
What safety measures will be in place for students and staff?
It is important to note that the American Academy of Pediatrics has affirmed that children, particularly younger children, are less likely than adults to be infected with COVID-19. Furthermore, if they become infected, it appears younger children may not have the same transmission potential as adults. The health and safety requirements for school reopening use a combination of strategies that, taken together, will substantially reduce the risk of transmission of COVID-19 in schools. This combination approach includes masks/face coverings, physical distancing, handwashing/sanitizing, and staying home when sick. (No change)

What are the guidelines for safe distancing requirements between students?
Medical experts advising DESE have stated the distance of 6 feet is preferred whenever feasible but that the minimum acceptable distance is 3 feet when done in combination with masks and other safety measures. Establishing a minimum physical distance of 3 feet between students when masks are worn is informed by evidence and substantiated by guidance from the American Academy of Pediatrics and the World Health Organization. It is the practice in several other countries that have successfully reopened their schools. (Revised)

Who needs to wear a mask, and when do they have to be worn?
Students in second grade and above and adults, including educators and staff, are required to wear a mask that covers their nose and mouth at all times, except for designated breaks. Students in kindergarten and grade 1 are strongly encouraged to wear masks; if a student cannot tolerate a mask, they should wear a face shield, if possible. Masks must be worn by everyone, regardless of age, during school bus transportation (districts should download DESE’s transportation guidance for how to work with students who are unable to wear a mask on the bus). Teachers, staff, and parents should reinforce mask-wearing. (Revised)

Are there exceptions to wearing masks?
Exceptions to mask requirements must be made for those for whom wearing a mask is not possible due to medical conditions, disability impact, or other health or safety factors. Face shields may be an option for students with medical or behavioral challenges who are unable to wear masks. If masks cannot be worn, students and staff should maintain at least 6 feet of physical distance. When staff need to be closer than 6 feet to a student who cannot wear a mask (such as when supporting students with disabilities), staff should follow the guidance provided in the Guidance on Summer 2020 Special Education Services (download). (Revised)

What are the health and safety guidelines for teachers and staff?
All adults, including educators and staff, are required to wear a mask that covers their nose and mouth at all times, except for designated breaks, which should occur throughout the day. Allow adequate space for teachers to ensure safe physical distance from students. (No change)

When, if ever, should students and staff get tested for COVID-19? Is there routine testing?
Current Massachusetts Department of Public Health guidance states that anyone who shows any COVID-19 symptoms, even if mild, should get tested. Medical experts recommend close contacts
of those who test positive also get tested four to five days after their last exposure to that person. If an individual chooses not to get tested (whether they are exhibiting symptoms or are a close contact of someone who tested positive), the student or staff member should remain home in self-quarantine for 14 consecutive days and until asymptomatic. (Revised)

If a classroom is set up with desks spaced 3 feet apart from seat edge to seat edge, is it permissible for the teacher, even when masked, to walk up and down between student desks to provide assistance and accommodations?

Teachers should maintain a distance of 6 feet from other individuals whenever feasible, with the minimum acceptable distance of 3 feet when in combination with masks and other safety measures. Therefore, it is not recommended that teachers walk up and down between student desks, if this would bring them within 3 feet of students. For guidance on working with students with disabilities and students with other intensive needs, please refer to the Comprehensive Special Education Guidance (download). (New)

In what circumstances does someone need to self-quarantine (when they have been exposed but are not sick) or isolate (when they are sick)?

Individuals are required to self-quarantine if they have been exposed to a COVID-19-positive individual and choose not to get tested. An individual who chooses not to get tested must remain in self-quarantine for 14 days from last exposure. An individual who chooses to get tested four to five days after last exposure and receives a negative test may return to school if masked. Individuals are required to self-isolate if they test positive for COVID-19. In these scenarios, the self-isolation period is a minimum of 10 days with at least 3 days having passed with no fever and with improvement in other symptoms. (New)

The guidance states that individuals who are exposed to COVID-19-positive individuals should stay home and get tested four or five days after their last exposure. If the exposure is ongoing (e.g., exposure to household members or other close contacts who are unable to self-isolate), what is considered the “last exposure?”

If a student’s or staff member’s exposure to an infected individual is ongoing, then the student or staff member should stay home in self-quarantine until the infected individual is no longer considered infectious per Department of Public Health guidance. Once the infectious period is over, the student or staff member should be tested four or five days later. (New)

The guidance states that if someone is symptomatic or has been exposed to a COVID-19-positive individual, they must get tested prior to returning to school. In other places, the guidance states individuals who choose not to get tested must adhere to a 14-day self-quarantine prior to returning to school. Are these conflicting statements?

The only way a close contact may return to school prior to 14 days after the last exposure to an individual with COVID-19 is if they have a negative test four or five days after the last exposure, are asymptomatic, and are able to mask effectively. If the individual is not tested or cannot mask effectively, then they must self-quarantine for the full 14 days. (New)

If someone in an elementary classroom tests positive for COVID-19, is the whole class required to self-quarantine? If so, when is the earliest students can return to school?

The guidance states that in elementary schools, all students and staff within the classroom are considered close contacts. If someone in this “cohort” tests positive for COVID-19, all close contacts should stay home and get tested. Because close contacts should get tested four or five days after last exposure, the classroom will close to in-person instruction for a minimum of 5 calendar days. If a close contact’s test returns negative, if they are asymptomatic, and if they can
effectively mask, then they may return to school. If the close contact chooses not to get tested or cannot mask effectively, they must self-quarantine for 14 days. During the period that students are in self-quarantine, it is the school’s duty to provide them with remote learning. (New)

The guidance states that if an individual tests positive for the virus, they must self-isolate for at least 10 days and until at least 3 days have passed with no fever and with improvements in other symptoms. At what point do you start the 10-day count and 3-day count, respectively?

The 10-day period begins with the onset of symptoms, and the 3-day period without fever begins no earlier than the last 3 days of that 10-day interval. If an individual develops symptoms, regardless of when tested, they may return on the 10th day, provided that they have had no fever on days 7-10 after symptom onset and have had improvements in other symptoms. The duration may be longer than 10 days if a fever persists or symptoms do not improve. (New)

If a student transfers into our district or school, are they required to self-quarantine?

In general, students who reside in Massachusetts who transfer into a district or school mid-year are not required to self-quarantine. See Protocols for Responding to COVID-19 Scenarios (download) for situations that require self-quarantine or self-isolation. Students who transfer from out of state must follow COVID-19 Travel Orders for Massachusetts. (New)

After in-person instruction resumes, does a student need to submit a doctor’s note if they need to be out for personal health reasons?

State law dictates that school committees set local attendance policy. Given the current health crisis, DESE does not recommend requiring a physician’s note for attendance-related purposes for personal health reasons. If the student’s parents/caregivers are seeking home or hospital educational services, the regular home/hospital process (http://www.doe.mass.edu/prs/ta/hhep-qa.html) must be followed, including the completion of the Physician’s Affirmation of Need for Temporary Home or Hospital Education for Medically Necessary Reasons, which requires a physician’s signature. Additional requirements for return will be in place for a student or staff who has tested positive for COVID-19. (No change)

Are plexiglass barriers permissible between desks or tables?

In general, we do not recommend setting up plexiglass barriers in typical classrooms, since they represent an additional high-risk surface to clean and disinfect. However, barrier use is permitted if classroom furniture cannot be replaced and if required physical distancing cannot be achieved without the use of barriers, such as in shared table or laboratory settings where there is limited capacity and desks are heavy or immovable. More information can be found by downloading the Facilities and Operations guidance. (New)

Is hand sanitizing an acceptable replacement for handwashing? Is handwashing (not hand sanitizing) necessary?

While handwashing with soap and water is the best option, alcohol-based hand sanitizer (at least 60 percent ethanol or at least 70 percent isopropanol) may be utilized when handwashing is not available. As has always been the case, hands should be washed whenever hands are visibly soiled and after using the bathroom. (No change)

What is the role of the bus driver or bus monitor in identifying possibly symptomatic students?

We are not recommending bus drivers or bus monitors actively screen students as they enter or ride the school bus. However, bus drivers and bus monitors can play an important role in flagging possible symptomatic students. If it is evident that someone has symptoms, whether reported or observed, the bus driver or bus monitor should follow the protocols outlined in the transportation
guidance. Bus drivers and bus monitors should be trained on these protocols and scenarios prior to the start of the year. (New)

If students from the same household are sitting together on the bus, can the maximum occupancy for each bus increase?
Yes. Because students from the same household can sit together on a bench, the maximum occupancy for each bus may increase. Other students (non-household members) should be seated one student per bench from others. (New)

Are students permitted to drink water or other liquids on the bus?
No. All riders must wear masks that cover their nose and mouth at all times, and masks may not be removed for drinking. Exceptions may be made for those who require liquids due to medical conditions, disability impact, or other health or safety factors. (New)

What is the recommended amount of physical distancing at the bus stop?
Distancing requirements apply both while waiting at bus stops and while in transit. Students and adults at bus stops should ideally maintain 6 feet of distance from other individuals, with the minimum being 3 feet of distance. Everyone on the bus and waiting at bus stops must wear masks that cover the nose and mouth at all times. (New)