



November 15, 2021

Dear Superintendents and School Board Members:

Thank you for all you do for the children of Minnesota. We know that the past 19 months have been enormously challenging for our schools, our families and our children. We are grateful for your leadership and resiliency during these trying times and want to support you in making this a successful school year.

We are writing today to express our concern with high cases of COVID 19 in Minnesota school children. While children are generally less impacted by COVID 19 than adults, they are still at risk for severe disease, hospitalization, and death. About 1 in every 100 children with COVID 19 ends up in the hospital. Further, some children experience ongoing symptoms for a prolonged period after acute infection, even if that infection has been mild (long COVID). Since school started this fall, we have seen an alarming rise in childhood cases and a subsequent rise in hospitalized children and children admitted into intensive care, and sadly, one student has died. Additionally, eight Minnesota school staff have become infected and died of COVID since school began this fall.

Minnesota's students benefit from in-person learning and enabling in-person instruction as safely as possible for the 2021-2022 school year for all students is a priority. However, without effective disease mitigation strategies in place, children and school staff are being put at undue risk. As Minnesota's Commissioner of Health, and as the president of the Minnesota Chapter of the American Academy of Pediatrics (AAP), we urge you to make sure all schools follow the updated, current Centers for Disease Control and Prevention (CDC) guidance for COVID-19 prevention in pre-K-12 schools. We must take this pandemic seriously and prioritize our children's health and education. We need to ensure that all of Minnesota's children have access to safer, in -person education. The CDC and MDH recommends the use of multi-layered mitigation strategies. These layered strategies include:

- 1. **Promoting Vaccination**. Vaccination is the leading public health prevention strategy to end the COVID-19 pandemic. Vaccination limits the spread of SARS-CoV-2 and markedly decreases severe illness from COVID-19. Anyone eligible for vaccine teachers, staff, parents, and children five (5) years and older should be vaccinated.
- 2. Universal Masking. All schools are urged to adopt a policy requiring universal masking for students, faculty and staff, and guests. The CDC, the American Academy of Pediatrics and MDH all recommend universal masking in all K-12 schools. The vaccine protects well against severe disease including hospitalization and death. When looking closely at infection and transmission, although vaccinated people are five-times less likely to get infected than unvaccinated people, infections and transmission can occur. More information on the science behind masking, correct mask usage, and exceptions to universal mask wearing are found on both the CDC and MDH websites.
- 3. **Physical Distancing.** Schools should maintain at least 3 feet of physical distance between students within classrooms whenever possible. When it is not possible to maintain 3 feet of distance between students, it is especially important to layer other prevention strategies, and consider cohorting. Six feet of distance should occur between adults and between adults and students.
- 4. **Staying home when sick.** Staying home when sick with COVID-19 is essential to keep COVID-19 infections out of schools and prevent spread to others. Schools should adopt a policy requiring students, teachers, and staff to stay home if they have COVID-19 symptoms or test

positive for SARS-CoV2. Anyone with symptoms should be tested and stay home until their test results are known. If someone has COVID-19, they should stay home for at least 10 days after symptom onset (or a positive test if they are asymptomatic) with improvement of symptoms and are fever free without the use of fever-reducing medications for at least 24 hours before returning. For more information, see the MDH decision tree at https://www.health.state.mn.us/diseases/coronavirus/schools/exguide.pdf.

- 5. **Screening Testing**. Schools should implement a program for voluntary screening testing of unvaccinated students, teachers and staff. In addition, regular, frequent testing of students participating in sports and other high risk extracurricular activities, can help decrease potential spread of SARS CoV-2.
- 6. **Contact Tracing and Quarantine**. Schools should develop a plan to support contact tracing and enforce quarantine recommendations by local and state health officials. The Delta variant has a higher attack rate than the original strain of the virus. This means that more people who are exposed to an infectious person with the Delta variant are likely to get infected than people who were exposed to someone with the original strain of SARS CoV-2. "Timely contact tracing can interrupt the ongoing transmission of a disease and reduce the spread of infection, catching and controlling new outbreaks before they are able to grow.
- 7. **Ventilation**. Improving ventilation is an important COVID-19 prevention strategy that can reduce the number of virus particles in the air. Ventilation improvements that bring fresh outdoor air into a building alongside <u>other preventive strategies</u>, help keep virus particles from concentrating inside.
- 8. **Notification of Cases**. School boards and other school leaders are reminded of the required reporting to MDH of any known COVID-19 cases under Minnesota Rules section 4605.7070. A link to the Case Report Form is at https://www.health.state.mn.us/diseases/coronavirus/schools/plan.html. Failure to promptly report cases could result in a monetary penalty or other enforcement action.
- 9. **Additional layers of prevention**. Schools should teach and implement appropriate handwashing and respiratory etiquette and ensure frequent cleaning and disinfection of surfaces at schools.

More detailed guidance can be found on MDH's website. We share your commitment to enable inperson learning and to support the health and well-being of your school community. We know it can be challenging to implement these measures. However, the adoption of these multilayered strategies will give our children the best chance for a safer in-person school year with fewer interruptions. Your leadership and partnership are vital and we thank you for all that you are doing to help protect Minnesotans.

Sincerely,

Jan K. Malcolm

Commissioner, MDH

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Sheldon Berkowitz, MD

President, MN Chapter AAP