



COVID-19

To maximize protection from the [Delta variant](#) and prevent possibly spreading it to others, get vaccinated as soon as you can and wear a mask indoors in public if you are in [an area of substantial or high transmission](#).

Parents and Caregivers – What Is Your School Doing to Protect Your Child from COVID-19?

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[Print](#)

Children are getting sick from COVID-19. Children are also having to go to the hospital at an increased rate due to rising rates of transmission of the Delta variant, especially in communities with low vaccination rates. CDC recommends all schools require universal masking and use additional prevention strategies regardless of how many students, educators, and staff are currently vaccinated. Masks are critical, but masks alone are not enough. Along with promoting vaccination for educators, staff, and students 12 years and older, schools must use several strategies at the same time to keep everyone as safe as possible. Examples of these strategies include improving ventilation and ensuring physical distancing. Federal resources are available to support these efforts. The following provides a set of questions you can ask your school to learn more about their COVID-19 precautions. This page also includes answers to Frequently Asked Questions (FAQs) CDC is hearing from parents and caregivers.

Do you want to know what your school is doing to keep your child safe?

As a parent or caregiver, you can and should learn more about how your school is using the [CDC guidance](#) to help slow the spread of COVID-19. For detailed information, check with your school for procedures they have in place to help keep students, educators, staff, and visitors safe. It is also extremely important right now to teach and reinforce healthy behaviors for your children. Talk to them about the importance of masking, distancing, and frequent handwashing so that they can make choices that help keep them safer at school.

Here are some questions you can ask your school to learn more about their COVID-19 precautions:

1. What prevention strategies are you currently using to keep my child safe in school?
2. How will you keep parents and caregivers updated on any changes in the school's prevention strategies?
3. How and when are you updating your protocols for COVID-19?
4. Will you be hosting information sessions about COVID-19 vaccination for parents, guardians, and eligible students?
5. Will you offer COVID-19 vaccination at the school?
6. Are you requiring teachers, staff, or students 12 and older to be vaccinated against COVID-19?
7. Will you be providing screening testing regularly?
8. What happens if my child's teacher gets sick from COVID-19?
9. Are there procedures in place for contact tracing?
10. What is your quarantine policy if my child comes into close contact with someone who has COVID-19?
11. Are you allowing visitors on campus? And if so, what procedures are you using for guests?
12. Are you using outdoor spaces for learning, extracurricular activities, or mealtime?

13. What are you doing to keep students safe when they are eating meals?
14. What are my remote learning options if my child has to quarantine or isolate?

Here are some responses to FAQs we are hearing from parents and caregivers that you may find useful:

General

1. Why does CDC guidance keep changing?

- CDC guidance changes because COVID-19 keeps changing and what we know about it continues to evolve. COVID-19 is still a new disease that CDC and others continue to study in order to provide the best guidance possible. CDC gives guidance based on the latest science to prevent and control disease, injury, and disability. All recommendations are based on available [scientific data](#) including outbreak investigations and tracking cases of COVID-19 in children. These investigations show, for example, that the Delta variant behaves differently from past variants of COVID-19. This means guidance will change as CDC learns more about what works best to reduce risk of COVID-19.

2. How can I find out if my school is doing anything to protect my child?

- Ask your school district and school to give written protocols or a webinar for parents to talk through the school's plans and protocols. They should be able to describe COVID-19 prevention strategies along with steps to take when a student, educator, or staff member has been exposed to someone with COVID-19, has [symptoms](#) of COVID-19, or tests positive for COVID-19. This information should be provided in languages and formats that are accessible to all parents and caregivers.

3. Is the Delta variant more dangerous to me and my child?

- The Delta variant spreads very easily and is more than two times as contagious as previous variants. Children are also being admitted to hospitals at an increased rate as Delta has become the most common variant in the U.S., especially in communities with low vaccination rates. Vaccinated people can be infected and spread COVID-19 to others, known as "breakthrough infections," but are much less likely to become seriously ill if this happens. However, unvaccinated adults at all ages are much more likely to spread COVID-19 and to be seriously ill and hospitalized than people who are vaccinated. It helps unvaccinated children to have high vaccination coverage among people around them as much as possible.

Vaccines

4. Why is it important for me and my child to get vaccinated for COVID-19?

- COVID-19 [vaccines are safe](#) and effective at preventing severe illness and death from COVID-19. CDC monitors for any health problems that happen after vaccination. Getting a COVID-19 vaccine is one of the best ways to slow the spread of COVID-19. Many schools serve children under the age of 12 who are not currently eligible for vaccination, so K-12 school administrators must use other prevention strategies to prevent COVID-19 from spreading. Examples of these strategies include requiring masks and improving ventilation, along with vaccination of teachers and staff.
- The known and potential benefits of COVID-19 vaccination outweigh the known and potential risks. There have been very limited reports of rare conditions including [myocarditis or pericarditis](#), Guillain-Barré Syndrome, and thrombosis with thrombocytopenia syndrome (TTS). Risk of severe illness is still much greater for people who are not vaccinated against COVID-19.
- No evidence shows that COVID-19 vaccination causes fertility problems. COVID-19 vaccination is recommended for all people aged 12 years and older, including people who are [pregnant, breastfeeding, trying to get pregnant now, or might become pregnant](#) in the future. If you have concerns about COVID-19 vaccination, talk with your child's doctor, your doctor, nurse, or clinic.

5. Can the school ask me or my child about my child's COVID-19 vaccination status?

- It depends—[state laws](#) establish vaccination requirements for school children, so policies or practices related to providing or receiving proof of COVID-19 vaccination should comply with all state and local regulations. State laws also establish the enforcement of school vaccination requirements and exemptions. Schools that plan to ask about COVID-19 vaccination status should use standard protocols to collect and secure this and other immunization or health status information from students. Data collection should align with relevant regulations of the Family

Educational Rights and Privacy Act (FERPA), the Health Insurance Portability and Accountability Act of 1996 (HIPAA) regulations, and applicable state privacy laws.

6. Can schools be open for in-person learning if not all teachers are vaccinated?

- Yes, but this increases risk within the school. The most important and effective strategy we have right now to help schools stay open is having high levels of vaccination among students ages 12 years and up, educators, staff, and family members. Using multiple prevention strategies at the same time remain critical to protecting everyone, including students, educators, and staff. Prevention strategies include universal masking, physical distancing, and ventilation.

Masks

7. Do masks work?

- Yes, masks work. They limit the spread of germs from one person to another by blocking potential virus particles from entering the air. They also help protect the person wearing the mask because the mask can help block that person from breathing in potential virus particles in the air. For masks to work best, students, teachers, and staff need to [wear a well-fitting mask consistently and correctly](#). Consistent and correct mask use is especially important indoors and in crowded settings when physical distancing is difficult. CDC recommends all schools require universal masking.

8. Should my child wear a mask to school if the school has made it optional?

- Yes, masking indoors is one of the best ways to prevent the spread of COVID-19. It is highly recommended that students wear masks while inside school environments. Schools are not able to prevent your child from wearing a mask to protect him or herself even if mask-wearing is optional.

9. Does wearing a mask for a long time pose any risks to my child?

- No, wearing a mask does not increase risk from germs or bacteria, and does not increase carbon dioxide levels for children. It is important to [store your child's mask properly](#) and wash it regularly to keep it clean. Consider having your child bring more than one mask to school to easily replace a dirty or wet mask with a clean one.

10. Does my child need to wear their mask on the school bus?

- Yes, CDC issued an order on January 29, 2021, requiring masks on public transportation. [CDC's Order](#) applies to all public transportation, including school buses. Students and drivers must wear a mask on school buses, including on buses operated by public and private school systems, subject to the exclusions and exemptions in CDC's Order. Learn more [here](#).

11. What should I ask my school if they are saying masks are optional?

- Ask your school:
 - What prevention strategies are you using to reduce risk of spreading COVID-19? And how are you prepared to prevent or respond to an outbreak? Other prevention strategies include ventilation, distancing, hand hygiene, screening testing, and contact tracing, to help reduce the spread of COVID-19.
 - What are you doing to maintain physical distance between students, educators, and staff in the classroom? In situations when unmasking is essential, such as lunch time, there should be at least 6 feet of distance between all students, educators, and staff.
 - What are you doing to improve ventilation throughout the building? This should include bringing outdoor air into the building, enhancing ventilation systems, and using HEPA filters.
 - Are you using outdoor spaces for learning and mealtime? An outdoor space may allow for more distancing. Generally, masks don't need to be worn outside as long as students are not in crowded settings.

Testing and Contact Tracing

12. My school keeps talking about diagnostic tests and screening tests – what's the difference?

- *Diagnostic tests* are used to identify current COVID-19 infection and should be used if your child has any symptoms.
- *Screening tests* are used regularly to identify any unknown cases or cases without symptoms so that actions can be taken to quickly prevent further spread of COVID-19.

13. How does my child benefit from school-based testing?

- Testing is an important layer of prevention that can quickly identify people who have COVID-19 and potentially prevent an outbreak within the school. It is used to identify people with infection, including those with or without symptoms. By identifying infections early, schools can limit COVID-19 transmission and keep students in school for in-person learning, sports, and extracurricular activities.
- School-based testing can make it quick and easy to get your child tested, whether as part of routine screening testing, when they have symptoms, or have been exposed to someone with COVID-19. Some schools offer diagnostic testing and some offer both diagnostic and screening testing. Funds are available from the federal government to support testing in schools
- Testing locations in your community can be found at: <https://www.hhs.gov/coronavirus/community-based-testing-sites/index.html>

14. Why does my school test so often?

- Regular testing is a key tool to stop COVID-19 from spreading at school. Schools can decide how many students will be tested and how often based on what's happening in the community. If a school decides to test a percentage of the students every week, this does not necessarily mean that your child will be tested each week – they will be tested only if included as part of the percentage tested that week.

15. Will testing for COVID-19 cause my child pain?

- No, it will not. Acceptable ways to test for COVID-19 have expanded since the beginning of the pandemic. Most tests use a simple nasal swab, which goes inside the lower nostril like picking your nose, and others use saliva taken from the mouth. You can ask your child's school what method is used for their testing program so you can tell your child what to expect for their test.

16. How long will it take to get my child's test results?

- It depends on the test that the school uses. Some types of viral test results can be available in as little as 15 minutes, but other viral tests may take 24-48 hours.

17. What should I do if my child tests positive for COVID-19?

- Contact your school to allow for contact tracing if the test happened outside of school. Make sure to **isolate** your child immediately and **follow steps** to prevent the spread of COVID-19 in your household. This means your child should **not** go to school, socialize, or participate in any extracurricular activities, and you need to follow your school's instructions for **isolation**. Ask your school about virtual learning options and about their current policies for when your child can return to school.

18. If I test positive for COVID-19, can my child still go to school?

- If you or **anyone in your household tests positive**, your child should follow your school's guidance for quarantine. If your child also tests positive, they should **not** go to school, even if they are not showing symptoms. They should follow your school's guidance for isolation. Ask your school about virtual learning options during this time and for instructions on when your child can return to school.

Quarantine, Isolation, and Close Contacts

19. What is the difference between **quarantine** and **isolation**?

- You **quarantine** when you might have been exposed to COVID-19. This is because you might become infected with COVID-19 and could spread COVID-19 to others.
- You **isolate** when you are already infected with COVID-19 and have tested positive, even if you don't have symptoms. Isolation is used to separate people infected with COVID-19 from those who are not infected.

20. What does it mean if my child is identified by the school as a "close contact"?

- This means your child was exposed to someone with COVID-19. And when your child is identified as a close contact, your child needs to follow testing and **quarantine** guidance from your school. Quarantine is a very important public health tool used to stop many kinds of infectious diseases from spreading.

21. My child was identified as a close contact and is NOT fully vaccinated – what should I do?

- You should follow quarantine guidance provided by your school. CDC recommends a 14-day quarantine for unvaccinated close contacts before returning to normal activities, including in-person school and school activities. This is because your child can become infected with COVID-19 but may not develop the infection for up to 14 days. In fact, some data show that a person may spread COVID-19 before they show symptoms or even without symptoms.

- If your child develops symptoms at any point during quarantine, they need to get [tested](#) and [isolate](#) immediately. Be sure to notify your school if this happens and reach out to your healthcare provider.

22. My child was identified as a close contact and is fully vaccinated or has recovered from COVID-19 within the past 3 months from testing positive – what should I do?

- You should follow guidance for fully vaccinated close contacts provided by your school. CDC recommends that [fully vaccinated](#) people get tested after being exposed and monitor for any symptoms.
- If your vaccinated child develops symptoms at any point, they need to get [tested](#) and [isolate](#) immediately – be sure to notify your school if this happens and reach out to your healthcare provider.

23. Should my child stay home if they show COVID-19 signs or symptoms?

- Yes, they should stay home. They should also get [tested](#) for COVID-19. It is very important that your child not attend in-person school when they have signs and symptoms. Ask your school about remote learning options during quarantine and isolation. With symptoms, your child should also not gather in public places, play sports, participate in extracurricular activities, or socialize in-person with people who do not live in your household. This is also true if your child is showing any symptoms of other respiratory illnesses, such as the flu.
- Getting tested for COVID-19 when you notice these types of signs and symptoms will also help with rapid contact tracing and prevent possible spread at school. If your child tests positive, they should still stay home and away from others for 10 days following the date that their symptoms started. This is because people can spread COVID-19 for a full 10 days from when they develop symptoms, even if they are feeling better. Let your school know and ask about their policies to determine when your child can return to in-person school.

24. My school is allowing students who were identified as close contacts to come into school – is this safe?

- CDC does not have enough evidence at this time to support this approach (sometimes called “modified quarantine”). CDC continues to make recommendations based on what evidence shows is most effective at preventing transmission.
- CDC does not recommend that close contacts are allowed to be inside the school. If your school is allowing close contacts to be inside the school, it is even more critically important that they use layered prevention strategies like vaccination, masking, ventilation, physical distancing, and testing. A close contact attending school should not hang out with friends in-person or play sports during quarantine, and they should always wear a mask in public indoor settings, including school.

25. What should I do if my child has symptoms at school?

- You need to pick up your child as soon as possible and arrange for a COVID-19 test. It is very important that your child not attend in-person school when they have signs and symptoms.

Sports and Activities

26. Can my child safely participate in extracurricular activities and sports?

- It depends – extracurricular activities that involve heavier breathing will be higher risk without masks, without ventilation, and without physical distancing. Masks should be worn to the extent possible during indoor sports and other activities that meet indoors, such as band, choir, theater, and school clubs. Your child should get vaccinated as soon as eligible and should not participate in sports or activities if they are experiencing COVID-19 symptoms. Your child should also wear a mask outdoors if participating in high contact or crowded activities. CDC recommends that schools cancel sports and unmasked extracurricular activities or make them fully virtual if your school is an area of high [community transmission](#).
- Your child’s safety depends on whether the school uses layered prevention strategies and whether the school has clear rules for students who have COVID-19 or have been exposed. This is especially important during activities where heavier breathing occurs. It is safest to participate in these types of activities when everyone is fully vaccinated. Schools can have a “test to play” or vaccination requirement for participating to keep your child safe. Physical distancing should be used at sporting events (such as fields, benches/team areas, locker rooms, spectator viewing areas, spectator facilities/restrooms) along with signage about wearing masks for all guests to see.

27. Can my child participate in recess and physical education?

- Yes, these active times during the school day help children learn and achieve as well as support their social, emotional, and mental health. Being outside is better than indoors, but when physical education and recess are held indoors, it is important to have good ventilation and for everyone to wear masks and maximize distance as much as possible. Ask your school about their ventilation, mask, and distancing policies during recess and physical

education to stay informed about the risk to your child. In general, students, educators, and staff do not need to wear masks when participating in recess and physical education outdoors, unless they are going to be doing high contact or crowded activities.

28. Is it ok for my child to use the playground?

- Yes, more is known about how long the virus stays on surfaces compared with last year. Kids can safely use playground equipment with just daily [cleaning](#). Students, educators, and staff should [wash their hands](#) before and after use of any playground equipment. Cleaning and disinfection between every use of playground and physical education equipment is not needed.

29. Can my child share objects (such as art supplies, sports equipment) with other students?

- Yes, but your child should wash their hands or use hand sanitizer before, during, and after use of any shared materials. Cleaning and disinfection between every use of art supplies, sports equipment, music sheets, etc. is not needed.
- Keeping hands clean and regularly cleaning surfaces helps prevent a variety of diseases and infections. Handwashing stations are recommended for students, educators, and staff to access whenever they may need to remove their mask, while sharing objects, after any coughing or sneezing, before and after eating, and after using the restroom.

Mealtime

30. Are there ways to keep my child safe during mealtime?

- Yes, ask your child's school about their mealtime protocols. Schools should require masks and distancing in food service lines, keep students at least 6 feet apart while eating, have students put their masks back on after eating, and do everything possible to improve ventilation, which includes using outdoor space. If students are not spaced 6 feet apart with proper ventilation, this is a high-risk situation because masks are removed while eating.

Ventilation

31. My child says the school is opening windows during the day – does that reduce the risk of COVID-19 spreading?

- That is one of many ways to [improve ventilation](#). Opening windows brings fresh air into the classroom and can reduce the number of virus particles in the air as long it does not become a safety or health risk to the students. Moving classes outside when weather permits, opening multiple doors, using child-safe fans, making changes to the heating, ventilation, and air conditioning (HVAC) or air filtration systems, and keeping the ventilation system running all day—especially whenever students are gathering – are other ways to improve ventilation. This is why you may also see bus drivers opening or cracking windows a few inches to improve air circulation. If there's good ventilation, there will be even lower risk if students are also wearing masks.

Special Accommodations

32. My child is immunocompromised – what can the school do to help keep my child safe?

- Schools can layer prevention strategies, such as requiring masks, promoting vaccination, improving ventilation, and physical distancing. If the school is not using layered strategies, ask about virtual learning options available to protect your child who has increased risk.

33. What if someone else in our household is at high risk for COVID-19 – is it safe for my child to go to school?

- It depends – your child is safest when your school is using masking with layered prevention strategies and if you are able to also use layered prevention strategies at home. One way to help protect everyone is to make sure that all adults and eligible youth in a household are fully vaccinated against COVID-19. Learn more about other [strategies](#) you can use if both vaccinated and unvaccinated people are living together in your household

34. If my child has special needs, is there anything else the school can do for us?

- Yes, administrators are required to work with your child and your family to understand your child's needs, provide access to required services, and [adjust strategies](#) as needed. For example, physical distancing and wearing masks may be difficult for some people with certain disabilities. Educators and staff might be able to wear a clear or cloth mask with a clear panel when interacting with younger children, children learning to read, or when interacting with people who rely on reading lips

35. Can CDC require that my school give my child an option for virtual learning?

- No, CDC does not have regulatory authority over schools, but [CDC's Guidance for COVID-19 Prevention in Schools](#) does state that schools should provide accommodations, modifications, and assistance for students, educators, and staff with disabilities and other health care needs. It is always appropriate for you, as a parent or caregiver, to speak with your child's school administration about any specific health concerns you may have about your child. For students with disabilities, the Individualized Education Program (IEP) Team must develop the education program and then determine the student's educational placement. The IEP Team must also consider whether the student needs assistive technology devices and services.

36. My child is in Pre-K. Does CDC's school guidance still apply?

- No, but CDC does have specific guidance for [Operating Early Care and Education/Child Care Programs](#).

Community Transmission

37. What is community transmission and why is it so important?

- Community transmission, also known as community spread, means virus is spreading and infecting people. You can check the [COVID Data Tracker](#) to determine the level of community transmission in your area.
- When there is a lot of community spread, more people are getting COVID-19. Some of these people have and might become seriously ill, be hospitalized with COVID-19, and some will die. Vaccination has been proven to reduce the risk of severe illness, hospitalization, and death from COVID-19. For children who are not eligible for vaccination, using layered prevention strategies at school and out in the community is critical to help protect them from COVID-19 especially when there are high levels of community transmission.
- The more cases there are in the community, the higher the chance that a student, educator, or staff member will come to school with COVID-19. We learned this from the 2020-2021 school year, and this is why using all layered prevention strategies is critical. With greater community spread, we are likely to see more infected people show up at school because infected students, educators, and staff may not know they are infected.
- Actions in the community will impact the school, especially in schools that do not use layered prevention strategies or do not have many people vaccinated. Activities are safer when those who are eligible are vaccinated. If people don't follow prevention strategies in the community, cases will increase and so will the risk of cases in your school. More cases in school can disrupt in-person learning, sports, and extracurricular activities for your child.

38. How can I find out the level of community transmission where my school is located?

- Check the COVID Data Tracker to determine the level of community transmission in your area:
<https://covid.cdc.gov/covid-data-tracker/#county-view>