

Department of Elementary & Secondary Education

Frequently Asked Questions, Week of October 12th, 2020

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1. If students are sitting exactly 6 feet from a student who tests positive for COVID-19, are they considered close contacts?

No, students sitting 6 feet from one another are not considered close contacts. A close contact in the school setting is defined as only those who have been within (less than) 6 feet of distance of the individual for at least fifteen minutes, while the person was infectious.

Therefore, a distance of 6 feet or greater is not considered a close contact. As a reminder, the infectious period begins 2 days prior to symptom onset. If someone is asymptomatic, the infectious period is considered to begin 2 days prior to the collection of their positive test.

2. Does a student or staff member whose household member is symptomatic need to quarantine?

Only individuals who are symptomatic themselves or close contacts of those who are confirmed to have COVID need to self-isolate (quarantine). As outlined in DPH guidance, all individuals who are symptomatic should be tested and self-isolate until they receive their test results. This means that if an individual in the student/staff member's household is self-isolating because they are symptomatic, but not confirmed to have COVID, the student/staff member should have limited to no contact with the symptomatic individual to the extent feasible. As a result, the student/staff member should continue to attend school if they are not symptomatic. More information can be found in the [Protocols for Responding to COVID-19 Scenarios](#).

3. Can a district or school place students who are unable to wear a mask because of a disability or medical condition in a separate classroom?

No. If a student attends school in-person and cannot wear a mask because of a disability or medical condition, 6 feet of physical distance must be maintained, but the student should not be isolated, or placed in a separate classroom with other students who cannot wear masks. Some high-priority students with disabilities require 1:1 support, and need assistance from staff with feeding, washing, dressing, academic readiness, sitting at a desk, manipulating academic materials, using communication devices, etc. In order to reduce the risk of contracting or spreading COVID-19, it is important to minimize close contact to the extent possible; however, when it is not possible, the use of protective equipment is required.

4. Are districts still required to fulfill the statewide physical education requirement?

The physical education requirement is statutory and school districts have a good deal of flexibility in carrying it out. The state law gives school officials considerable flexibility in designing the physical education program. For example, school officials have authority to determine the hours of instruction for physical education, as they do for all other subjects of

instruction. Further, school officials have discretion to determine whether and how a student, particularly at the high school level, may meet the physical education requirement through an organized program of instructional physical activity such as participation in interscholastic athletics, or skating or swimming lessons through a community program, or through an independent study.

5. When should attendance be taken for remote instruction?

It is critical that districts and schools consult [DESE's remote attendance policy](#). Remote attendance policies should ensure that parents can confirm absences when students are not able to participate and outline how educators will follow up with students who are not engaged in remote instruction. In support of these goals, DESE recommends that attendance be taken at multiple points through the day for remote instruction. To acknowledge the various models of remote learning that may be occurring on a given day, including synchronous and asynchronous instruction, attendance could be collected during live instruction or through individual check-ins, completed lessons or assignments, activity logs or reflections, and/or parent/caregiver attestations of work accomplished.