



Guidelines for Elementary Schools

(Pre-K through Grade 5)

During the COVID-19
Pandemic
9/9/2020



Reopening Framework

A safe return to school is essential for Philadelphia kids to continue to learn and thrive. Keeping students and staff safe during COVID-19 is the utmost priority. The following guidelines for middle and high schools during the green phase will help decrease the risk for COVID-19. Find COVID-19 [guidance for childcare centers](#) and [middle and high schools](#) at phila.gov/reopen.

The guidance provides a baseline or minimum recommendations based on guidelines from the Philadelphia Department of Public Health (PDPH), the CDC, and the Pennsylvania Department of Education.

The detailed guidance is categorized by the following key practices:

1. Promote social distancing through physical distancing, modifying activities, and cohorting of students.
2. Keep school clean through intensified cleaning and disinfecting practices.
3. Promote healthy habits, including hand hygiene and mask use by students, teachers, and staff.
4. Screen students, teachers, and staff for symptoms daily
5. Plan for when a student, teacher, or staff member becomes sick.
6. Optimizing ventilation when possible

As COVID-19 in Philadelphia evolves, there may be additional changes to the guidance, so please connect to the COVID-19 texts (text COVIDPHL to 888- 777) to have the most up-to-date information.

Promote Social Distancing

Alter procedures and schedules to minimize contact among students and staff.

- It will be challenging to prevent young students from coming in close contact with one another. For younger students, the goals are: 1) physically distance as much as possible (goal: more than six

feet between individuals), and 2) reduce the number of people in close contact with one another in order to lower the risk of transmission.

- Schools should have as few individuals in a classroom as possible. When feasible, the maximum number of individuals (students plus teachers and staff) allowed in the same classroom is 25.
- Create and adhere to a "class cohort"—the same students stay in the same classroom throughout the day with the same primary teacher. Specialty and subject-matter teachers (e.g., music, art) should rotate between classrooms instead of students rotating.
- Consider using larger alternative spaces (ex: gymnasiums, auditoriums, cafeterias) to accommodate classes when class size cannot be reduced. These spaces may also be used to accommodate more than one cohort. When more than one cohort shares one of these larger alternative spaces, use partitions or other physical reminders to maintain separation. In these larger spaces, the number of individuals should not exceed 25% of the room's maximum occupancy.
- Consider using plexiglass or clear "sneeze guards" that sit atop the desk to contain respiratory droplets. Plexiglass barriers should be placed on the front and sides of the desk and extend higher than the height of the student. Schools should prioritize plexiglass barriers for classrooms with students who are unable to wear a facemask, such as those medically or developmentally unable to tolerate facemasks. Plexiglass barriers should also be prioritized for classrooms without sufficient space for desks to be 6 feet apart. If all desks have plexiglass barriers on the front and sides that extend higher than the height of students, desks may be spaced closer than 6 feet apart but no more than 3 feet apart. Plexiglass barriers should also be cleaned regularly, and individuals should practice hand hygiene after touching them.
- Teachers' desks should be at least six feet from the nearest student desk, and all student desks should face forward. Do not arrange desks in clusters.
- For group learning activities, such as circle time or story time, place markers six feet apart on the floor for children to sit on in order to promote social distancing.

- Consider alternative school schedules to achieve class size of fewer than 25 people and to avoid crowding in the school. For example, rotate days or blocks of time used for in-person education vs. distance learning, or adopt hybrid in-person and distance learning strategies. Prioritize in-person education for students with special education needs since distance learning may be more challenging for this population.

Modify recreational and extracurricular activities

- Maintain class cohorts for recreational and extracurricular activities. Avoid activities where students from different classrooms interact. For example, stagger use of playgrounds and do not combine classes for enrichment, recess, or extracurricular activities. Extracurricular and enrichment activities can take place within a classroom.
- Clean and disinfect playground and gym equipment between use by different classrooms.
- Cancel all field trips and excursions, including the use of public playgrounds.
- Do not allow any non-essential visitors into the building. Use video streaming to provide enrichment experiences from individuals or groups who are not members of the school community. Maintain electronic records of all visitors' contact information to help facilitate contact tracing.
- Suspend choir or singing in music classes/theater; limit instrumental lessons to percussion and strings to prevent COVID-19 spread through respiratory droplets.
- For gym or recess, avoid activities that involve close contact between students (e.g., games in which students hold hands, wrestling). Instead, focus on activities that can be done at a social distance (e.g., soccer drills, running, jump rope). Clean equipment used by multiple students before and after each class. Encourage students to clean hands before and after gym or recess.
- Please refer to PDPH's [guidance on gymnasiums](#) for indoor activities and on [sports for outdoor activities](#).

Minimize contact and crowding during arrival and dismissal times

- Set up hand hygiene stations at the entrance of the facility so that students and staff can clean their hands before they enter. If a sink with soap and water is not available, provide hand sanitizer with at least 60% alcohol at entrance.
- Require all parents to wear masks at pick-up and drop-off.
- Consider the following options to avoid overcrowding during arrival and dismissal times:
 - Assign staggered arrival and drop-off times for students by grade.
 - If staffing allows, have staff greet students outside as they arrive and escort them to their classrooms and escort students to exit during drop-off.
 - If conducting on-site daily health screens (see below), have students wait six feet apart (can use space marker) while waiting to complete the screen.
- For students who take a school bus, create social distance between children on school buses where possible (ex: one child per seat every other row, keep the row behind the bus driver empty). Encourage children to keep face covering on during transport to school by bus or other public transportation. Encourage students to clean their hands after departing from school bus or public transportation. Maintain electronic roster of children by bus route to help facilitate contact tracing.

Implement food safety procedures

- Students and staff should be encouraged to bring food and/or water bottles from home when possible. Water fountains should not be used; consider replacing with hydration stations/bottle-filling stations.
- Staff should wash their hands before preparing and distributing food.
- Buffet or family-style serving should not be used. Provide individually wrapped items or plate each student's meal so that multiple students are not using the same serving utensils.

- Students should wash hands with soap and water or alcohol-based hand sanitizer prior to and immediately after eating.
- Even if a cafeteria or group dining room is typically used, students should eat at their desks in their classrooms if possible. Otherwise, stagger the use of the cafeteria so that all students can maintain social distance and so that class cohorts eat together to avoid mixing of classes. If a cafeteria must be used, use seat markers to designate where students should sit. Minimize the number of students per table and discourage sharing of food.
- Sinks used for food preparation should not be used for any other purposes.
- Wipe off any playground equipment or indoor play space equipment between usage by different classrooms and at the end of the day.
- Facilities should use [cleaning products](#) that are EPA-approved for use against COVID-19. Store all cleaning products securely and out of the reach of children.

Encourage Healthy Habits

Promote hand hygiene

- Hand hygiene should be practiced at the following times:
 - Entry to the facility and to the classroom
 - Before and after breaks
 - Before and after eating
 - Before and after preparing food and drinks
 - Before and after medication administration
 - After using the toilet
 - After coughing, sneezing, or blowing nose
 - After playing outdoors
 - Before and after group activities
- Hand washing with soap and water for at least 20 seconds is the preferred method when hands are visibly dirty, after using the bathroom, and before and after eating.
- An alcohol-based hand sanitizer that contains at least 60% alcohol can be used for all other times.

Enforce mask use

- Require all staff to wear masks, except during meals. If using a disposable mask, staff should use a new mask each day. If wearing a cloth face covering, they should be laundered every day.

For staff

- Stagger break and lunch hours for staff in order to minimize interactions.
- Space chairs in break rooms more than six feet apart and position chairs so that employees do not sit opposite or next to each other while eating.
- Post signs alerting employees to maintain distance and avoid eating near or across from each other.
- Remind staff that they should continue to wear their masks while in the break room when not actively eating.

Keep School Clean

- Clean and disinfect frequently touched surfaces within the school and school buses at least twice daily (mid-day and end of the day). This includes tables, desk tops, chairs, doorknobs/handles, light switches, remote controls, countertops, handles, desks, phones, keyboards, toilets, faucets, and sinks.
- When possible, remove items that cannot be frequently cleaned (ex: rugs, curtains, stuffed animals).
- When possible, dedicate objects that would typically be shared (e.g., toys, games, art supplies, sporting equipment) for a single student's use. When objects must be shared, wipe between use.

- Students should wear masks. Masks are most important when indoors, especially when physical distancing is difficult. Mask wearing may be more challenging for younger students and enforcement of this policy should be developmentally appropriate. For students unable to tolerate a mask, a face shield is an acceptable alternative. Asthma is not a contraindication to wearing a facemask.
 - Masks should not be placed on:
 - Anyone who has trouble breathing or is unconscious
 - Anyone who is incapacitated or otherwise unable to remove the cloth face covering without assistance.
- For teachers and staff who work with multiple students who cannot wear facemasks, additional barriers such as plexiglass, faceshield, or goggles may be considered.
- Students may take "mask breaks" and remove their masks during mealtimes, when outdoors and greater than 6 feet apart from other students, and indoors if they are seated at their desks. Mask breaks should be brief (less than 15 minutes).
- Students should be encouraged to make sure their masks cover their nose and mouth at all times. Students should be taught to use the edges of the mask to adjust fit and avoid touching the front of the mask to prevent hand contamination.
- Students should be encouraged to put on a clean face covering or mask each day (either launder previously used mask or replace disposable mask).
- School should have supply of masks to give to students who arrive to school without a mask.
- Parents/caregivers should wear masks at arrival and dismissal times
- School bus drivers, playground monitors and other volunteer staff should wear masks
- Staff should wear gloves along with a mask when preparing food

Screen Students and Staff for Symptoms

All facilities should create a daily screening checklist for students and staff that includes screening for fever, symptoms, exposure, and a visual inspection. Parents and guardians should either complete the screener with the student or on their behalf. PDPH has developed a [sample screener template](#).

Schools should adopt one of the following screening protocol options:

1. **Self-screening:** Parents/Students and staff should be instructed to self-screen at home every day. If they answer yes to any of the screening questions, they should not report to the facility. Note: If community transmission of COVID-19 in Philadelphia increases, PDPH may direct facilities to switch to one of the two active symptom monitoring options below.
2. **Self-screening with reporting:** Parents/Students and staff should complete a daily screener (paper, app, or web). A designated staff member at the school should be responsible for reviewing completed screeners every day and ensuring that those with a positive screen do not enter the facility.
3. **On-site screening:** A designated staff person should administer the screener for all students and staff daily upon arrival to the facility. Those with a positive screen should not enter the facility. On-site assessment by school nurses may be particularly helpful for MDS classrooms.

Components of screener

- **Fever:** If a student or staff member has a temperature of 100.4 or higher, they should remain home. The following options can be considered for temperature monitoring:

1. **Self-screening:** Staff take their own and parents take their child's temperature at home; they stay home if they have a fever.
2. **Self-screening with reporting:** Staff take their own and parents take their child's temperature at home and report the value on the screening platform (paper, web, or app) or on-site during the daily screening. They will not be allowed in the facility if they have a fever.

3. On-site:

- Staff take their own temperature and parents take their child's temperature upon arrival to facility using facility-provided disposable thermometers (e.g., Tempa dot). OR
- A designated staff member wearing a mask and gloves can use a no-contact (temporal) thermometer to take temperatures of all staff and students. The no-contact thermometers should be cleaned with an alcohol wipe (or isopropyl alcohol on a cotton swab) between each person. The same wipe can be reused as long as it remains wet. The staff member can wear the same set of gloves as long as they did not have physical contact with the individual whose temperature they are taking.

Note: Oral thermometers should not be used for on-site temperature screening

- **Symptoms:** If a student or staff member has symptoms of COVID-like illness, the student or staff member should return or remain home.

NOTE: COVID-like illness is defined as:	
At least ONE of these symptoms	At least TWO of these symptoms
new or persistent cough	fever
shortness of breath	chills
new loss of sense of smell	muscle pain
new loss of sense of taste	headache
	sore throat
	nausea/vomiting
	diarrhea
	fatigue
	congestion/runny nose

- **Visual Inspection:** If a student has signs of illness, which could include flushed cheeks, rapid breathing or difficulty breathing (without recent physical activity), fatigue, or extreme fussiness, cough, or shortness of breath, the student should stay home.
- **Exposure:** If a staff member or student has been exposed to anyone with a confirmed case of COVID-19 in the past 14 days, they should return or remain home.

PDPH has developed a [sample letter](#) to be given to caregivers explaining why the child is being dismissed and criteria for returning to the facility.

Plan for When Someone Becomes Sick

- PDPH has created a [sample parent/guardian agreement](#) that describes their commitment to keeping their children home when sick and to seeking appropriate medical care.
- Schools should designate an isolation room or area for anyone who experiences COVID-like symptoms. If using the nurse's office, this area should be at least six feet apart from the area where other children or staff use the nurse's office. If possible, use screens or room curtains to create a barrier between individuals who are ill and others.
- Staff who develop symptoms of COVID-like illness should immediately be sent home. If they need to be picked up, they should wait in a designated isolation room or area while waiting.
- If students develop symptoms, they should be brought to a designated isolation room while waiting to be picked up. The staff member waiting with the child should wear a surgical mask.
- If a student or staff member has COVID-like illness:
 - They can return to school if:
 - » Initial COVID-19 testing is negative and individual meets the school's normal criteria for return after an illness OR
 - » A clinician has evaluated the child and documented an alternative diagnosis and confirmed that the student may return to school. OR
 - » COVID-19 testing was not done and all of the following are true:
 1. At least 10 days since the onset of symptoms AND
 2. fever free without fever-reducing medications for 24 hours
 3. Symptoms are improving.

Note: Repeat COVID testing is not required to return to the school.

- If a student or staff member has a confirmed diagnosis of COVID-19:
 - Immediately call PDPH at 215-685-5488 for further instructions.
 - All children and staff in the classroom or who have come in close contact with the case (greater than 10 minutes of interaction less than six feet away) should quarantine at home for 14 days. PDPH will assist in determining which individuals should quarantine. Anyone who develops symptoms during that time should contact their healthcare provider to request testing.
 - In accordance with [PDPH guidance](#), the COVID-positive individual should remain home until all of the following are true:
 1. At least 10 days since the onset of symptoms AND
 2. fever free without fever-reducing medications for 24 hours
 3. Symptoms are improving.

Note: The COVID-positive individual does NOT need a repeat COVID-19 test or a doctor's note in order to return to the school.

- Cleaning/Disinfecting after a COVID-19 case or case of COVID-like illness:
 - At end of day, thoroughly clean the entire classroom and other shared areas (e.g., bathroom, offices) used by the sick individual within two days of illness onset.
 - Clean and disinfect surfaces in your isolation room or area and in the classroom the sick child or staff member was in after the sick child or staff member has gone home.

Optimize Ventilation When Possible

Note: Increasing ventilation is an additional safety step and not a replacement for people wearing masks, keeping a safe distance from each other, reducing crowd sizes, installing droplet barriers, handwashing and other safety precautions.

If possible, increase ventilation in the building by either:

- Opening windows and/or doors on opposite sides of the building and using fans to blow outside air through the building; or
- Optimizing ventilation provided by the heating, ventilation, and air conditioning (HVAC) system by:
 - Having the HVAC system checked to assure that it is working properly. If it can be adjusted, the system should be set to provide at least 6 air exchanges per hour.
 - Maximizing the amount of outside air circulated by the system.
 - Installing filters with minimum efficiency reporting values (MERV) of 13, or the highest compatible with the filter rack.
 - Checking that the external air inlet duct is not blocked and that it is at least 15 feet from persons.

Encourage staff and parents to talk to their own and their children's physicians about their individual risk factors for COVID-19 and the risks of working at or attending school. We strongly recommend flexibility and accommodations for staff who are at [higher risk for severe illness](#) from COVID-19, such as those 65 years and older and those with weakened immune systems.

Ensure facility has updated contact information (including date of birth, phone number, home address, grade level, and cohort) for all staff and families to facilitate contact tracing and rapid communication.

If you believe there was a COVID-19 case at your school (student or staff), call the Philadelphia Department of Public Health at 215-685-5488 for further instructions. The Department will consult with you on management issues for your facility.