



health

Department:
Health
REPUBLIC OF SOUTH AFRICA



INTERNAL MEMO

Date:	12 January 2021		
To:	The Honorable Dr ZL Mkhize, Minister of Health	From:	Ministerial Advisory Committee (MAC) on COVID-19

REOPENING OF SCHOOLS FOR THE 2021 SCHOOL YEAR

Problem Statement

As the new schooling year is set to start with some schools opening as soon as mid-January, consideration needs to be given as to whether schools should be reopened at this time, given that the country is currently experiencing a second wave that is worse than the first wave.

The following 5 questions need to be addressed:

1. Should schools open as planned in January 2021 or should school openings be postponed due to the second wave?
2. If school openings are to be postponed, what criteria should be set for when schools can be opened?
3. Should there be a differentiated approach to school opening based on the age of students?
4. Should timing of school openings be province-specific or a single national approach?
5. How should repeated cases/exposures/outbreaks at schools be addressed?

Evidence Review

- Data from countries such as the United States and South Korea as well as a recent multi-country analysis¹ have shown that school closures have resulted in reduced COVID-19 incidence and mortality. This however needs to be balanced with the consequences of the school closures including the loss of school meals, anxiety/insecurity among learners and teachers and the safe learner environment.²
- Children of school-going age and adolescents are less likely to become infected with

¹ Haug N et.al. Ranking the effectiveness of worldwide COVID-19 government interventions. Nature Human Behaviour. <https://doi.org/10.1038/s41562-020-01009-0>.

² Viner RM, Russell SJ, Croker H, et al. School closure and management practices during coronavirus outbreaks including COVID-19: a rapid systematic review. Lancet Child Adolesc Health. 2020;4(5):397–404.

SARS-CoV-2.³

- Younger children are less likely to transmit the virus to each other and to staff.⁴
- However, adolescents are likely to have a slightly lower or similar rate of transmission compared to adults.^{5,6}
- When children and adolescents are infected, they are more likely to have a mild clinical course.^{7,8,9}
- Adherence to prevention interventions can make a significant difference to risk of acquiring SARS-CoV-2. The prevention interventions include 1) engineering controls – (*what we can do to the environment* to reduce transmission), such as ensuring ventilation and sufficient space; 2) administrative controls – (*what we can arrange* to reduce transmission), such as staggered time-tabling, screening, hand hygiene, cough etiquette and regular environmental cleaning; and 3) personal protective equipment – (*what we can wear* to reduce transmission, such as non-medical (cloth) face masks and eye protection visors) should prevent the spread of the virus from the individual with COVID-19 to other learners or staff in schools.
- Symptom screening of learners and staff prior to school entry may limit the potential exposure of learners and staff to SARS-CoV-2.
- Potential negative consequences of COVID-19 infections in schools include further disruption of teaching syllabus, potential institutional shut-down, loss of trust in the institution and government.
- While the COVID-19 pandemic in the community is ongoing, there is a continual risk of introduction of the infection into schools through learners and staff who acquire symptomatic or asymptomatic infection in the community.
- Where schools are able to fully implement prevention measures, they can provide a relatively safe environment. Containment of transmission in schools is critical for this.

³ Zimmermann P, Curtis N. Coronavirus Infections in Children Including COVID-19: An Overview of the Epidemiology, Clinical Features, Diagnosis, Treatment and Prevention Options in Children. *Pediatr Infect Dis J.* 2020 May;39(5):355-368. doi: 10.1097/INF.0000000000002660.

⁴ Heavey L, Casey G, Kelly C, Kelly D, McDarby G. No evidence of secondary transmission of COVID-19 from children attending school in Ireland, 2020. *Euro Surveill.* 2020 May;25(21):2000903. doi: 10.2807/1560-7917.ES.2020.25.21.2000903.

⁵ Zhang J, Litvinova M, Liang Y, Wang Y, Wang W, Zhao S, et. al. Changes in contact patterns shape the dynamic of COVID-19 outbreak in China. *Science.* June 2020, 368 (6498): 1481-1486.

⁶ Viner RM, Mytton OT, Bonell C, Melendez-Torres GM, Ward JL, Hudson L, et.al. Susceptibility to the transmission of COVID-19 amongst children and adolescents compared to adults: a systematic review and meta-analysis. doi: <https://doi.org/10.1101/2020.05.20.20108126>

⁷ Qiu H, Wu J, Hong L, Lou Y, Song Q, Chen D. Clinical and epidemiological features of 36 children with coronavirus disease 2019 (COVID-19) in Zhejiang, China: an observational cohort study. *The Lancet Infectious Diseases.* 2020. Available from: [www.thelancet.com/journals/laninf/article/PIIS1473-3099\(20\)30198-5/fulltext](http://www.thelancet.com/journals/laninf/article/PIIS1473-3099(20)30198-5/fulltext) (Accessed on 20 July 2020).

⁸ Tagarro A, Epalza C, Santos M, Sanz-Santaefemia FJ, Otheo E, Moraleda C, Calvo C. Screening and Severity of Coronavirus Disease 2019 (COVID-19) in Children in Madrid, Spain. *JAMA Pediatr.* 2020 Apr 8:e201346. doi: 10.1001/jamapediatrics.2020.1346.

⁹ Livingston E, Bucher K. Coronavirus Disease 2019 (COVID-19) in Italy. *JAMA.* 2020 Mar 17. doi: 10.1001/jama.2020.4344. Epub ahead of print. PMID: 32181795.

Recommendations

- Early Childhood Development Centers and primary schools should continue to open as planned while maintaining a risk-mitigated environment for children and staff.
- Delay opening of high schools for the next two weeks, while assessing the trajectory of the current community transmission.
- A comprehensive guideline on the response to individuals with COVID-19 in schools should be adopted and implemented in schools (a suggested guideline adapted from National Institute of Communicable Diseases (NICD) lead recommendations is attached).
- Schools to appoint a designated staff member to be responsible for communication in collaboration with the Provincial Education Department (PED). Communication regarding COVID-19 infections in schools should be timely, transparent and provide as much information as possible while retaining confidentiality and avoiding stigmatising language.
- Strengthen the transparent sharing of information on COVID-19 infections in children as part of the daily national COVID-19 statistics by the Department of Health (DoH) and (NICD).
- COVID-19 response teams are created (or if available, School Health Team of the Integrated School Health Programme (ISHT) to be utilised) in every school district or in the province in collaboration with the DoH. These response teams to investigate, mitigate and respond to cases of COVID-19 that are detected in learners or staff. The response teams to include DoH, PED, senior management from the affected school (school principal and/or designated staff), school governing bodies, human resources and teacher representation or organised labour.
- COVID-19 response teams, school principals or designated staff members and school governing bodies be trained on operationalising the comprehensive guidelines for COVID-19 detection, response and prevention procedures for Schools. Such training should be facilitated by units experienced in managing the investigations of clusters of infectious cases, e.g. the NICD or other public health units.
- The national and provincial departments of education to recognise that COVID-19 infections and potential clusters of cases will occur in schools despite the best efforts and that they adopt a transparent and 'no-blame' culture in order to facilitate clear reporting, directed and positive responses to individuals with COVID-19 in school.
- Provincial departments of education monitor the implementation and adherence to COVID-19 preventive measures in schools as previous MAC advisory (Getting Children back to school safely).
- Closure of an entire school should be a last recourse measure that should be carefully considered, made by the levels of authority empowered to make such a decision.
- The adoption of the adapted NICD guidelines pertaining to COVID-19 response in schools, and the implementation of the above recommendations will contribute to learner and staff safety, ensure public trust in educational institutions and authorities, and contribute to the country efforts to contain the spread of COVID-19.
- It is recommended that the Department of Basic Education (DBE) be advised to fast-track comorbidities processes for teachers.
- Platooning should be avoided as it compromises the learning process.

Thank you for consideration of this request.

Kind regards,



PROFESSOR SALIM S. ABDOOL KARIM

PROF MARIAN JACOBS

CO-CHAIRPERSONS: MINISTERIAL ADVISORY COMMITTEE ON COVID-19

DATE: 12 January 2021

CC:

- » **Dr S Buthelezi (Director-General: Health)**
- » **Dr T Pillay (Deputy Director-General)**
- » **Incident Management Team**