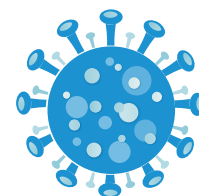

Checklist to support schools re-opening and preparation for COVID-19 resurgences or similar public health crises





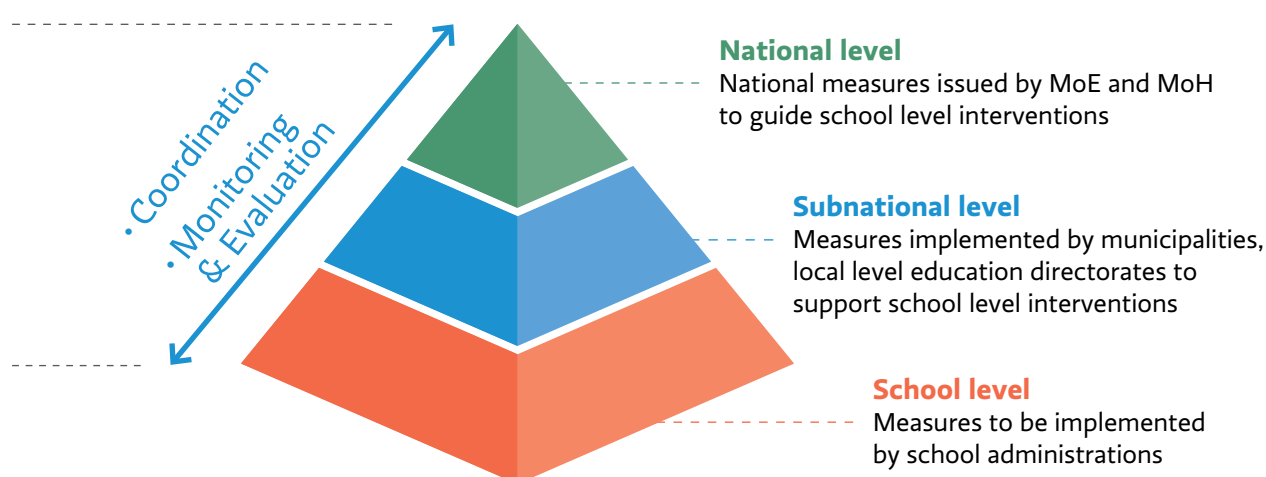
Multi-level coordination

Successful uptake of the measures taken will depend on the level of adherence to protective measures, as outlined in *Considerations for school-related public health measures in the context of COVID-19*. By engaging key concerned local stakeholders, it is expected that these measures will not only be contextualized but will also help ensure local ownership and sustainability. In this way, the checklist aims to enhance both compliance with and adherence to the existing COVID-19-related public health and social measures targeting children under the age of 18 years in educational settings.¹⁵ Through a participatory, co-designed approach engaging key stakeholders, the actions outlined will help enhance responsiveness and sustain the uptake of measures based on social and cultural contexts.

Structure

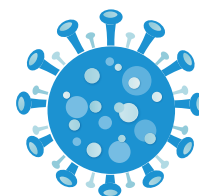
The checklist includes 38 essential actions for the safer reopening of schools and preparation for potential COVID-19 resurgences. These actions divide the responsibilities of decision-makers and stakeholders at national, subnational and school levels; the actions are mutually supportive and require timely coordination at all levels (see Figure 1).¹⁶

Multi-level coordination for school responses to COVID-19



¹⁵ Considerations for school-related public health measures in the context of COVID-19. Geneva: World Health Organization; 2020 (<https://apps.who.int/iris/rest/bitstreams/1275007/retrieve>, accessed 7 December 2020).

¹⁶ The division of responsibilities between the different levels of decision-making will vary from country to country and will need to be adapted to national and local contexts.



Actions at national level (eight actions)

National actions by the Ministry of Education (MoE) and the Ministry of Health (MoH) should guide school-level interventions. The suggested actions should be implemented on the basis of feasibility and should be adapted to the specific national context and governance systems.

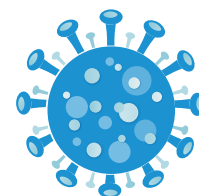
Phases	Essential actions	✓
REOPENING	<ol style="list-style-type: none"> Issue regularly updated national guidance on school reopening (or necessity to close) together with contingency planning based on local transmission rates to support decision-making at national and local levels. The guidance should address: <ul style="list-style-type: none"> Continuous risk assessment including: <ul style="list-style-type: none"> the latest local epidemiological situation; general health and well-being of children, teachers and other school staff including risk of exposure to infection in school settings; the capacity of educational institutions to adapt their systems to operate safely; equity and the impact of school closures on educational loss; consideration of the range of other public health measures implemented outside of schools. Infection-prevention measures including hygiene and daily practices at schools, environmental cleaning, contact minimization with unwell individuals, physical distancing based on age considerations, ventilation, age-appropriate wearing of masks in schools when physical distancing cannot be ensured, school transportation and meals. Behavioural aspects. Curriculum expectations. Responses in line with national and local public health protocols. Monitoring and surveillance. Contingency planning. 	
	<ol style="list-style-type: none"> MoE in collaboration with MoH to issue a national policy on wearing of masks in schools (and provision of masks) based on <i>WHO/UNICEF Advice on the use of masks for children in the community in the context of COVID-19</i>. 	
	<ol style="list-style-type: none"> MoE and MoH to issue school policies and guidelines on physical distancing, hand hygiene and environmental cleaning based on <i>Considerations for school-related public health measures in the context of COVID-19</i> and IASC <i>Interim guidance for COVID-19 prevention and control in schools</i>. 	
	<ol style="list-style-type: none"> MoE in collaboration with MoH to adapt and disseminate health education messages on the disease and recommended good health behaviours. 	
PREPARING FOR COVID-19 RESURGENCES	<ol style="list-style-type: none"> Update national plan on disease outbreak preparedness and response based on best practices and lessons learned from the COVID-19 pandemic. 	
	<ol style="list-style-type: none"> Update guidance on remote education support in the eventuality of an increased number of cases and moving to an online learning environment. 	
	<ol style="list-style-type: none"> Establish a continuity plan for vaccination programmes, mental health programmes and psychological support for students, teachers and school staff during school discontinuity. 	
	<ol style="list-style-type: none"> Establish a committee for continuous monitoring and evaluation of the situation in schools in collaboration with the education sector. 	

Actions at subnational level (nine actions)

Actions implemented through multi-stakeholder coordination include support from municipalities and local education directorates to school-level efforts to implement and sustain protective measures. The suggested actions should be implemented on the basis of the feasibility and should be adapted to the contexts at subnational level.

Phases	Essential actions	✓
REOPENING	1. Local public health authority to collaborate with school authorities to ensure epidemiological surveillance in schools in accordance with existing case investigation protocols.	
	2. Ensure that school response protocols are in accordance with the public health department recommendations or national/local policies and guidelines.	
	3. Support and sustain critical needs , including school feeding and water, sanitation and hygiene (WASH) facilities; and sustain essential equipment (e.g. soap, alcohol-based hand-rub, masks and other personal protective equipment (PPE) for staff involved in cleaning and disinfection) ¹⁸ to ensure they are available for students, teachers and school staff, as appropriate.	
	4. Ensure that WASH facilities are operational in learning spaces prior to and during school openings in accordance with national guidance (e.g. soap, alcohol-based hand rub, hand washing stations), including cleaning and disinfectant supplies. If schools have been closed for prolonged periods of time, water systems should be flushed and chlorinated to prevent water-borne diseases or environmental contamination by potential pathogens after school reopening. (See Annex A. Supply and cleaning recommendations for more information).	
	5. Disseminate health education messages on risk and protective behaviours, including messages on safe school reopening measures targeted at students and their families to ensure adherence to measures and high student return rates. (See Annex B. Contextualization, Dissemination and Implementation for more information).	
PREPARING FOR COVID-19 RESURGENCES	6. Local authorities to review and adapt contingency plans for disease outbreak preparedness and response for schools, and to ensure essential school-based health services during school closure (e.g. MPHSS, menstrual hygiene management, immunization).	
	7. Contingency plans are available to support schools' food distribution programmes to vulnerable population groups in case of school closures and are disseminated with related standard operating procedures.	
	8. Contingency plans to support schools in re-establishing WASH services in case of school closure are available and disseminated with related standard operating procedures.	
	9. An emergency response team is set up to coordinate the contingency plans for disease outbreaks between national, subnational, local and school authority levels.	

¹⁸ The minimum recommended PPE is **rubber gloves, impermeable aprons and closed shoes**. Eye protection and medical masks may also be needed to protect against chemicals in use or if there is a risk of splashing. (For more information, see: <https://www.who.int/publications/i/item/cleaning-and-disinfection-of-environmental-surfaces-in-the-context-of-covid-19>, accessed 7 December 2020).

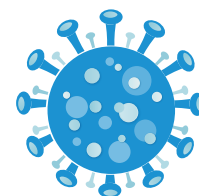


Actions at school level (21 actions)

Actions should be implemented by school administrations through co-design and participatory approaches. The suggested actions should be implemented on the basis of feasibility and should be adapted to the specific contexts at the individual school level.

Phases	Essential actions	✓
REOPENING	<p>1. Set up a school support team (SST) appropriate to the local context – e.g. it may be composed of teachers, school administrators, students and parents/caregivers – to assess the feasibility of implementing protective measures before school reopening based on the recommendations of national and subnational/local authorities. Measures could include, for instance:</p> <ul style="list-style-type: none"> • assessing school premises for the capacity to maintain a distance of at least 1 metre: a) outside classrooms for both students (all age groups) and staff; and b) inside classrooms, based on age considerations and local COVID-19 transmission intensity; • assessing the availability and appropriateness of existing handwashing facilities, taking account of social, economic and cultural contexts; • assessing the needs of students living with health conditions and special needs; • developing options: a) to prevent the mixing of students from different age groups and classes; and b) to reduce the risk of transmission by limiting the number of students and staff in contact with each other to those within respective groups/years. Options might include: <ul style="list-style-type: none"> - expanding timetables, with some students and teachers attending in the morning and others in the afternoon or evening; - staggering recesses/breaks; - staggering lunch break (if difficult, an alternative is to eat lunch at the desk or to alternate when and where classes take lunch); - establishing an order for each class to enter or leave the building/classroom; - setting up different entrances for different classes. <p>For detailed recommendations, consult: WHO Considerations for school-related public health measures in the context of COVID-19.</p>	
	<p>2. The SST to revise personnel and attendance policies: a) to take account of health-related absences and persons with pre-existing health conditions; and b) to support remote and blended teaching approaches.</p>	
	<p>3. The SST: a) to review the feasibility of implementing physical distancing in and outside classrooms; and b) to identify areas where the measures cannot be implemented (e.g. in certain classrooms and/or with certain student grades/years). Ensure strict wearing of masks if the use of these places cannot be avoided.</p>	

Phases	Essential actions	✓
REOPENING	<p>4. The SST to promote adherence to hand hygiene and respiratory etiquette. This includes identifying points at which to place hand hygiene equipment at school and classroom entrances, on all floors, and in toilet and canteen facilities, and creating schedules for frequent hand hygiene. Install supplementary handwashing facilities where possible to close existing gaps.</p>	
	<p>5. The SST to promote the wearing of masks among students, teachers and school staff, in accordance with national and local guidance for mask use, including by age and especially where physical distancing cannot be achieved. This should include use of nonmedical fabric masks, and medical masks under certain conditions (e.g. for immunocompromised children or those with other diseases, in consultation with the child's medical provider). Mask use should adhere to national and local policies on wearing masks and should be in accordance with WHO/ UNICEF recommendations (see WHO Advice on the use of masks for children in the community in the context of COVID-19). Students should be educated on the proper use of masks and the disposal of masks after use. Note that teachers and school staff may be required to wear masks if they cannot guarantee the 1 metre distance or if they are in areas experiencing established community transmission.</p>	
	<p>6. School administrators and teachers to ensure adequate ventilation, using natural ventilation in classrooms, canteens and other rooms (see Q&A: Ventilation and air conditioning in public spaces and buildings and COVID-19).</p>	
	<p>7. The SST to develop and disseminate guidance on protection measures through communication materials such as notes, posters, flyers.</p>	
	<p>8. The SST to instruct maintenance staff to reorganize the school layout, including classrooms, to enable physical distancing and hygiene measures based on the guidance, including cleaning and disinfecting the school environment at least once a day (including cafeteria, gym and sports facilities). Particular attention should be paid to water and sanitation facilities and to surfaces that are frequency touched (e.g. railings, desks, lunch tables, sports equipment, doors, window handles, light switches, toys, teaching and learning materials, play equipment).</p>	
	<p>9. The SST to ensure adequate and sufficient supplies of soap, hand sanitizer and masks and to avoid potential stockouts.</p>	
	<p>10. The SST to conduct daily checks to ensure compliance with measures.</p>	
	<p>11. Teachers to conduct regular health education and pedagogical sessions to promote healthy and protective behaviours, and to address and counter rumours and false and misleading information, as well as COVID-19-related stigma.</p>	



Phases	Essential actions	✓
REOPENING	<p>12. School administration to engage with students, parents and staff to ensure acceptance of the school's protective measures, including when dropping off and picking up children from schools within and outside the school premises.</p>	
	<p>13. Raise awareness among staff and students of the importance of self-reporting any symptoms. The most common symptoms are fever, dry cough and fatigue; however, refer to https://www.who.int/emergencies/diseases/novel-coronavirus-2019/question-and-answers-hub for a comprehensive list of symptoms. Follow the rules for quarantine and self-isolation, as decided by national or local health authorities. More information can be found at https://www.who.int/publications/i/item/WHO-2019-nCoV-Schools_transmission-2020.1.</p> <p>Once a case is detected in the school, the following should apply:</p> <ul style="list-style-type: none"> > A representative of the school will be asked to investigate when the first confirmed COVID-19 case was identified in at least one person who attended or worked in the school during the infectious period. Cases should be isolated and contacts quarantined in accordance with national public health guidance. > The school should provide a list of all students (by grade, class, group activities) and staff (teachers, medical, administrative, other) to the investigation team. Class planning should be provided for students identified as close or casual school contacts. > All information provided to the investigation team, either by the school or by any of the persons involved, must be stored securely and confidentiality must be ensured at all times. > An investigation team working with the public health authority will contact all known close and casual school contacts of a primary case(s) identified by the school and invite them to participate in the investigation. > Identified school contacts should report to the relevant health authorities any signs or symptoms compatible with SARS-CoV-2 infection, in accordance with local protocols for contact tracing and management. > Any contact with clinical symptoms within 14 days of the last exposure/contact with the primary case(s) should be considered a suspected case and should therefore be managed according to national/local scase management protocols. > Contacts who are found to be infected with SARS-CoV-2 should be reclassified as cases and followed up as cases. 	
	<p>14. A policy of "staying at home if unwell" is enforced for students, teachers and school staff with symptoms and school sick leave policies are revised accordingly.</p>	
	<p>15. School health staff to keep a record of students' health status and development, including immunization checks to prevent outbreak-prone vaccine-preventable diseases (e.g. measles) and report to the school administration.</p>	

Phases	Essential actions	✓
<p>PREPARING FOR COVID-19 RESURGENCES</p>	<p>16. The SST to disseminate information on hygiene and cleaning protocols to school staff and students.</p>	
	<p>17. School administration to re-assess and plan for additional staff required to implement adapted teaching methods (e.g. smaller groups, shifts) and enhanced cleaning practices in schools.</p>	
	<p>18. School administration, teachers, students, parents/caregivers to identify measures for the continuation of school feeding and school-based health services (e.g. MHPSS, menstrual hygiene management, immunization).</p>	
	<p>19. School administration to inform and update students, staff and parents about current measures adapted to the evolving situation.</p>	
	<p>20. School administration to set up training sessions on distance learning, safety and cleaning, and disease outbreak prevention, preparedness and response measures.</p>	
	<p>21. School administration to provide training and learning materials/ platforms for school staff and teachers to deliver (culturally sensitive and age-appropriate) messages, activities and lessons to prevent and control disease outbreaks in schools.</p>	



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