

Updated CDC Guidance for Schools

By Education Minnesota

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The CDC released new [guidance](#) for the safe operation of schools and early care and education programs on Aug. 11, 2022. MDE has not released any separate guidance, but links to the CDC materials on its website. The MDH website also links to the CDC materials.

The main changes to the new guidance are:

- Removed the recommendation to cohort.
- Changed recommendation to conduct screening testing to focus on high-risk activities during high COVID-19 Community Level or in response to an outbreak.
- Removed the recommendation to quarantine, except in high-risk congregate settings.
- Removed information about Test to Stay.
- Added detailed information on when to wear a mask, managing cases and exposures, and responding to outbreaks.

1. What does this mean for members?

At this point, the new guidance is a recommendation, which means it is not binding or required. However, you have a right to a safe work environment, and whether your district is complying with this guidance will be one way of assessing whether you have one. You should reach out to your local leaders and field staff regarding school procedures on these issues.

2. Is this guidance required by the state?

MDE is currently offering these as best practices. However, schools have a general duty to provide a safe workplace, and failing to follow these guidelines may violate OSHA.

3. Why can't the state require masks in schools as they did during last school year?

The mask mandate and other required mitigation measures for schools came from Executive Orders that Gov. Tim Walz had authority to issue under emergency powers that expired on July 1, 2021. The governor would need to declare another peacetime emergency or gain legislative approval to reinstate a mask mandate or other COVID mitigation protocols in schools.

4. What are the current recommendations regarding masking in schools?

The CDC recommends universal masking in schools and ECE programs when the [COVID-19 Community Level](#) is high. It recommends masking in healthcare settings, including nurses' offices, regardless of the community level. For those who choose to wear a mask regardless of the community level, the CDC advises districts to support that choice, and recommends that they develop “flexible, non-punitive policies and practices” regarding masking by choice.

Because mask use is not recommended for children younger than 2 and mask use may be difficult for very young children or for some children with disabilities, ECE programs and K-12 schools may need to consider other prevention strategies—such as improving ventilation and avoiding crowding—when the COVID-19 Community Level is medium or high or in response to an outbreak. K-12 schools or ECE programs may choose to implement universal indoor mask use to meet the needs of the families they serve, which could include people at risk for getting very sick with COVID-19.

5. What if my school is not following the state's guidance?

Please work with your local leaders and field staff to advocate for the implementation of this guidance. You can also [contact MNOSHA](#) at the Minnesota Department of Labor and Industry. To the extent possible, and where it would not impact student privacy, we recommend taking pictures showing the lack of mitigation measures.

Members should contact their Education Minnesota field staff when concerns arise. Knowing the extent and number of districts and charter schools that are not following the guidance helps Education Minnesota advocate for workers in individual districts, as well as relevant state agencies.

6. Can we demand to bargain over the recommendations?

Yes, the new guidance implicates staff safety, which is a term and condition of employment. Education Minnesota has previously published [bargaining resources](#) for members considering MOUs for the upcoming school year, or including similar language in collective bargaining agreements that most locals are beginning to negotiate.

7. What if my district refuses to bargain?

Contact your field staff as soon as possible if your district refuses to bargain. Filing an unfair labor practice charge against a district that refuses to bargain is one option, and we would like to help locals find the quickest and most efficient way to ensure that their employer is bargaining in good faith over workplace safety.

8. How do I file an OSHA complaint?

MNOSHA does require affected employees to file their own reports, but Education Minnesota can provide support to the extent possible. You can [contact MNOSHA](#) by phone or email.

9. I think my students need to see my face and I don't want to wear a mask. Can my district require that I wear one?

Yes. Individual districts are free to require that staff, students and other employees wear masks.

10. Can my district require me to be vaccinated?

Yes, unless you have a disability that prevents you from getting vaccinated or a sincerely held religious exemption. The new CDC guidelines recommend staying up to date on vaccinations. Schools and ECE programs should promote equitable access to vaccinations. Creating a mandatory requirement of this nature is a term and condition of employment, and districts will therefore need to negotiate the imposition of such a requirement with employee unions. Education Minnesota has created a [sample MOU](#) for vaccine requirements that may help to speed up those discussions.

11. I'm high risk and the new variants make me nervous. May I teach remotely this next school year?

This will depend on the number of online learners, your role and how the district is implementing online learning. If you have a disability and are requesting accommodations, this may be one to consider. Other possible accommodations include requiring masking in your classroom and continuing to provide air filters or barriers. We recommend requesting a remote role as soon as possible and working with your local to try to secure a remote position. However, districts may not be required to provide remote work for staff. Situations differ and you should contact your field staff if you need assistance in these discussions.

12. What should the district do if a student or staff member comes to school while experiencing symptoms or starts experiencing symptoms while at school?

Students or staff who are experiencing symptoms should be asked to wear a well-fitting mask or respirator while in the building and be sent home and encouraged to get tested if testing is unavailable at school. Schools and ECE programs can offer diagnostic testing for students and staff with symptoms of COVID-19 or who were exposed to someone with COVID-19 in the K-12 or ECE setting, or refer them to a community testing site, healthcare provider, or to use an at-home test. Symptomatic people who cannot wear a mask should be separated from others as much as possible. Children should be supervised by a designated caregiver wearing a well-fitting mask or respirator until they leave school grounds.

13. If a student or staff person contracts COVID-19, can the district require them to quarantine? If so, for how long?

Yes, isolation can be required. Schools and ECEs should develop mechanisms to ensure that people with COVID-19 isolate away from others and do not attend school until they have completed isolation. The CDC recommends that people with COVID-19 [isolate](#) for five days, and wear a mask when around others for an additional five days. If a person has access to antigen tests and has two sequential negative tests 48 hours apart, they can stop wearing the mask before

the 10-day period ends. People who are not able to wear a well-fitting mask or respirator should either isolate for 10 full days or follow the antigen test-based strategy to determine when they can safely return to the school or ECE setting without a mask, continuing to isolate until testing criteria have been met.

14. Do I have to quarantine if I've been exposed to COVID-19?

The CDC no longer recommends quarantining except in certain high-risk congregate settings such as correctional facilities, homeless shelters and nursing homes. Schools and ECE centers are generally not considered high-risk congregate settings. People in schools and ECE centers who are exposed to COVID-19 should wear a well-fitting mask and get tested. K-12 school and ECE administrators can decide how to manage exposures based on the local context and benefits of preserving access to in-person learning. Accommodations may be necessary for exposed people who cannot wear a mask or have difficulty wearing a well-fitting mask. Schools and ECE programs can also consider recommending masking and/or testing for a classroom in which a student was recently exposed who is unable to consistently and correctly wear a mask.

15. What resources are available from the state or federal government to implement COVID testing for students and staff?

The state of Minnesota is providing at-home test kits to K-12 schools for use by staff, students and their families at no cost. Fulfillment of test orders depends on available supply. MDH does not guarantee test orders will be fulfilled.

The CDC's new operational guidance no longer recommends routine screening in K-12 schools, but it also states that schools in areas with high COVID-19 Community Levels can consider screening testing strategies for their students and staff for high-risk activities and for key events and times of the year, and in the event of an outbreak. It also states that schools and ECE programs can offer diagnostic testing for students and staff with symptoms of COVID-19 or who were exposed to someone with COVID-19 in the K-12 or ECE setting, or refer them to a community testing site, healthcare provider or to use an at-home test.

16. Will districts, employees or families have to pay for the cost of these tests?

Districts may [order](#) tests from MDH at no charge.

17. What does the CDC recommend regarding testing in schools?

The CDC no longer recommends screening testing. However, districts and ECEs may choose to have testing programs. The CDC recommends that in any screening testing program, both vaccinated and unvaccinated people should be included. However, the EEOC has revised its earlier guideline that all screening testing met the standards under the Americans with Disabilities Act for medical testing. The EEOC now advises that screening testing must meet the business necessity test standard, which is determined by factors such as the level of community transmission, the vaccination status of employees and other similar considerations. It is unlikely

that school districts will be able to *mandate* that all unvaccinated students participate in regular testing, since students will need consent from a parent or legal guardian. Schools will need to seek their own counsel regarding the legality of mandating testing for students.

We would consider required testing of staff a mandatory subject of bargaining, and suggest that locals work on an MOU that specifies:

- Who will administer the tests and how often.
- Whether or not the tests will occur on work time (staff would need to be paid for time spent getting tested outside the workday).
- How the school district or charter school will maintain the privacy of test results.