

## MITIGATION STRATEGIES FOR SAFE IN-PERSON LEARNING

These resources highlight information derived from the U.S. Centers for Disease Control and Prevention (CDC) guidance and the U.S. Department of Education's "COVID-19 Handbook, Volume 1: Strategies for Safely Reopening Elementary and Secondary Schools" released on February 12, 2021.

These documents summarize a variety of mitigation strategies and safe practices, including:

- COVID-19 Community Transmission Data, Physical Distancing, and Cohorting
- Masking Practices
- Physical Distancing Practices
- Cleaning and Disinfection
- Ventilation
- Good Hygienic Practices
- Contact Tracing, Isolation, and Quarantine
- Safety Considerations Related to Extracurriculars and Athletics

These resources are built to help our members implement the safest practices and mitigation strategies during in-person instruction in the coming months, ensuring our school communities are safe, just, and healthy places to learn.

**Together, we can advocate for the schools  
our students, educators, and communities deserve.**

# COVID-19 COMMUNITY TRANSMISSION DATA, PHYSICAL DISTANCING & COHORTING

## REVIEW LEVELS OF COMMUNITY TRANSMISSION.\*

Levels of community transmission can be determined by looking at the [CDC COVID-19 Data Tracker](#) for county-level data. As CDC states in guidance updated on March 19, 2021, the higher the level of community transmission, the more likely it is to have COVID-19 positive individuals in schools, which can lead to in-school transmission if prevention measures are not in place and enforced.

CDC also cautions that “[w]hen cases are introduced into the school environment, they can lead to clusters and potentially to rapid and uncontrollable spread,” and that this is more likely to occur in areas of substantial or high community transmission.

According to CDC, “Five key prevention strategies are essential to safe delivery of in-person instruction and help to prevent COVID-19 transmission in schools”: universal and correct use of masks; physical distancing; handwashing and respiratory hygiene; ventilation, cleaning, and maintaining healthy facilities; and contact tracing in combination with isolation and quarantine.

## RECOMMENDED DISTANCING AND COHORTING BASED ON COMMUNITY TRANSMISSION.\*

CDC developed recommendations based on the levels of community transmission.

	Low Transmission Blue	Moderate Transmission Yellow	Substantial Transmission Orange	High Transmission Red
<b>Indicators</b>				
<b>Total new cases per 100,000 persons in the past seven days</b>	0-9	10-49	50-49	≥100
<b>Percentage of nucleic acid amplification tests (NAATs) that are positive during the past seven days</b>	<5.0%	5.0-7.9%	8.0-9.9%	≥10.0%
<b>Recommendations</b>				
<b>Elementary Schools</b>	Physical Distancing: At least three feet between students in classrooms; six feet between students in common areas and when eating, singing, etc.; six feet between adults as well as between adults and students.		Physical Distancing: At least three feet between students in classrooms; six feet between students in common areas and when eating, singing, etc.; six feet between adults as well as between adults and students.  Cohorting recommended when possible.	
<b>Middle and High Schools</b>	Physical Distancing: At least three feet between students in classrooms; six feet between students in common areas and when eating, singing, etc.; six feet between adults as well as between adults and students.		Physical Distancing: At least three feet between students in classrooms; six feet between students in common areas and when eating, singing, etc.; six feet between adults as well as between adults and students.  Cohorting recommended when possible.	With cohorting, at least three feet between students in classrooms.  Without cohorting, at least six feet between students in classrooms.
<b>Extracurricular Activities and Athletic Programs</b>	Can occur with physical distancing of six feet or more to the greatest extent possible.*	Can only occur in person if physical distancing of six feet or more required.*	Can only occur if they can be held outdoors with physical distancing of six feet or more required.*	

Adapted from [cdc.gov/coronavirus/2019-ncov/community/schools-childcare/operation-strategy.html#indicators](https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/operation-strategy.html#indicators).

For more information, review the [CDC guidance](#) and [ED Handbook](#).

\*Based on CDC guidance and ED Handbook.

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## HOW TO CREATE SAFE, JUST & HEALTHY SCHOOLS

Ensuring our school communities are safe, just, and healthy places to learn not only protects us from the spread of COVID-19 but also helps us improve school conditions so that our students, educators, and staff—whether Black, brown, or white, Native or newcomer—can thrive. Together, we can advocate for the schools our students, educators, and communities deserve.

**Every student has the right to learn in a supportive environment.** To do so, policymakers must provide the necessary funding for resources—including supplies, building modifications, staffing, and access to COVID-19 testing as well as resources and training for virtual learning—and prioritize those communities that have been historically under-served and disenfranchised. The CDC's March 19 revisions to its guidance on distancing to allow for only three feet of distancing between students in classrooms, while continuing to require six feet elsewhere in school facilities, will be particularly challenging in under-resourced, crowded schools. It is crucial that we continue to advocate for equity and amplify the concerns of the student populations and communities that continue to be marginalized in decision-making around school opening.

**Our public schools help keep our communities connected even as they help stop the spread of COVID-19 by educating students at home.** Creating safe and healthy virtual and hybrid learning environments for our students takes all of us doing our part but also requires district and school leaders to implement plans that ensure all students have the resources they need to succeed, including regular check-ins, mental health services, meals, and technology.

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## NEA MEMBERS: ACT NOW

**Contact your state-elected officials and district leaders** and demand that your school receives the necessary funding and supplies to properly implement CDC mitigation strategies.

**Support strong public schools.** Visit the [NEA Education Votes website](#) and urge Congress to take action.

**Share this guidance** with your fellow educators and school leaders.

# MASKING PRACTICES

The U.S. Centers for Disease Control and Prevention (CDC) released guidance and the U.S. Department of Education issued a handbook on February 12, 2021, to help communities return to safe in-person learning in K-12 schools. This document highlights the CDC's key measures "essential to safe delivery of in-person instruction," one of which is masking practices.



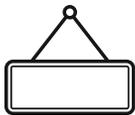
## MASKS MUST BE REQUIRED.\*

The universal and correct use of masks must be required for educators, students, and staff, with exceptions for children under the age of 2 and individuals with intellectual disabilities, emotional or orthopedic impairments, or traumatic brain injury as well as those who support these individuals. Masks should be tightly woven fabrics with two or three layers and should not have exhalation valves or vents. The use of masks with clear panels may be beneficial for those who are deaf or hard of hearing, emerging readers, students with speech disabilities, and English learners. Wearing a face shield without a mask is not recommended.



## ENSURE THAT MORE-PROTECTIVE RESPIRATORS ARE USED WHEN NECESSARY.

The universal use of masks does not refer to masks that are considered personal protective equipment (PPE) such as N95 respirators. PPE may be appropriate for individuals, such as school nurses, who require a higher level of protection. For additional information, see the [CDC's guidance on N95 masks for health care settings](#).



## MAKE THE GUIDANCE CLEAR.\*

Post signs in classrooms and throughout the school with simple instructions.

- Wash or sanitize hands before putting on a mask and after taking one off.
- Do not touch your mask while wearing it.
- Wear your mask over both your nose and mouth.
- Do not wear a mask when it is wet.
- Do not share or swap masks, and be sure to label your mask.
- Wash reusable masks daily.
- Place used disposable masks in [indicate location of receptacle].



## ESTABLISH PROTOCOLS FOR MASK REMOVAL.\*

Provide clear guidance for when and where masks can be removed and stored. For example, masks can be stored in a container or plastic bag during mealtime or "sensory breaks."

For more information, review the [CDC guidance](#) and [ED Handbook](#).

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**Creating safe and healthy schools takes all of us doing our part** but also requires that school leaders have processes in place to ensure every student has access to the correct type of mask.

**Every student deserves a quality education with well-prepared teachers who meet mistakes with patience.** School leaders and educators must have school policies around masking practices that keep restorative justice in the forefront and work to address individual issues in ways that do not add harm to a student's opportunity to learn and thrive.

**Ensuring successful masking practices at schools takes students, educators, staff, and families working together.** School leaders must provide essential information about policies and resources clearly and in multiple formats and languages so that the entire school community can support its collective health and well-being. This includes all [school protocols and signage](#).

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## NEA MEMBERS: ACT NOW

**Coordinate with your local association** to ensure collective bargaining agreements (CBAs) are followed or revisions are negotiated, as needed, to address masks, masking policies, and masking practices.

If you are not covered by a CBA, **seek opportunities to work with school administrators** to ensure steps outlined here are adopted. In either case, make sure that educators are included in the development, implementation, and review of COVID-19 responses.

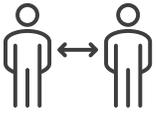
**Contact your state-elected officials and district leaders** and demand that they ensure your school receives the necessary funding for health and safety materials.

**Request local policies** to enforce mask-wearing in your community to prevent community spread from impacting schools.

**Share this guidance** with your fellow educators and school leaders.

# PHYSICAL DISTANCING PRACTICES

The U.S. Centers for Disease Control and Prevention (CDC) released guidance and the U.S. Department of Education issued a handbook on February 12, 2021, to help communities return to safe in-person learning in K-12 schools. This document highlights the CDC's key measures "essential to safe delivery of in-person instruction," one of which is physical distancing practices. CDC made significant updates to its guidance on distancing on March 19, 2021.



## KEEP AT LEAST THREE OR SIX FEET OF DISTANCE, DEPENDING ON CONTEXT AND LOCATION IN SCHOOL FACILITIES.\*

Updated CDC guidance continues to call for at least six feet of distance between adults as well as between adults and students at all times in school buildings. Similarly, CDC says at least six feet should be maintained while masks cannot be worn (for example, when eating), during activities that cause heavier breathing (for example, when singing or exercising), and in common areas, such as hallways and auditoriums.

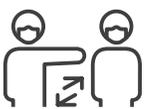
However, CDC now advises that only three feet of distance is necessary between students in many classroom settings. Elementary school students should keep at least three feet apart in classrooms, as should middle school and high school students in classrooms in areas of low, moderate, or substantial community transmission. Where transmission is high, middle and high school students should keep at least six feet apart if cohorting is not possible.



## ENSURE APPROPRIATE PHYSICAL DISTANCE OF AT LEAST THREE FEET BETWEEN STUDENTS IN CLASSROOMS.\*

Schools should employ strategies to maintain physical distance between classroom occupants—at least three feet between students and six feet between adults as well as between adults and students.

- Consider using larger spaces—such as cafeterias, auditoriums, outdoor space, convention centers, and recreation centers—for instruction.
- Arrange student seating to maximize distance, and mark floors indicating where desks and chairs should be placed.
- Create a seating chart and maintain the same assigned seats throughout the day.
- Remove nonessential furniture from classrooms, and separate students through other means, like partitions between desks.
- Modify learning stations and activities to limit the number of students in each group.
- Minimize the use of shared instructional materials, and clean materials after each use.
- Implement procedures that minimize student movement while in the classroom.
- Consider using cohorts to limit exposure; group students into cohorts by grade level or class to stay together all day.



## MAINTAIN PHYSICAL DISTANCE OF AT LEAST SIX FEET OUTSIDE CLASSROOMS.\*

Working with educators, school leaders should establish protocols to maintain physical distance of at least six feet when students and adults are outside the classroom.

- Stagger the use of communal spaces, including hallways, cafeterias, playgrounds, and restrooms. Provide physical guides, such as floor markings and wall signs, to assist with traffic and maintaining physical distance.
- Consider flexible options to serve meals, such as grab-and-go.
- Place plexiglass barriers where physical distancing is harder to maintain.

- Continue the use of virtual interactions for non-instructional events, such as meetings, professional development, etc.
- Implement distancing strategies on school buses.

For more information, review the [CDC guidance](#) and [ED Handbook](#).

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**Ensuring successful physical distancing practices at schools takes all of us—students, educators, staff, and families—working together.** School leaders must provide essential information about policies and resources clearly and in multiple formats and languages so that the entire school community can support its collective health and well-being. This includes all [school protocols and signage](#).

**By joining together, parents and educators can make every public school a place where all children can learn and thrive,** but district and school leaders must ensure necessary changes are made to the physical environment and each student’s social, emotional, and cognitive level of development considered when establishing physical distancing protocols and policies. For techniques to help students adjust to changes in routine, check out [resources from the National Center for Learning Disabilities](#).

**Every student has the right to learn in a supportive environment.** To ensure those students with disabilities who are unable to comply with physical distancing guidelines have the opportunity to learn, schools must continue to provide services consistent with a student’s individual education program (IEP) or 504 plan, as appropriate.

## NEA MEMBERS: ACT NOW

**Contact your state-elected officials and district leaders** and demand that your school receives the necessary funding for resources to facilitate physical distancing as well as make structural and operational changes to allow for distancing.

**Discuss appropriate enforcement strategies with school leaders,** ensuring practices do not disproportionately punish students in under-resourced communities, heighten the loss of opportunity to learn, and perpetuate the school-to-prison pipeline.

**Request local policies** to enforce physical distancing in the community to prevent community spread from impacting schools. CDC advises that safe in-person learning should be prioritized over nonessential businesses and gatherings within a community.

**Share this guidance** with your fellow educators and school leaders.

# CLEANING & DISINFECTION

The U.S. Centers for Disease Control and Prevention (CDC) released guidance and the U.S. Department of Education (ED) issued a handbook on February 12, 2021, to help communities return to safe in-person learning in K-12 schools. This document highlights the CDC's key measures "essential to safe delivery of in-person instruction," which includes cleaning.



## ESTABLISH A CLEANING AND DISINFECTION PLAN.\*

CDC and the U.S. Environmental Protection Agency (EPA) state that schools should do the following: "Develop your plan. Implement your plan. Maintain and revise your plan." The National Education Association's document, [Cleaning and Disinfecting in the COVID-19 Era](#), describes what issues should be addressed in any plan.

- **Product selection:** The criteria used to determine which products will be used for which applications.
- **Practices and processes:** Approaches to cleaning and disinfecting high-touch points and high-risk areas—like nurses' offices—and the proper use, dilution, and storage of products, including minimizing exposure to airborne chemicals.
- **Ventilation:** The specific requirements for storing, mixing, and using chemicals.
- **Availability of hazard information:** Identification of the warnings, limitations on use, and safety requirements for the chemicals being used, including access to Safety Data Sheets (SDS).
- **Personal protective equipment:** Needs, uses, training, and fit of equipment to keep staff safe.
- **Factors specific to the population and purpose of rooms and areas:** Guidance on what to do if surfaces are hard or soft, are used for eating or preparing food, or must be treated in between classes.
- **Health concerns for specific populations:** Considerations for students and educators who, for example, have asthma, which can be triggered by disinfectants and perfumed cleaners; use of products that are independently certified to contain fewer harmful chemicals, like those certified by [Cradle to Cradle](#) (silver or gold levels), [Green Seal](#), or [Safer Choice](#) (an EPA logo).

You can also check out CDC's [Guidance for Cleaning and Disinfecting Public Spaces, Workplaces, Businesses, Schools, and Homes](#).



## UNDERSTAND WHEN TO CLEAN AND WHEN TO DISINFECT.\*

CDC recommends specific protocols for disinfecting spaces that have been occupied by someone who is sick or has a COVID-19 diagnosis. Any space used by an infected person should be closed off and should not be used until it has been cleaned and disinfected. A 24-hour waiting period (or as long as possible if 24 hours is not feasible) should take place prior to cleaning.

For routine cleaning, too many schools rely on harsh disinfectants when common cleaners would be sufficient. CDC and the EPA state: "Most surfaces and objects will just need normal routine cleaning. Frequent disinfection of surfaces and objects touched by multiple people is important." This includes playground equipment, door handles, sink handles, toilets, inside school buses, and drinking fountains. When choosing a disinfectant, use the EPA's [List N: Disinfectants for Coronavirus \(COVID-19\)](#), but make sure to use less harsh chemicals and approaches when possible.

For more information, review the [CDC guidance and ED Handbook](#).

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**Our students, families, and neighborhoods are stronger, safer, and healthier when we come together to overcome shared challenges and develop collective solutions**, but we need policymakers to address the fact that many schools lacked the necessary resources for appropriate cleaning and disinfection even before the pandemic. They must distribute resources to meet the specific needs of each school—a need that will be great in disenfranchised communities—so that our communities are strong and our schools have the resources they need to play their full role in the lives of our children and our communities.

**By pulling together to demand safe, fully resourced schools, we can prevent unnecessary illness and save countless lives.** To accomplish this goal, school leaders must create and implement cleaning and disinfection plans and processes that prioritize the health and safety of the entire school community. If not done safely, disinfecting in schools can make respiratory conditions, such as asthma, worse.

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## NEA MEMBERS: ACT NOW

**Coordinate with your local association** to ensure collective bargaining agreements (CBAs) are followed or revisions are negotiated, as needed, to address cleaning and disinfecting practices, including access to cleaning and disinfecting plans, training, protective equipment, product information, and emergency procedures.

If you are not covered by a CBA, **seek opportunities to work with school administrators** to ensure steps outlined here are adopted. In either case, make sure that educators are included in the development, implementation, and review of COVID-19 responses.

**Contact your state-elected officials and district leaders** and demand that your school receives the necessary funding for health and safety materials and training. CDC advises that schools must have necessary supplies and training as part of this key mitigation strategy.

**Share this guidance** with your fellow educators and school leaders.

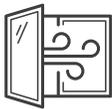
## VENTILATION

The U.S. Centers for Disease Control and Prevention (CDC) released guidance and the U.S. Department of Education (ED) issued a handbook on February 12, 2021, to help communities return to safe in-person learning in K-12 schools. This document highlights the CDC's key measures "essential to safe delivery of in-person instruction," which includes improving ventilation as part of maintaining healthy facilities.



### ESTABLISH A VENTILATION PLAN.\*

The ED Handbook calls for "conducting assessments or audits of existing ventilation systems" and "developing a ventilation improvement plan." Schools and school districts must establish plans, but educators also can play an important role in developing, monitoring, and adjusting plans—and in making sure needed ventilation improvements take place.



### CHECK EXISTING CDC TOOLS FOR IMPROVING VENTILATION.\*

[CDC tools for improving ventilation in schools](#) draw on the expertise of indoor air quality experts outside CDC. The National Education Association (NEA) has compiled many of the recommendations from CDC and other groups in its own report, [Designing and Implementing a COVID-19 Indoor Air Quality Plan in Schools](#), which include:

- Bringing more outside air into indoor spaces;
- Improving air filtration;
- Using portable high-efficiency particulate air (HEPA) fan/filtration systems to help enhance air cleaning; and
- Using fans in a safe manner to draw in fresh air from open windows and doors.



### OPTIMIZE VENTILATION FOR THE SPACE BEING USED.

Different indoor spaces may require different types of ventilation. High-risk areas—for example, nurses' offices and isolation rooms—need special set-ups, like venting air directly outside. The ED Handbook also calls for optimizing ventilation when music and performing arts classes are held indoors.

For more information, review the [CDC guidance](#) and [ED Handbook](#).

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**Creating healthy learning environments for the entire school community takes all of us doing our part** but also requires policymakers to provide funding for necessary repairs—regardless of cost—to improve ventilation systems and the air breathed by students, educators, and staff.

\*Based on CDC guidance and ED Handbook.

**Good ventilation in schools plays a key role in the health and well-being of students, educators, and staff.** To ensure all schools have optimal ventilation, policymakers must address how race and other social factors can play into exacerbating indoor air quality problems in schools and prioritize improvements for those disenfranchised districts in greatest need.

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## NEA MEMBERS: ACT NOW

**Coordinate with your local association** to ensure collective bargaining agreements (CBAs) are followed or revisions are negotiated, as needed, to address timely ventilation improvements, including walk-throughs, reviews of plans, and monitoring of ventilation upgrades and ongoing functioning.

If you are not covered by a CBA, **seek opportunities to work with school administrators** to ensure steps outlined here are adopted. In either case, make sure that educators are included in the development, implementation, and review of COVID-19 responses.

**Contact your state-elected officials and district leaders** and demand that your school receives the necessary funding for health and safety materials.

**Share this guidance** with your fellow educators and school leaders.

# GOOD HYGIENIC PRACTICES

The U.S. Centers for Disease Control and Prevention (CDC) released guidance and the U.S. Department of Education (ED) issued a handbook on February 12, 2021, to help communities return to safe in-person learning in K-12 schools. This document highlights the CDC's key measures "essential to safe delivery of in-person instruction," one of which is good handwashing and respiratory hygiene practices.



## THE IMPORTANCE OF GOOD HAND HYGIENE.\*

The ED Handbook is clear: "Good hand hygiene—regular handwashing with soap and water for at least 20 seconds or using an alcohol-based hand sanitizer with at least 60 percent alcohol if soap and water are not readily available—reduces the spread of germs that can cause illness, especially if done at key times throughout the day." CDC provides [additional guidance](#) on when and how to wash hands.



## THE CORE PRINCIPLES FOR HYGIENIC PRACTICES.\*

CDC identifies teaching students about hygienic practices and providing adequate supplies as the core principles of hygienic practices. In CDC's own words, here is how the guidance breaks it down.

- Teach and reinforce handwashing with soap and water for at least 20 seconds and increase monitoring to ensure adherence among students, teachers, and staff. Schools can explore options for curricular integration, such as in health and science lessons.
- Encourage students and staff to cover coughs and sneezes with a tissue when not wearing a mask and immediately wash their hands after blowing their nose, coughing, or sneezing.
- Provide assistance with handwashing and respiratory etiquette behaviors for students with disabilities who are in need.
- Support healthy hygiene behaviors by providing adequate supplies, including soap, a way to dry hands, tissues, face masks (as feasible), and no-touch/foot-pedal trash cans. If soap and water are not readily available, schools can provide alcohol-based hand sanitizer that contains at least 60 percent alcohol (for staff and older children who can safely use hand sanitizer).

For more information, review the [CDC guidance](#) and [ED Handbook](#).

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**Ensuring good hygiene practices at schools takes all of us—students, educators, staff, and families—working together.** School leaders must provide essential information about policies and resources clearly and in multiple formats and languages so that the entire school community can support its collective health and well-being. This includes all [school protocols and signage](#).

\*Based on CDC guidance and ED Handbook.

**By coming together to demand safe, fully resourced schools, we can prevent unnecessary illness and save countless lives.** Policymakers must ensure all students—regardless of race or place—are provided the supplies needed, as indicated by CDC, to achieve healthy and safe learning conditions that do not hinder COVID-19 responses.

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## NEA MEMBERS: ACT NOW

**Coordinate with your local association** to ensure collective bargaining agreements (CBAs) are followed or revisions are negotiated, as needed, to address responsibilities, protocols, student education, and supplies.

If you are not covered by a CBA, **seek opportunities to work with school administrators** to ensure steps outlined here are adopted. In either case, make sure that educators are included in the development, implementation, and review of COVID-19 responses.

**Contact your state-elected officials and district leaders** and demand that your school receives the necessary funding for health and safety materials, supplies, and training.

**Share this guidance** with your fellow educators and school leaders.

# CONTACT TRACING, ISOLATION & QUARANTINE

The U.S. Centers for Disease Control and Prevention (CDC) released guidance and the U.S. Department of Education (ED) issued a handbook on February 12, 2021, to help communities return to safe in-person learning in K-12 schools. This document highlights the CDC's key measures "essential to safe delivery of in-person instruction," which includes "contact tracing, in combination with isolation and quarantine, in collaboration with the health department."



## IDENTIFY AND ISOLATE COVID-19 CASES AND NOTIFY CONTACTS.\*

The CDC guidance states that all schools should encourage students and staff with symptoms of COVID-19 (temperature of 100.4 or more, sore throat, cough, difficulty breathing, diarrhea or vomiting, new severe headache, or new loss of taste or smell) to stay home and refer them for diagnostic testing. Close contacts—anyone who was within six feet of an infected person for a total of at least 15 minutes within a 24-hour period, even if masks were worn—should also stay home and get tested. Those with positive tests should [isolate](#), and close contacts should quarantine by following CDC-recommended [quarantine](#) protocols.

CDC advises that schools should collaborate with local health departments and, to the extent allowed by privacy laws, confidentially report student and staff infections and notify those who may have been exposed to an infected person. In addition to identifying close contacts, schools should consider notifying and extending testing referrals to others who may have had contact, such as individuals who shared a classroom or bus but were always more than six feet away as well as students and staff who share a hallway.



## FACILITATE CONTACT TRACING.\*

Both CDC and ED recommend close collaboration between schools and local public health officials to support contact tracing to identify close contacts who should then be referred for diagnostic testing and required to quarantine. The ED Handbook notes that practices such as cohorting and assigning students to the same bus seat every day can help facilitate contact tracing since these practices make it easier to identify which students were in close contact with an infected person.



## ALLOW FLEXIBLE LEAVE FOR STAFF WHO ARE SICK OR HAVE BEEN EXPOSED.\*

CDC notes that schools should have flexible sick leave policies and practices and encourages policies that allow staff who are sick or who have been exposed to COVID-19 to stay home and away from coworkers and students without punishment. Such policies should also account for employees who need to take care of sick family members and children whose schools or daycares are closed or who live with high-risk family members.



## SCREENING TESTING TO REDUCE THE SILENT SPREAD OF COVID-19.\*

CDC recommends that schools consider [voluntary screening testing](#) of students and staff without symptoms in order to identify cases and prevent secondary transmission in schools. The CDC guidance provides detailed advice on how schools may utilize screening testing, either on school premises or in collaboration with a community service or health department. According to CDC, the ability of schools to provide safe in-person education, particularly in middle and high schools, when COVID-19 transmission is high may depend on whether screening testing is taking place.

For more information, review the [CDC guidance](#) and [ED Handbook](#).

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**Every child—regardless of race or place—deserves a safe and welcoming school where they can thrive.** But for too long, certain politicians have deprived public schools the resources they need to reach and teach every child, as they've denied our families tests and treatment during the pandemic. Policymakers must prioritize communities that have been hit the hardest by the pandemic and provide resources for screening testing, diagnostic testing, and medical care.

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### NEA MEMBERS: ACT NOW

**Coordinate with your local association** to ensure collective bargaining agreements (CBAs) are followed or revisions are negotiated, as needed, to address how COVID-19 cases will be identified and contact tracing facilitated, including notice to staff and parents/guardians, isolation and quarantine protocols, privacy protections, and leave policies for illness and quarantine.

If you are not covered by a CBA, **seek opportunities to work with school administrators** to ensure steps outlined here are adopted. In either case, make sure that educators are included in the development, implementation, and review of COVID-19 responses.

**Reach out to policymakers** and demand that health departments have the necessary resources to conduct effective contact tracing.

**Contact your state-elected officials and district leaders** and demand that they ensure your school receives the necessary funding for health and safety materials.

**Share this guidance** with your fellow educators and school leaders.

# EXTRACURRICULAR ACTIVITIES & ATHLETIC PROGRAMS

The U.S. Centers for Disease Control and Prevention (CDC) and U.S. Department of Education (ED) have released guidance to help communities return to safe in-person learning in K-12 schools. One of the important topics they cover is how to safely offer extracurricular and athletic programs.



## **PRIORITIZE IN-PERSON LEARNING OVER EXTRACURRICULAR AND ATHLETIC ACTIVITIES.\***

Schools should prioritize in-person learning over extracurricular activities and athletics programs, keeping with CDC recommendations for safe levels of interaction depending on community transmission of COVID-19. Schools should continue to offer music, performing arts, physical education, health education, and athletics programs as part of a well-rounded education, even if some activities must be offered virtually.



## **TAKE PRECAUTIONS, INCLUDING MASKS, FOR MUSIC AND PERFORMING ARTS.\***

Generally, CDC indicates that wearing masks must be required for students, visitors, and educators in all job categories. The ED Handbook provides multiple practical solutions for music and performing arts, including instrument-specific strategies, optimizing ventilation, using transparent shields, and using portable amplifiers to keep voices low. Schools should consider holding music and performance classes outdoors, when safe to do so. When transmission rates are moderate or substantial, masks should be required, and, when high, extracurriculars should be virtual only.



## **PRIORITIZE SPORTS THAT POSE THE FEWEST RISKS IN COMMUNITIES WITH LOW TRANSMISSION RATES.\***

The CDC guidance suggests that “schools conduct sports activities in ways that reduce the risk of transmission of COVID-19 to players, families, coaches, and communities, which may include considering which sports can be safely played, prioritizing outdoor sports or sports that involve the least physical contact, and mask wearing.” Additionally, schools should limit cross-school transfers, provide prepackaged snacks, and eliminate locker room use. When transmission rates are moderate or substantial, masks should be required, and, when high, sports should be virtual only.

For more information, review the [CDC guidance](#) and [ED Handbook](#).

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## HOW TO CREATE SAFE, JUST & HEALTHY SCHOOLS

Ensuring our school communities are safe, just, and healthy places to learn not only protects us from the spread of COVID-19 but also helps us improve school conditions so that our students, educators, and staff—whether Black, brown, or white, Native or newcomer—can thrive. Together, we can advocate for the schools our students, educators, and communities deserve.

**Creating safe, healthy, and welcoming schools takes all of us doing our part** but also requires school and district leaders to have processes in place to ensure every student has access to the correct type of mask.

**Extracurricular activities and athletic programs play an important role in the school community and student experience.** To ensure all families—including those who lack access to broadband and technology—receive important safety updates, school and district leaders must implement effective cancellation- and change-notification systems that provide information in appropriate languages and formats that everyone in the school community can understand.

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## NEA MEMBERS: ACT NOW

**Coordinate with your local association** to ensure collective bargaining agreements (CBAs) are followed or revisions are negotiated, as needed, to address safety considerations regarding extracurricular activities and athletics programs.

If you are not covered by a CBA, **seek opportunities to work with school administrators** to ensure steps outlined here are adopted. In either case, make sure that educators are included in the development, implementation, and review of COVID-19 responses.

**Contact your state-elected officials and district leaders** and demand that your school receives the necessary funding for proper supplies to participate safely in extracurricular and athletic activities.

**Continue to provide information and support to the most vulnerable communities** as it relates to safety.

**Share this guidance** with your fellow educators and school leaders.