



Public Health Recommendations for COVID-19 School Learning Modes

October 1, 2020

The Johnson County Department of Health and Environment (JCDHE) will update school gating criteria based on emerging information and community input. Since JCDHE released recommendations in August, the [Centers for Disease Control and Prevention](#), the [Kansas State Department of Education](#), the [Kansas Department of Health and Environment](#), and the [Mid-America Regional Council](#) all released guidance. Many schools in Johnson County have also gone back to learning in some form and are implementing public health strategies to prevent transmission of COVID-19.

These public health recommendations are intended to help families and school districts make decisions about the safest learning mode for students and staff in a novel pandemic. The recommendations are based on currently available information, data and science, and expert analysis from the [Centers for Disease Control and Prevention](#) and [Children's Mercy Hospital](#). As new evidence emerges, recommendations may change. JCDHE and school districts are working closely together to monitor community and school conditions and make amendments if necessary.

JCDHE wants all schools to conduct in-person learning safely and recognizes that there are differences between the school districts and that decisions made on learning modes may differ. JCDHE will provide public health data and guidance. However, decisions on appropriate learning modes will continue to be made by school districts. School districts, working with parents, teachers, administrators, staff and other stakeholders, will choose the paths that best work for their districts.

School districts should understand that the risk of COVID-19 transmission increases along the continuum of virtual learning to hybrid and then to in-person learning. Athletics, because of excessive exhalation, close physical contact, and a lack of masks, present an increased risk of exposure to COVID-19. Similar risks exist with band and choir rehearsals/performances in when mitigation measures are not followed.

Decisions on the mode of learning must include considerations of the educational benefits of in-person learning for students, as well as the emotional, behavioral and mental health benefits of being in school. The concerns of teachers, administrators, staff, parents and the community about Covid-19 must also be taken into consideration.

Based on the level of transmission in the community, JCDHE will provide public health recommendations and guidance that will minimize the impacts of COVID-19 on our students, teachers and staff. In general, the risk of exposure is lower when community transmission is low. However, JCDHE recognizes that while measures of the level of transmission are very critical criteria, they are not the only measure that should be taken into consideration.

A measure that should be included is how well the school district is prepared to implement mitigation measures and reduce widespread transmission.

School districts must be diligent in implementing the recommended mitigation techniques in order to return students to school buildings. These measures must include steps to minimize introductions of infections into school buildings. JCDHE acknowledges that our school districts have worked very hard to put rigorous measures in place to support safe opening principles. JCDHE will continue to work with school districts to implement safety measures to prevent transmission and respond to infections to protect health.

Listed below are three key areas for our school districts to focus on. More information on specific steps to take is available on <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/schools.html>.

1. Prevent introduction of infections into schools. This is impacted by the level of community spread. Schools have several measures in place to address this concern:
 - a. Daily symptoms screening – staying home when sick even with minimal symptoms.
 - b. Physical distancing
 - c. Face masks
 - d. Hand hygiene
 - e. Increased ventilation

2. Reduce the risk of further transmission when infections are introduced in schools. Schools must have resources to work with JCDHE staff to conduct case investigations, isolate cases, and identify and quarantine students and staff. The schools have several measures in place that will help:
 - a. Limit room occupancy and physical distancing
 - b. Increase ventilation
 - c. Reduce singing and shouting indoors
 - d. Hold many activities in the outdoors
 - e. Teach students the proper ways to sneeze and cough into their elbows, especially as we enter this allergy and cold season.

3. Help prevent large outbreaks. This can be achieved by limiting secondary transmission to the fewest number of people. Testing and symptoms screening will help with early virus detection.
 - a. Cohort (keep individuals in small, stable groups) as much as possible. This is more feasible in elementary schools. Athletic teams and other extracurricular activities can put students in cohorts as well.
 - b. Symptom surveillance and diagnostic testing can help better define cohorts for quarantine measures.

Mitigation techniques work. Masking, physical distancing, hand washing and staying home when ill are effective. If properly adopted by students and staff, the risk of contracting COVID-19 in schools can be reduced. JCDHE and school districts are collaborating to conduct case investigations and contact trace when infected individuals expose others during the school day or during school-related activities. Isolating infected individuals and quarantining people who had high-risk exposures is a critical mitigation measure to contain the spread of COVID-19 in schools.

The differences in the recommended learning modes for elementary and middle/high school students are based on [existing evidence](#) showing that older students transmit COVID-19 like adults.

Here are some specific facts to keep in mind about transmission and risks in younger people:

1. Infection of SARS-CoV-2 (the virus that causes COVID-19) is very common among young people. Adults aged 18 – 25 years old represent the group with the largest increase in cases recently. Nationally, this group accounts for 25% of all infections.
2. In Johnson County, data at the end of September 2020 show that children 19 years or younger account for 17.5% of total infections.
3. Children are susceptible to SARS-CoV-2 infections. Although the risk of transmission and the rate of COVID-19 related hospitalizations appear to be lower, national data from the Centers for Disease Control and Prevention show that 1 out of 3 hospitalized children with COVID-19 are admitted to an ICU. Risk is not negligible.
4. Mortality rates are low in this age group.

1. Measures of Community Transmission and Recommended Learning Modes

		Green Lowest Risk	Yellow Medium Risk	Orange High Risk	Red Highest Risk
Gating Criteria¹	Incidence Rate (# new cases/100K over prior two weeks)	0-50	51 – 150	151-250	251 or more
	Percent Positive (% positive tests / individuals tested over prior two weeks)	≤5% positive	5.1-10% positive	10.1 – 15% positive	>15% positive
Recommended Learning Mode	Elementary School	In person following safe-opening principles ²	In person following safe-opening principles	In person following safe-opening principles	Remote only
	Middle/High School	In person following safe-opening principles	Hybrid ³	Remote or Hybrid ⁴	Remote Only

¹ Johnson County COVID-19 Dashboard

https://public.tableau.com/shared/W42WD7K94?:toolbar=n&:display_count=y&:origin=viz_share_link

² See Appendix A, *Safe Opening Principles*

³ Hybrid operations should limit number of people in the building/in all spaces to allow for stable (unchanging) groups and social distancing; reduce crowding of any kind with staggered arrival/dismissal/class rotations. Hours inside the building may be reduced and supplemented with remote learning.

⁴ Hybrid should only be considered if/when Modifying Variables can be implemented to manage risks. See *Section 2 Modifying Variables*

2. Modifying Variables

These are additional factors to consider as districts make decisions on the mode of reopening using the template above.

1. Extra and cocurricular activities - Having these activities further increases the risk of introduction of the COVID-19 virus into our school buildings.

JCDHE recognizes the desire to allow extracurricular activities in schools and that decisions have been made to allow these activities in most cases. High-risk athletics, because of excessive exhalation, close physical contact, and a lack of masks, presents an increased risk of exposure. Similar risks exist with band and choir rehearsals/performances when mitigation measures are not followed.

Therefore, if schools must allow these, they should ensure they take adequate safety precautions to minimize risks. The risk management steps include:

- Limit activities to those that accommodate masking and social distancing.
 - Cohorting to minimize the number of contacts. Groups should be stable with limited numbers.
 - Conducting regular preventive testing.
 - Limiting spectator attendance to immediate family members. Spectator/audience should be distanced by household groups; masked if indoors. Facilities should limit capacity to allow for 6' social distancing at ALL school-related events.
 - Routine monitoring of symptoms and immediate exclusion as appropriate.
 - React quickly when cases are suspected or identified. Ill students/staff should isolate; individuals or groups who experience high-risk exposures should quarantine.
2. Trend in cases (Trend in new cases per 100,000 persons over the last 14 days) – Trend can be decreasing, stable or increasing. This can provide more insight into the data and help understand the risk better within each category. For example, the decisions made when measures of community transmission indicate that the county is in “Orange” with the trend decreasing towards “Yellow” may be different from decisions made when it is “Orange” with cases increasing towards “Red”.
 3. Ability of schools to implement key mitigation measures – This is a very important measure of the ability of schools to manage risks related to COVID-19 in schools.
 - Consistent mask use among students, teachers, administrators and staff.
 - Consistently maintain social distancing.
 - Consistent commitment to good hand hygiene and respiratory etiquette.

- Regular cleaning and disinfection.
- Capacity to work in collaboration with JCDHE to conduct case investigations and contact tracing.
- Capacity to quickly notify and exclude individuals or groups who have been identified as contacts to positive cases. These individuals/groups should quarantine. They should be excluded from in-person learning or activities while in quarantine.

Schools districts should determine this qualitatively – High, Medium and Low. When the ability in this measure is Low, the district should be very cautious with the mode of opening.

4. Public Health Capacity (% of total cases contacted within 24 hours over past two weeks)
This is a measure of JCDHE’s ability to assist school districts to conduct case investigations and mitigation activities. The demand on public health resources is higher when community spread is high. JCDHE will provide indications of this on the “Gating Criteria” tab of the coronavirus dashboard (www.jocogov.org/coronavirus).

Appendix A

Safe Reopening Principles

All district plans should keep the following safe reopening principles in mind:

- Plans should be in place for high-risk individuals to work/learn.
- Plans developed and adequate resources deployed to keep children and staff who have been exposed or are ill out of the building.
- Develop options for remote learning, should the situation require limiting in-person activities.
- Promote healthy hygiene practices, including frequent hand washing, covering coughs and sneezes with an elbow, and staying home when sick.
- Intensify cleaning and disinfection practices. Frequently touched surfaces should be disinfected often.
- As much as possible, student groups should remain the same and not intermingle. As much as possible, the same adult should remain with static student groups.
- A six-foot distance between people should be maintained as much as possible. If six feet cannot be achieved, a three-foot distance should be maintained. Distancing is particularly important when people will be in proximity of one another for a period of more than 10 minutes, when mixing between static groups, and/or when they are

participating in activities that may result in respiratory droplets traveling further than normal (e.g., singing, exercising).

- Barrier masks/facial coverings are required, per Governor Kelly's [Executive Order 20-59](#).
- Limit sharing of materials and supplies. When items are shared, they should be disinfected after use and all involved should practice good hand hygiene.
- Limit non-essential outside visitors.
- Maintain healthy operations. Each building team should establish protocols for the management of staff and/or students exhibiting COVID-like symptoms, including identifying isolation areas/supervision.
- Appropriate PPE should be supplied and worn when health/medical procedures or care standards necessitate it (cloth barrier masks/facial coverings are not considered PPE).

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