classroom?
There is no defined standard or threshold for closing schools or classrooms. Many factors would need to be considered, including for example, not just the number of cases but also the distribution of cases within a school and their timing. Your regional DHEC epidemiology team will work closely with your lead nurse and principal to navigate the situation. DHEC does not make closure decisions but answers questions to assist school leadership in making the best decisions for the students and teachers.

Is there a problem if the schools set a threshold for closures?
Any decision to set a standard threshold would be a district decision, not a DHEC decision.
Is there a recommended number of “hygiene breaks” (ie time to wash hands) for children?
It is recommended that children (and adults) wash their hands routinely and thoroughly throughout the day particularly before eating, after using the restroom and after hands are soiled or dirtied. There is no specific recommendation on the frequency or intervals of hand washing.

At what temperature reading do we send a student home?
If a student or staff member has a temperature of 100.4°F and above, they should be sent home, regardless of whether or not they have any other symptoms. Children or staff with temperatures between 100.1°F and 100.3°F should be excluded under the influenza-like illness (ILI) criteria if they also have cough and/or sore throat with no other known cause. Refer to the School Exclusion List for more information.

Does DHEC recommend routine temperature screenings in the schools?
While this practice is not harmful, it is not a specific recommendation. However, it is recommended that ongoing education and messaging to parents which stress the need for at home monitoring of symptoms to occur. See CDC recommendations on symptom screening.

Do DHEC recommend taking students’ temperatures prior to them getting on the bus?
Should a student with a known temperature be allowed on the bus?
Temperature screening is not recommended prior to boarding the bus. However, if temperature screening is conducted, children with known, confirmed fevers (100.4°F or greater) should not be allowed on the bus.

There have been reports that nausea, vomiting, and diarrhea are not considered symptoms. Is this true?
These can be symptoms of COVID-19 but are not always present in individuals positive for COVID-19 and may not be related to COVID-19 if present.

What PPE is recommended for the school nurse when attending to children in her office, or in the isolation room?
See the PPE recommendations on the DHEC website.

Can face shields be used in lieu of masks?
Face shields are NOT a substitute for masks as they have not been proven to provide equivalent protection as compared to masks. Per the SC Department of Education’s Face Covering Guidelines, cloth face coverings should be used on the school premises: Clear face coverings are not face shields. While the CDC does NOT recommend use of face shields for normal everyday activities or as a substitute for cloth face coverings because of a lack of evidence of their effectiveness for source control, there are several scenarios in which their use is permitted:

- Face shields may be used to supplement cloth face coverings in those who desire further protection.
- If clear face coverings are not able to be obtained, face shields may be used in place of cloth face coverings in the examples above.
- If a teacher is maintaining greater than six feet of distance between themselves and anyone else while in a fixed location (e.g., their desk or the front of the room), a face
shield alone may be used, but the teacher should have a cloth face covering within arm’s reach to be able to put on quickly if necessary.

Are there any recommendations for teachers regarding how to best console a crying child and maintain safe practices?
In these situations, it is best if both the teacher and child are wearing both mask and eye protection and attempt to limit the duration of the close contact. The definition of close contact considers both distance and duration, so it is important to limit the duration of direct and unprotected exposure.

Are teachers considered critical infrastructure workers?
Yes, teachers and staff are considered critical infrastructure workers.

*This is consistent with guidance available as of August 14, 2020 and may be updated as new information on this novel virus and evolving situation become available.*