

Health measures for the reopening of schools, colleges, high schools and nurseries

Press release from the National Academy of Medicine

April 23, 2020

Among the first measures to get out of confinement, the gradual reopening of nurseries and schools from 11 May has been announced by the Government, according to a timetable that has yet to be specified. Such a decision must be based on prevention measures adapted to the status of the Covid-19 epidemic in each region of the national territory.

SARS-CoV-2 infection is less common in children than in adults: in the large series studied in China and Italy, paediatric cases account for only 1 to 3% of all cases. They are most often pauci-symptomatic forms (rhinorrhea, cough, fever) or even asymptomatic, the severe forms being very rare (less than 1%). Covid-19 infections are therefore difficult to distinguish from common seasonal infections, but carry a theoretical risk of contamination of personal environment. In fact, the role of children in transmission has not yet been properly assessed. In China, most paediatric cases have followed contamination by the adult environment. Despite the lack of conclusive studies published to date, it appears that the contagiousness of children is lower than that of adults.

The reopening of schools and nurseries must be gradual and framed by strict health measures.

Parents and teachers fear that the infection may be transmitted from undetectable cases because they are invisible. The proposed safety measures may seem insufficient or difficult to maintain by teachers and school staff if they are implemented too hastily without the necessary and rigorous preparation. The fear is to favor intra-family transmission and secondary exposure of fragile parents to contamination by their children.

With regard to schools, colleges and high schools, the National Academy of Medicine recommends:

1) Before reopening,

- to provide training on barrier gestures for teachers and staff, to be relayed to the children as soon as the opening, with pictorial, adapted and repeated explanations;
- to provide parents with information to avoid gatherings at the school exit.

2) to ensure the best level of individual and collective hygiene:

- Systematic and multi-daily hand washing, with soap and water, in adapted wash basins, with disposable paper towels for drying;
- installation of hydro-alcoholic solution dispensers in toilets, classrooms, at the entrance and exit of the establishment;
- cleaning and disinfection of the premises at least once a day and several times a day for the sanitary facilities, banisters, classroom tables, door handles and teaching aids;
- ventilation of the premises several times a day;
- safe storage and disposal of waste;
- maintenance of an adequate supply of anti-projection masks (or alternative masks) for adults (teachers, staff, parents) and for pupils from the age of 6 years, from the preparatory course (CP) onwards, to be worn during recreational activities outside the classroom and when leaving the school.

3) to respect the rules of distancing:

- arrange the schedules with the teachers for a spaced reception of the children;
- ensure a minimum distance of one meter between class tables;
- ensure a secure arrangement of places in the canteens;
- organize recreation in small groups, composed if possible of the same children;
- do not allow parents and children to gather together on the way out.

4) to detect any suspicious case quickly:

- by taking the temperature by forehead thermometer every morning, before entering the premises;

- by referring any feverish child to the attending doctor or, failing that, to the school doctor.

With regard to nurseries, the National Academy of Medicine also recommends that:

- only one parent is present in an entrance sluice to take the infant's temperature;
- in case of fever, the infant is sent back to his home, and to seek medical advice;
- to imperatively wear a mask and a daily change of smock to provide care and to give bottles;
- strict hygiene is observed with repeated hand washing between each infant during care and before preparing the bottles;
- the possibility of fecal elimination of Sars CoV-2 when handling and disposing of diapers is considered.