

# **Preparing for Back to School: COVID-19 Guidance for Parents**

#### What to expect

As schools reopen this fall, there is still a large subset of children ineligible for vaccination. Those under 12 years of age, as well as immune compromised children and older adults, are particularly vulnerable to COVID-19. The Delta variant of COVID-19 spreads easier than previous strains and has the ability to cause illness in children and even a subset of vaccinated people. Numerous studies support the spread of COVID-19 from children to others in the household. Children are also at risk for developing Multisystem Inflammatory Syndrome (MIS-C), as serious condition often requiring hospitalization, with COVID-19 infection.

Several states, including Iowa, are experiencing significant surges in COVID-19 activity. While this surge will likely decline, there is a strong possibility more surges may happen throughout the school year.

#### How are schools protecting children?

While the Iowa Legislature enacted limitations on school-based protections of children, there are many actions available for reducing spread of COVID-19.

- Vaccination of all those eligible including students 12+, staff, and educators.
- Encourage school distancing while indoors, additional recess options, and staggered lunch times.
- Equip your child with a comfortable mask for use indoors, regardless of vaccination status. Cloth masks should be washed regularly. Be sure your child's mask fits well, but does not cause abrasions or cuts into skin.
- Equip your child with hand sanitizer and review times for handwashing. Review best practices for handwashing 20 seconds (Happy Birthday song) and warm soapy water.
- Remind children to avoid sharing food or drinks or other personal items.

It is critical children who become ill remain home while sick. If symptoms of COVID-19 are present, testing is encouraged and is accessible through your healthcare provider or a Testlowa kit - <u>Test Iowa</u>. Test kits may be used at home and dropped off for quick results. Children who test positive or who become ill may return to school 10 days after onset with improved symptoms and no fever reducing medication for 24 hours.

If your child is exposed to COVID-19, consider quarantine. Short-term, virtual schooling options may allow your child to continue attending class while completing the quarantine period. The



quarantine period is 10 days from the date of exposure. This time period could be shortened if your child is tested on or after Day 5 following exposure and has a negative test.

### How do I know when to take extra precautions?

While in a status of "high transmission", the risk of community spread of COVID-19 is very high. Therefore, elevated precautions are recommended. Follow your local public health agencies for COVID-19 reports –

<u>Situation Reports and Daily Briefings - Polk County Iowa</u> <u>Iowa COVID-19 Information - Case Counts</u>

When cases rise, consider limiting interactions outside your home, resume mask wearing in public, and get tested 3-5 days following exposures.

Pay attention to changes in variant COVID-19 strains as future strains might affect children differently. Be sure to use reputable sources of information – government or healthcare sites should be accessed before any media or social media sources.

## How do I support my school in enacting protections for children?

Encourage your school to follow CDC guidance to the extent possible. While schools may not be resourced to contact trace or track specific illness, individual parent actions have a big impact. Contacting legislators and other political leaders may also be effective in resuming school-based control.

#### **Additional Resources**

**How do I know masks work?** The following is an extensive list of research articles evidencing the effectiveness of mask use.

- Schools can reopen safely when masks are used with social distancing and ventilating rooms
- Mask wearing by both those who are potentially transmitting infection and by those uninfected appears to provide the most protection from SARS-CoV-2, with surgical masks providing slightly better protection than cotton masks
- Societal norms and government mask wearing policies are effective mitigation strategies to reduce the spread of COVID-19. Early adoption greatly reduced mortality
- Cloth masks alone, but not face shields, were effective at reducing respiratory droplet spread. Surgical masks or N95 respirators were much more efficient. Data support recommendations to wear masks and maintain physical distance from others to preventSARS-CoV-2 spread
- Masking with a cloth mask over a surgical mask provides greater than 97% protection
- Risk compensation and face mask mandates during the COVID-19 pandemic
- The effects of wearing facemasks on oxygenation and ventilation at rest and during physical activity
- Efficacy of universal masking for source control and personal protection from simulated cough and exhaled aerosols in a room



• Mask-wearing has a substantial impact on outbreak control. Shelter-in-place strategies remain an important public health intervention, amid ongoing outbreaks

# How do I know vaccination is safe for my child?

COVID-19 vaccination with Pfizer is approved by the FDA for children 12 and older. Few, rare adverse outcomes were identified by the Advisory Committee for Immunization Practices, a clinical advisory group tasked by CDC with evaluating safety and efficacy of vaccine data and forming recommendations for practice. The following articles demonstrate effectiveness of vaccination in children and adolescents 12+and rare adverse reactions to watch for following vaccination. Concerns regarding vaccination should be discussed with your child's healthcare provider.

- COVID-19 Vaccines for Children and Teens | CDC
- Safety, Immunogenicity, and Efficacy of the BNT162b2 Covid-19 Vaccine in Adolescents | NEJM
- Evaluation of mRNA-1273 SARS-CoV-2 Vaccine in Adolescents | NEJM
- The Advisory Committee on Immunization Practices' Interim Recommendation for Use of Pfizer-BioNTech COVID-19 Vaccine in Adolescents Aged 12–15 Years — United States, May 2021 | MMWR
- <u>Use of mRNA COVID-19 Vaccine After Reports of Myocarditis Among Vaccine Recipients: Update</u> from the Advisory Committee on Immunization Practices — United States, June 2021 | MMWR (cdc.gov)
- Reactions and Adverse Events of the Pfizer-BioNTech COVID-19 Vaccine | CDC