Overview

This document is intended to provide guidance for the reopening of schools (Kindergarten through 12th grade). Reopening and maintaining safe schools after a closure requires a number of considerations, including the local epidemiology of COVID-19, the availability of local testing and contact tracing, and the feasibility of the implementation of mitigation strategies. Various controls will need to be employed to limit the spread of COVID-19, including physical distancing and decreased classroom density, cloth or disposable face coverings, and increased disinfection and ventilation. SARS-CoV-2, the virus that causes COVID-19, is thought to be spread primarily through aerosolized respiratory droplets at close range. Airborne transmission from exposure to very small droplets over long distances is unlikely. However, there is evidence that this mode of transmission is possible, particularly in crowded, indoor spaces. People may also become infected by touching contaminated surfaces. The virus has been shown to survive in aerosols for hours and on surfaces for days. Infection can occur through eyes, nose, and mouth exposures. There is also strong evidence that people can spread the virus while pre-symptomatic or asymptomatic.

With local restrictions being lifted and many returning to work, students, their families, teachers, employees, and administrators will likely have many questions that include, but are not limited to:

- How can we protect the health and safety of the students, faculty, and employees returning to school?
- What do we do if a student, faculty member, or employee tests positive for or is suspected to have developed COVID-19?
- What do we do if a student, faculty member, or employee comes in contact with a person who has tested positive or has a suspected case of COVID-19?
- How do we assure all stakeholders that we are doing all we can to prevent the spread of disease?

The purpose of this guidance is to provide clear and actionable steps towards the safe operations of schools through prevention, early detection, and control of COVID-19. It is imperative that schools consistently monitor and evaluate the effectiveness of the implemented mitigation strategies and alter their approach as needed.

The following document addresses aspects of schools (K-12) which have not been previously evaluated in other AIHA Guidance documents. Please refer to the Resources section below for links to AIHA Guidance documents concerning other areas of campus life, including: libraries, offices, childcare facilities, restaurants/dining halls, retail, ride sharing, small and medium sports and entertainment venues, places of worship and religious gatherings, gyms and workout facilities, and construction work that may take place on campus.

What actions should School Leadership take to protect students, faculty, and employees?

School leadership should continually monitor global (World Health Organization [WHO]), federal (Centers for Disease Control [CDC] and Occupational Safety and Health Administration [OSHA]), state, and local guidelines for changes in recommendations, disinfection strategies, worker protections and other best management practices. They should seek guidance from regional, national, and international leaders regarding health policies and best practices. They should consider forming a knowledgeable team to monitor, assess, and implement new strategies as they become available. In addition, schools should consider the following strategies for reducing the risk of COVID-19 transmission in regard to physical distancing strategies, enhanced cleaning...
and disinfecting practices, restrooms, employee and student wellness, training, and risk communication.

Due to the variety of schools (e.g., geographic location, size, physical layout, and structure), it may not be possible to implement all of the following recommendations; however, schools are encouraged to work with state and local health officials on whether and how to implement these considerations, and make the necessary adjustments to meet the specific needs of the school, and the local community.

**Physical Distancing Strategies**

- Mark 6-foot increments on the ground outdoors at the entrance to the school so students, faculty, and employees can maintain appropriate distancing when entering.
- To the extent possible, classes should include the same group of students and teacher(s) each day: each group has its own room and own teacher, and the students only interact with their classmates in their assigned group. For specialized middle and high school classes, consider offering these virtually to limit mixing of student cohorts.
- Individual desks (rather than communal tables) should be used whenever possible. Desks should be spaced at least 6 feet apart and should face the same direction, rather than towards each other or the center of the classroom. If communal tables must be used, dividers (such as Plexiglas) should be installed between students.
- Consider outdoor learning when feasible, or consider holding these classes in larger venues, such as an auditorium.
- If class sizes can be reduced, consider implementing this (ideally at 50% or less of previous capacity) so that physical distancing can be maintained.
- Limit class density and minimize close contact for instructional programs involving group projects (e.g., poster painting, cooperative group instruction, chemistry/biology labs, etc.).
- Utilize a “one way” approach for hallways. Include markings on the floor and signage, and communicate this traffic pattern to students, faculty, and employees.
- Cloth or disposable face coverings should be worn by students, faculty, and employees when they are in classrooms.
- Objects such as electronic devices, books, pens, demonstratives, or other learning aids should not be shared between students.
- Non-essential objects brought from the home should not be permitted in the classroom (i.e., show and tell).
- Lingering and/or socializing in common areas should be prohibited, and cloth or disposable face coverings should be worn by students, faculty, and employees.
- Employee lounges should be closed and intermingling of administration, employees, and teachers should be discouraged.
- Consider closing student lounges and cafeterias in order to limit student interactions to their assigned group and assigned classroom. Consider limiting or prohibiting the use of lockers.
- Any activities that require students, faculty, and/or employees to enter or be present in common areas should be staggered to reduce density, and to limit the mixing of different groups in common areas.
- Consider conducting classes such as art, music, and physical education, for which one teacher instructs multiple groups throughout the day, virtually. Or, consider a physical education curriculum that minimizes contact between students.
- Consider the use of health and physical education classes as an opportunity to instruct students on the facts of the virus, protection factors, and cleaning and disinfection of spaces.
- Special events such as festivals, holiday events, and special performances should be canceled or
postponed. If held, attendance for nonparticipants should be virtual.

- Visitors (including parents) should be restricted and/or prohibited from entering school buildings.
- If administrative employees can work from home, they should be encouraged to do so.
- Consider staggering school start times and/or start dates; young children should return first as there is limited evidence of transmission from young children to each other or adults.

### School Start and End Times, Including Drop-Off and Pick-Up

- All students, faculty, and employees should be required to wash their hands or use hand sanitizer that contains at least 60% ethanol or 70% isopropyl alcohol prior to entering and exiting the school building.
- School start and end times should be coordinated or staggered by class or group, and staggered (by time and/or location) such that contact with other class groups is limited. Students should be discouraged from congregating in common areas and physical distancing should be monitored by school employees and teachers.
- For younger children, consider limiting the school employees that assists with drop-off and pick-up (i.e., the teacher assigned to their class group). Their teacher/school employee should wear a cloth or disposable face covering while assisting with drop-off and pick-up.
- For younger children, when feasible, the same parent or designated person is encouraged to drop off and pick up the child daily. This designated person, as well as the child, should wear a cloth or disposable face covering if possible, in accordance with local, state, and federal requirements. CDC recommends that all people 2 years of age and older wear a cloth face covering in public settings and when around people who don't live in your household, especially when other physical distancing measures are difficult to maintain.
- Non-medical cloth or disposable face coverings or cloth or disposable face coverings are NOT Personal Protective Equipment (PPE), but they do offer some protection to others and should be worn while near other people in common spaces or shared workspaces. They are not a substitute for physical distancing, engineering controls, cleaning and disinfecting, proper hygiene, or staying home while sick.
- Use of common areas should be demarcated with clear signage (including maximum occupancy) and physical distancing measures in accordance with public health rules and guidelines.
  - Consider marking 6-foot increments on the floor to remind students, faculty, and employees to maintain appropriate distancing.
  - Consider providing infographic sheets or posting signage as a visual reminder of the appropriate protocol.
- Discourage handshaking or other physical contact upon arrival and departure.
- Each school bus should be wiped down with disinfectant after each run. This includes the hand rail, windows, window handles, walls, and seats. See CDC guidance for bus transit operators.
- School bus drivers should be trained on hand hygiene and coughing etiquette, and should wear a cloth or disposable face covering at all times.
- If possible, reduce bus capacity (ideally to 50% capacity) and create distance between children on school buses (e.g., seat children one child per row, skip rows). See graphic at the end of this document. Children from the same household can be seated in the same row.
  - If there is a staggered program for instruction, the bus transportation system will need to identify seating to ensure sufficient physical distancing.
• Install and maintain hand sanitizer stations in the bus entry, to be used by all students upon entering and exiting.
• Post signs on the bus reminding students of proper sneezing and coughing etiquette.
• Each bus should have tissues available for students, and a touchless garbage can to dispose of tissues.
• Increase ventilation on the bus by maintaining open windows, when possible.
• Communicate to parents and students proper bus etiquette.

**Air Quality and Ventilation**
• Ensure classrooms and common areas are provided with natural ventilation by opening windows and doors whenever possible to increase air flow. If windows and doors cannot remain open, provide good indoor air quality by:
  – Keeping HVAC system operational to maintain thermal comfort and maximize outdoor air based on system design.
  – Maintaining the relative humidity at 40-60%.
  – Consider using portable HEPA filtration units.
  – Limiting the use of portable pedestal or overhead ceiling fans.

• If you need assistance on HVAC issues, ask an HVAC professional and see the American Society of Heating, Refrigerating, and Air-Conditioning Engineers’ (ASHRAE) COVID-19 (Coronavirus) Preparedness Resources updates for more information.
  – AIHA Occupational and Environmental Health and Safety (OEHS) Science Professionals and industrial hygienists are also well versed in general dilution ventilation. AIHA has a consultants list of such qualified professionals.
• If fans are used in the classroom, take steps to minimize air from fans blowing from one person directly at another individual.

• The use of ceiling fans should be minimized or eliminated.

**Disinfection**
• Train faculty and employees on the proper use of cleaning and disinfection products (see the training section below for more details).
• Select appropriate disinfectants – consider effectiveness and safety.
  – The U.S. Environmental Protection Agency (EPA) has developed a list of products that meet EPA’s criteria for use against SARS-CoV-2.
  – Do not mix different EPA registered chemicals together. The combination could be toxic by inhalation. Be particularly careful when using any products containing ammonia, sodium hypochlorite (bleach), or hydrogen peroxide.
  – Review product labels and Safety Data Sheets (SDS) and follow manufacturer specifications for cleaning/disinfecting.
  – Consider consulting an Occupational and Environmental Health and Safety (OEHS) Science Professional or Industrial Hygiene expert if additional advice is needed. AIHA has a consultants list of such qualified professionals.
• Establish a disinfection routine.
  – Ensure disinfection protocols follow product instructions for application and contact time. All items should be allowed to dry thoroughly after cleaning.
  – Use disposable wipes or rags when available. If not available, ensure rags are maintained, handled, and cleaned per product instructions.
• Consider developing a standard operating procedure, a checklist, or audit system to consistently train employees on enhanced cleaning/disinfecting practices or to track when and how cleaning and disinfecting is conducted. Note that this may be a requirement in some states or local jurisdictions.
Reopening: Guidance for Schools (K-12)

DISCLAIMER: These are meant to be general guidelines to help you re-open your establishment. Always follow local, state and federal laws and guidelines.

- Cleaning supplies should be provided and continuously stocked for use by faculty and employees.
- All surfaces and commonly touched equipment and supplies should be disinfected at least daily, although more frequently is preferred (i.e., hourly).
  - Faculty and employees should be educated on identifying common high-touch surfaces in the facility (e.g., doorknobs, chalk or whiteboard erasers, faucet handles, light switches, etc.)
  - Develop strategies to minimize contact with commonly touched surfaces, and ensure that students, faculty, and employees wash hands or use hand sanitizer before and after contact with high-touch surfaces.
- Toys, sports equipment, or other learning materials should be cleaned and disinfected frequently and before being shared with another student.
  - Set aside toys and materials that need to be disinfected; washing with soapy water is the ideal method of cleaning.
  - Items that cannot be cleaned or disinfected should not be used. Rotate toys/materials throughout the day for disinfecting.
- Books and other paper-based materials are not considered a high risk for transmission and do not need additional cleaning or disinfection. Plastic coverings on books or other plastic or metal materials should be disinfected between use.
- Common areas should be cleaned and disinfected daily (at a minimum) and (if feasible) consider performing this more frequently (i.e., hourly). This includes commonly touched surfaces and equipment (doorknobs, light switches, elevator buttons, etc.) in common areas (e.g., shared bathrooms, computer rooms, common use laptops).
- Normal routine cleaning of outdoor areas, such as playgrounds and parks, should be performed.
- High touch surfaces made of plastic or metal, such as grab bars and railings, should be cleaned and disinfected routinely.
- Cleaning and disinfection of wooden surfaces (play structures, benches, tables) or groundcovers (mulch, sand) is not recommended.
- Do not disinfect sidewalks and roads.
  - The potential for spread of COVID-19 from these surfaces is very low and disinfection is not effective.
- Common areas (e.g., lobby) should be cleaned and disinfected before and after students arrive and before and after students leave.
  - Disinfect all surfaces and commonly touched equipment (e.g., computer stations).
  - Seating, doors, restrooms, common areas, etc. should be disinfected at the end of each day.
- All cleaning supplies should be kept in a secure location that is not accessible to students.
- Use gloves when handling and removing trash and wash hands after touching garbage bags or trash cans.
- Refer to CFOC guidance for national standards for cleaning, sanitizing, and disinfection of educational facilities for children.

Restrooms (NOTE: See Supplement guidance on use of air dryers)

- If possible, assign bathrooms so each class group has their own bathroom. Otherwise, permit scheduled bathroom breaks to limit mixing of class groups (bathrooms may be used at other times by the students as well, on an as needed basis).
- Post signage limiting restroom occupancy to allow for proper physical distancing and to remind students, faculty, and employees to wash hands before and after using the restroom.
- Minimize touchpoints entering and existing restrooms, if possible.
• If the door cannot be opened without touching the handle, provide paper towels and a trash can by the door so a paper towel can be used when touching the handle and then discarded.
  – Consider controlling access to bathrooms with a key so disinfection measures can be better managed. If a key is used, consider disinfecting it after each use.
• Doors to multi-stall restrooms should be able to be opened and closed without touching handles if possible.
• Place signs indicating that toilet lids (if present) should be closed before and after flushing.
• Use no-touch faucets, towel dispensers, soap dispensers, and waste receptacles when possible.
• Hand soap should be readily available for use by occupants.
• Provide paper towels and air dryers in restrooms.
  – The WHO and CDC currently state that hands can be dried using a paper towel or hand dryer.
  – However, the use of touch or push hand dryers is discouraged due to possible surface contamination. If hand dryers are used, consider touchless devices.
• Businesses and employers should work with HVAC professionals to ensure that bathrooms are well ventilated, and if filtration is used, that proper filtration practices are being followed.
• Increase frequency and efforts to keep bathrooms clean and properly disinfected and maintain a record of sanitary work practices.

Cafeterias and Food Preparation
• Notably, according to the Food and Drug Administration (FDA) and the Centers for Disease Control (CDC), there is currently no evidence to support transmission of SARS-CoV-2 associated with food. Existing food safety requirements are already stringent and reduce the likelihood of food-borne disease transmission. Additional measures can be taken to reduce the risk of transmitting SARS-CoV-2 from touching surfaces or from person-to-person spread through respiratory droplets.
• Eliminate shared common areas for dining (i.e. cafeterias) and consider delivering or serving boxed meals and snacks directly to classrooms instead.
• To the extent possible, for snacks and meals provided by the school, pre-packaged boxes or bags should be used, rather than “buffet” or other family-style food serving.
• Food preparation areas and equipment should be cleaned and disinfected on a daily basis (at a minimum); after cleaning, cutlery and dishware should be stored to prevent contamination.
  – The outside of dishwashers should be cleaned at the beginning and end of each shift.
  – All silverware and dishware should be cleaned in the dishwasher, when available.
  – If silverware and dishes cannot be kept clean and covered, disposable options are recommended.
  – Install touchless water/beverage faucets when possible. Non-touchless water/beverage faucets should be disinfected throughout the day. Water fountains, where the users’ mouth is in close proximity to the beverage source, should not be used.
  – Ice machines that require a handheld scoop should not be used, as it is difficult to control potential contamination in this case.
• When preparing food for students, providers must first wash their hands and then wear food-safe disposable gloves and cloth or disposable face covering. Food service and preparation should follow FDA guidance.
• All students, faculty, and employees must wash their hands before and after eating.
Reopening: Guidance for Schools (K-12)

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DISCLAIMER: These are meant to be general guidelines to help you re-open your establishment. Always follow local, state and federal laws and guidelines.

Prior to and after meal or snack times, tables must be thoroughly cleaned and disinfected with an EPA-registered household disinfectant approved for use against the virus causing COVID-19, which are listed here. Diluted bleach (sodium hypochlorite) (5 tablespoons per gallon of water/4 teaspoons bleach per quart of water) can also be used for suitable surfaces according to the CDC, following the manufacturer’s guidance for usage and ensuring adequate ventilation.

Students, faculty, and employees should not share utensils, food, snacks, or drinks.

For younger students who require assistance with feeding, faculty and employees must wash hands and put on disposable gloves. These gloves should be removed immediately after feeding, followed by hand washing.

Face Coverings

Cloth or disposable face coverings should be worn by students, faculty, and employees as feasible, and at all times in common areas. Face coverings are most essential in times when physical distancing is not possible.

- Provide disposable or washable cloth face coverings to students, faculty, and employees (if possible).
- Teach and reinforce proper use and removal of disposable or cloth face coverings to all students, faculty, and employees.
- Information should be provided to all on proper washing of cloth face coverings.
- Students, faculty, and employees should be frequently reminded not to touch their cloth or disposable face covering and to wash their hands frequently.
- Consider enlisting student, faculty, or employees’ leadership to serve as face covering ambassadors, by carrying cloth or disposable face coverings and distributing them to those not wearing face coverings when at school.

Non-medical cloth or disposable face coverings or cloth or disposable face coverings are NOT Personal Protective Equipment (PPE), but they do offer some protection to others and should be worn while near other people in common spaces or shared workspaces. They are not a substitute for physical distancing, engineering controls, cleaning and disinfecting, proper hygiene, or staying home while sick.

Additional information on cloth face coverings can be found on CDC’s website.

Cloth face coverings should NOT be placed on anyone who has trouble breathing, or is unconscious, incapacitated, or otherwise unable to remove the face covering without assistance. Cloth face coverings should NOT be worn by babies and children under age two because of danger of suffocation.

If a school chooses to provide or an employee supplies their own N95 respirator, please fully consider all the potential OSHA requirements. If your faculty or employees do not have experience in using PPE, the CDC has recommended sequences for donning and doffing PPE.

Student, Faculty, and Employee Wellness

Communicate to students, faculty, and employees the importance of being vigilant for screening themselves for symptoms and staying in touch with the school nurse if or when they start to feel sick.

Require students, faculty and employees who have symptoms or signs (i.e., fever, cough, or shortness of breath) or who have a sick family member at home with COVID-19 to notify their supervisor/school and stay home.

Health checks and reporting requirements of individuals infected with COVID-19 should be explained to students, faculty and employees prior
Reopening: Guidance for Schools (K-12)

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To reopening and again once operations have resumed.

- Revisit your leave or sick program to allow for time off and follow all HR Policies and HIPAA/other regulatory requirements.

- Establish routine, daily wellness health checks on arrival (using teaching aids, administrative employees, teachers, etc.) such as temperature screening and symptom screening of students, faculty, and employees. Conduct screenings safely, respectfully, and with measures in place to ensure confidentiality, as well as in accordance with any applicable privacy laws or regulations:
  
  - Temperature screening methods can include manual (use non-contact infrared thermometers) or thermal camera meeting FDA recommendations. Additional screening information/guidance can be found on the CDC website.
  
  - Perform a visual inspection for other signs of illness (e.g., flushed cheeks, rapid or difficulty breathing without recent physical activity, fatigue, extreme fussiness, cough).
  
  - Persons who have a fever of 100.4°F (38°C) or above, or other signs of illness should not be admitted to the facility.

- Have a written protocol to follow if someone is sick; train faculty and employees on this protocol prior to resuming classes.
  
  - This written protocol should include contact tracing.
  
  - Sick students, faculty, and employees should be kept separate from well students, faculty, and employees until they can return home.

- Sick persons should follow the CDC-recommended steps. Faculty, employees and students should not return to school until the criteria to discontinue home isolation are met in consultation with healthcare providers and state and local health departments. Consider waiving requirements for medical documentation during the pandemic, as CDC has advised people with mild illness NOT to go to the doctor’s office or emergency room.

- If faculty or employees are sick or receive positive COVID-19 test results, results should be reported to employer. In the case of a positive COVID-19 test result, the employee must stay home until cleared for physical return to the workplace by their medical provider, following the CDC’s Discontinuation of Isolation for Persons with COVID-19 Not in Healthcare Settings.

- If a school employee tests positive:
  
  - Follow federal, state, and local recommendations for reporting and communicating cases, while remaining compliant with regulations and guidelines pertaining to protecting private health information such as confidentiality required by the Americans with Disabilities Act (ADA). See OSHA for guidance on reporting workplace exposures to COVID-19.
  
  - Engage HR immediately and enforce all applicable HR rules and regulations.
  
  - The employee shall be isolated to the area they are in currently and removed from the work site for a minimum of 14 days.
  
  - Any individuals having “close contact” (within approximately 6 feet) with the sick employee should also be isolated from the work site for 14 days; and all other employees should continue to follow physical distancing rules. Communicate and reinforce with employees, while maintaining PII and HIPAA requirements, that they may have been exposed and to closely monitor their health, temperature, and current symptoms as identified by the CDC. Contact tracing and sharing of employee information should be done under the guidance of Human Resources due to privacy requirements of HIPAA, ADA, and EEOC. See the
CDC’s “Coronavirus Disease 2019 (COVID-19) General Business Frequently Asked Questions”.

- Enhanced cleaning and disinfecting should be done immediately by trained personnel, who should wear face coverings and gloves, dispose of gloves after use, and wash hands and face when complete. Visibly dirty surfaces shall be cleaned using a detergent or soap and water PRIOR to disinfection.
- For disinfection, use only EPA-registered disinfectants on List-N.

- Stagger employee shifts, start times, and break times (as feasible).
- Ask students, faculty, and employees to consider the following if they commute to school using public transportation:
  - Use other forms of transportation if possible.
  - If taking public transportation, maintain physical distancing and wear a cloth or disposable face covering.
  - Change their commute time to less busy times when possible.
  - Wash hands before and as soon as possible after their trip.

- Provide students, faculty, and employees with adequate time and access to soap, clean water, and single use paper towels for handwashing.

- At minimum, faculty, students, and employees should wash their hands after they have been in a public place, after touching their face covering, after blowing their nose, coughing, or sneezing, after using the restroom, after touching any common contact surfaces, and before eating. Avoid touching eyes, nose, or mouth with unwashed hands.

- Employees should wash hands with clean, running water, apply soap, lather and scrub for at least 20 seconds, then rinse. Dry hands using a clean paper towel or air dry. When soap and water can’t be used, use an alcohol-based hand sanitizer that contains at least 60% ethanol or 70% isopropyl alcohol. Any use of alcohol-based hand sanitizers should follow local and State guidelines.

- Consider installing a portable handwashing station at the entrance of every classroom. Regularly train students, faculty, and employees on effective handwashing.

- Remind them to wash their hands often, ideally at least one time per hour and before and after handling food or garbage or using the restroom, with soap and water for at least 20 seconds.

- If soap and water are not available, they should use alcohol-based hand sanitizer that contains at least 60% ethanol or 70% isopropyl alcohol.

- Make hand sanitizer stations available throughout work and public places. Stations should also be placed in convenient locations, such as at entrances, exits, near elevators, and restrooms. Touch-free hand sanitizer dispensers should be installed where possible.

- Ensure adequate supplies (e.g., soap, paper towels, hand sanitizer, tissues) to support healthy hygiene practices.

- Post signs and reminders at entrances and in strategic places providing instruction on hand hygiene, respiratory hygiene, and cough etiquette. This should include signs with images for non-English readers, as needed. Consider using infographics and frequent verbal trainings for those who cannot read.

- Remind students, faculty, and employees if someone coughs or sneezes, they should cover their mouth and nose with a tissue and throw used tissues in the trash. If they have a tissue, they should cough or sneeze into their elbow, not their hands. They should immediately wash their hands after blowing your nose, coughing or sneezing. Learn more about coughing and sneezing etiquette.
Use no-touch waste receptacles when possible.

- Remind employees that people may be able to spread COVID-19 even if they do not show symptoms.
- Consider all close interactions (within 6 feet) with students, faculty, employees, and others as a potential source of exposure.

**Training**

- The school should notify faculty and employees of new workplace policies and changes prior to reopening and upon resuming operations.
- Faculty and employees should be trained on new or modified working schedules, how they can stay up to date on new scheduling requirements, and how to make requests for schedule changes if a need arises.
- Provide Safety Data Sheets (SDS) for cleaning and disinfection products and ensure employees are aware of the hazards of use. Incorporate new hazards into existing OSHA Hazard Communications Program.
- Faculty and employees should receive, at minimum, awareness training on cleaning and disinfection products used in the workplace following OSHA Hazard Communication Standards. For employees who will use disinfectants and cleaners, training should also include proper use, PPE, disposal, and all precautionary measures.
- Health checks and reporting requirements of individuals infected with COVID-19 should be explained to faculty and staff prior to reopening and again once operations have resumed.
  - Faculty and employees should evaluate their health constantly; if they are sick, have a fever, symptoms, or someone at home is sick then they should remain home. **NOTE: Employer HR Policies, HIPAA guidelines and other laws should be followed at all times.**

**Waste and Laundering**

- Single-use items and used disinfection materials can be treated as regular waste, following regular safety guidelines.
- Any reusable cloth materials can be washed with detergent and dried on the highest temperature setting for the fabric.
- Ensure all commercial laundry services are aware of the potential for COVID-19 exposure before laundering.
- Deeper cleaning and disinfecting protocols should be developed and implemented in cases where confirmed cases of COVID-19 are discovered. Refer to AIHA’s [Workplace Cleaning for COVID-19](#).

**Communication**

- Communicate to the teachers, employees, students (when appropriate), and families about what is being done to mitigate the spread of COVID-19 (e.g., disinfection routine, health policies for employees, physical distancing, and health and safety measures in place).
- Consider communicating the visible symptoms of COVID-19 exposure.
- Platforms for verbal/written communication can include the use of social media, websites, and posting information on indoor/outdoor bulletins.
- Upon arrival and throughout the day, communicate the importance of good personal hygiene to students (i.e., hand washing, covering nose and mouth when sneezing or coughing, not sharing food, etc.).

**Other Control Measures**

- Consider scheduling an extended winter break or implementing remote learning between late November through January and extending the school year further into June to minimize in-person congregating during peak flu season.
• Although perhaps not necessary if hand-washing protocols are rigorously followed, consider providing disposable gloves to employees, especially when cleaning and disinfecting the building, removing waste materials, and cleaning the restrooms.
  – If gloves are worn, they must be changed regularly, and they are not a substitution for hand-washing.
  – Remove or replace any gloves that are torn or damaged. Users should check their gloves frequently to avoid exposure.
• Encourage those who are sick or at greater risk to stay home. This includes:
  – People with underlying medical conditions.
  – People who live with elderly people or those who are at risk.
  – People with upper respiratory or flu-like symptoms or who live with someone with these clinical symptoms.
  – People with COVID-19, people who live with someone with COVID-19, or who have been exposed to someone with COVID-19.
• Employers should educate employees to recognize the symptoms of COVID-19 and provide instructions on what to do if they develop symptoms. At a minimum, any worker should immediately notify their supervisor, their health care provider, and the local health department, who will provide guidance on what actions need to be taken.
• Plan for employees absences by developing flexible attendance and sick-leave policies, plan for alternative employee coverage, and monitor and track COVID-19 related employee absences.
• Implement and inform employees of supportive workplace policies as applicable:
  – Flexible sick leave policies consistent with public health guidance. Providing paid sick leave is an important way to encourage employees to stay home when sick.
  – Consider not requiring a COVID-19 test result or a healthcare provider’s note for employees who are sick to validate their illness in order to qualify for sick leave. If you do require a doctor’s note from your employees to verify that they are healthy and able to return to work, be aware that healthcare provider offices and medical facilities may be extremely busy and not able to provide such documentation in a timely manner. Get more information related to the Americans with Disabilities Act during the COVID-19 pandemic.
  – Flexibility to stay home to care for a sick family member.
  – Human resources policies consistent with public health guidance, and state and federal workplace laws. For more information on employer responsibilities, visit the Department of Labor’s and the Equal Employment Opportunity Commission’s websites.
  – Employee assistance program and community resources to help employees manage stress and receive support.
  – Encourage employees at increased risk for severe illness to request special accommodations to allow them to perform their job duties safely while also protecting sensitive employee health information.
• Stay informed about local COVID-19 information and updates in your geographic area.

What should a school Employee do to protect themselves and students attending school?
• Evaluate your health constantly. If you are sick, stay home. If you have a temperature, stay home. If someone at home is sick or you came into contact
with someone who became sick, stay home. If you have allergies or other medical illness, stay home. 
**NOTE:** Employer HR Policies, HIPAA guidelines and other laws should be followed at all times.

- Wear a cloth or disposable face covering when in public and during the workday, and maintain physical distancing with students, parents, and other family members during drop-off and pick-up.
- Maintain cloth or disposable (or better if you have it) face covering, clean or replace frequently, and use at minimum when unable to maintain physical distancing of 6-feet.
- Depending on local requirements, in alignment with CDC recommendations, wear a cloth or disposable face covering whenever physical distancing cannot be maintained (indoors or outdoors). Ensure the face covering is properly maintained and cleaned. Additional information on cloth face coverings can be found on [CDC’s website](https://www.cdc.gov). **(NOTE: Cloth or disposable face coverings primarily protect other people. A cloth or disposable face covering is not a substitute for physical distancing.)**

- With the exception of children less than two, and individuals who have difficulty breathing, are unconscious, or otherwise unable to remove a face covering without assistance, CDC recommends all people wear a cloth or disposable face covering in public settings and when around people who don’t live in their household, especially when other physical distancing measures are difficult to maintain.
- Non-medical cloth or disposable face coverings or cloth or disposable face coverings are NOT Personal Protective Equipment (PPE), but they do offer some protection to others and should be worn while near other people in common spaces or shared workspaces. They are not a substitute for physical distancing, engineering controls, cleaning and disinfecting, proper hygiene, or staying home while sick.

- Remove cloth or disposable face coverings correctly and wash hands after handling or touching a used face covering.

- Wash cloth face coverings after each use. Cloth face coverings can be included with regular laundry. Use regular laundry detergent and the warmest appropriate water setting for the cloth used to make the face covering. Use the highest heat setting and leave in the dryer until completely dry. If air drying, lay flat and allow to completely dry. If possible, place in direct sunlight.

- Let your employer know if you have concerns about PPE that may be provided to you and that you are properly instructed on how to use it. The CDC has recommended sequences for donning and doffing PPE.

- Wash your hands when you arrive at work, throughout the day after various activities (e.g., before and after preparing food, before and after administering medication, after handling garbage, after using the bathroom or helping a child to do so, etc.), after touching your face covering, when you leave work, and when you arrive home.

- Cover your mouth and nose with a tissue when you cough or sneeze and throw used tissues in the trash. If you don’t have a tissue, cough or sneeze into your elbow, not your hands. Immediately wash your hands after blowing your nose, coughing or sneezing. Learn more about [coughing and sneezing etiquette](https://www.cdc.gov). **Worker Rights**

AIHA believes that basic protections are worker rights, as well as an essential ingredient of occupational health and safety systems, and that employers must provide a safe and healthful work environment.
What can Parents/Guardians/Caregivers do to minimize the transmission of COVID-19?

- Evaluate your and your child’s health constantly. If either of you are sick, stay home. If either of you have a temperature, stay home. If someone at home is sick or you came into contact with someone who became sick, stay home and keep your child home too. If you have allergies or other medical illnesses, stay home.

- Communicate to the school and local health department if a student or a family member has been diagnosed with or in contact with someone diagnosed with COVID-19.

- Consistent with applicable federal, state, or local privacy and confidentiality laws (such as the Family Educational Rights and Privacy Act [FERPA]), parents/caretakers/guardians should inform the school if they or their child has been diagnosed with or in contact with someone diagnosed with COVID-19.

- Wear a cloth or disposable face covering when out in public and maintain physical distancing (maintain 6-feet of separation from others) during drop-off and pick-up.

- Wash your hands throughout the day, after drop-off, and before pick-up (if feasible), and after touching your face or face covering.

- Carry a disposable tissue; if you get the urge to sneeze or cough, cover your nose, mouth, and face covering. Tissues should be immediately thrown away.

Resources

- Association for Early Learning Leaders
- CDC General Business Frequently Asked Questions website.
- CDC Interim Guidance for Administrators of US K-12 Schools and Child Care Programs.
- CDC Guidance for Schools and Child Care Programs.
- CDC Cleaning and Disinfection for Community Facilities.
- CDC Cleaning and Disinfecting Your Facility Every-day Steps, Steps When Someone is Sick, and Considerations for Employers.
- CDC K-12 Schools and Child Care Programs: FAQs for Administrators, Teachers, and Parents.
- CDC COVID-19 and Children FAQ.
- CDC Schools and Child Care Programs: Checklist for Teachers and Parents.
- CDC Guidance for Child Care Programs that Remain Open - Supplemental Guidance.
- CDC Talking with Children about Coronavirus Disease 2019.
- CDC Considerations for School Closure.
- CDC Health Screening “Should we be screening employees for COVID-19 symptoms?” section of General Business Frequently Asked Questions
• WHO Key Messages and Actions for COVID-19 Prevention and Control in Schools.
• The EPA has developed a list of disinfectants for use against SARS-CoV-2.
• ASHRAE has a list of COVID resources for commercial buildings.
• AIHA’s Indoor Environmental Quality Committee developed these guidance documents about reopening and cleaning buildings after closures due to COVID-19: Recovering from COVID-19 Building Closures and Workplace Cleaning for COVID-19.
• AIHA’s Considerations on the Safe Use of UVC Radiation
• AIHA’s Focus on Construction Health: COVID-19
• AIHA’s Effective and Safe Practices: Guidance for Custodians, Cleaning and Maintenance Staff
• AIHA’s Employers Guide to COVID-19 Cleaning & Disinfection in Non-Healthcare Workplaces
• AIHA’s Reducing Risk of COVID-19 Using Engineering Controls
• AIHA’s PPE for SARS-CoV-2
• AIHA’s Use of Real Time Detection Systems
• AIHA’s Proper Use of Respirators for Healthcare Workers & First Responders
• AIHA’s Workers Rights White Paper

**AIHA®**

AIHA is the association for scientists and professionals committed to preserving and ensuring occupational and environmental health and safety (OEHS) in the workplace and community. Founded in 1939 as the American Industrial Hygiene Association® (AIHA®), we support our members with our expertise, networks, comprehensive education programs and other products and services that help them maintain the highest professional and competency standards.

More than half of AIHA’s nearly 8,500 members are Certified Industrial Hygienists (CIH), and many hold other professional designations. AIHA serves as a resource for those employed across the public and private sectors, as well as to the communities in which they work. For more information, visit AIHA.org.

**About Occupational and Environmental Health and Safety Professionals**

Occupational and environmental health and safety (OEHS) professionals (also known as industrial hygienists) practice the science of anticipating, recognizing, evaluating, controlling and confirming workplace conditions that may cause workers’ injury or illness. Through a continuous improvement cycle of planning, doing, checking and acting, OEHS professionals make sure workplaces are healthy and safe.

• Get additional resources at AIHA’s Coronavirus Outbreak Resource Center.
• Find a qualified industrial hygiene and OEHS professionals near you in our Consultants Listing.
Reopening: Guidance for Schools (K-12)

Child sitting in a school bus used for student transportation.

Disclaimer

AIHA is not legally responsible and shall be held harmless from all claims, causes of action, and demands, whatsoever, any third party may incur on account of damage, loss or injury resulting from adhering to these guidelines.

These guidance documents were primarily developed for those smaller business that don’t have readily available occupational health and safety resources, and designed to help business owners, employers, employees and consumers implement science-backed procedures for limiting the spread of the coronavirus. They are subject to any local, state, or federal directives, laws, or orders about operating a business and should only be used if they do not conflict with any such orders. These documents are subject to revision and shall be updated accordingly.

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