

**New!**  
**Influenza Vaccine Requirement for School Attendance:  
Kindergarten through Grade 12**

Beginning with the 2020-2021 school year, influenza vaccine will be required for all students. Influenza vaccine is always important to receive to reduce the risk of getting sick with influenza, reduce the severity of disease if one does get sick (including the risk of hospitalization) due to influenza, as well as preventing the spread of influenza to others. During the COVID-19 pandemic, influenza vaccine will be especially critical to reduce the overall impact of respiratory illness on the population, protect vulnerable populations from severe illness, and decrease the overall burden on the healthcare system.

**Which students need to receive influenza vaccine?**

Students in Kindergarten – Grade 12 will be required to receive influenza vaccine for the current influenza season for school attendance unless they have a medical or religious exemption.

**When do students need to receive influenza vaccine?**

Students must receive influenza vaccine for the current season by December 31, 2020.

**Are there any exemptions to receiving influenza vaccine?**

Medical and religious exemptions are allowable in the state of Massachusetts.

**What type of influenza vaccine can students receive?**

Any age-appropriate licensed influenza vaccine for the current season fulfills the requirement. This includes injectable and nasal spray vaccine types.

**Should students without a documented dose of seasonal influenza vaccine be excluded from school on January 1<sup>st</sup>?**

Enforcement of school immunization requirements is determined at the local level. We encourage school communities to work with families and healthcare providers to satisfy the requirements for students who are not compliant on January 1st.

**What about students who enroll after December 31?**

Newly enrolling students between January 1 and March 31 must have a documented dose of influenza vaccine for the current influenza season (along with all other required

vaccinations) when they start school.

**What about students who enroll later in the spring?**

Students enrolling after March 31 are not required to have a dose of influenza vaccine for the current school year.

**Will my school have to report on influenza vaccine in the Kindergarten and Grade 7 school immunization surveys?**

Yes—the surveys will be open as usual during the fall to input information on other vaccines. By January 2021, a new section of the survey may be completed to report influenza vaccination rates for students enrolled in Kindergarten and Grade 7. We anticipate both parts of the survey, the traditional school immunization survey and the influenza component, will be due by the end of January 2021.

**Will my school have to report the number of students who received influenza vaccine in the Grade 11 school immunization survey?**

Yes—the Grade 11 survey will open in early 2021 and will include the influenza question with the survey. More information on the timeline for the Grade 11 survey will be available in the future.

**Will my school have to report the number of students who received influenza vaccine for students in all grades?**

While the influenza vaccine requirement exists for every grade, you will be asked to complete school immunization surveys for Kindergarten, Grade 7, and Grade 11.

**Will influenza vaccine be required every year or just for the 2020-2021 school year?**

Influenza vaccine is now a required vaccine for school attendance and will be required as of December 31 for all students in Kindergarten through Grade 12 each school year.

**Do younger students require 2 doses according to ACIP guidelines?**

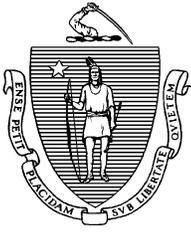
Children younger than 9 may need two doses of influenza vaccine depending on the number of influenza vaccines they have received in the past. Children should be vaccinated according to ACIP recommendations but only one dose of influenza vaccine is required for school attendance.

**If my school will be providing instruction remotely, will students still need to meet immunization requirements?**

The school immunization requirements, including the requirement for seasonal influenza vaccine, apply to all Massachusetts students enrolled in Kindergarten through Grade 12, regardless of whether the district is providing instruction in-person, or using a hybrid or remote learning model.

**Do the flu immunization requirements apply to students that are home schooled?**

Immunization requirements, including the flu immunization requirement, do not apply to home schooled students unless the student will ever need to access the school building for sports, after school activities or any other reason.



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To: Massachusetts School Districts  
Massachusetts Educational Collaboratives  
Massachusetts Local Boards of Health  
Massachusetts School Nurses  
Massachusetts Non-Public Schools

From: Karen Robitaille, MBA, MSN, RN, NCSN, Director of School Health Services

Date: August 19, 2020

Re: Guidance on selected school health regulations during the COVID-19 Public Health  
Emergency

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The purpose of this memo is to provide guidance to all elementary and secondary schools in Massachusetts on school health regulations pertaining to physical examinations, school-based screenings, and immunization.

**This guidance will be updated as needed and as additional information is available. Please regularly check [mass.gov/covid19](http://mass.gov/covid19) for updated guidance.**

105 CMR 200.100: Physical Examinations Required by Primary Care Provider or School Physician

The requirements for physical examination of students pursuant to 105 CMR 200.100 (B) should continue to be followed. An in-person physical exam is required for the following groups of students:

- For students entering school for the first time (typically pre-kindergarten or kindergarten), an in-person physical exam should be conducted one year before or within 90 days of school start. Excluding students from school for lack of documentation of an in-person physical exam during the 90-day grace period is discouraged.
- A student transferring from another school system shall be examined following the school entry recommendation for students entering school for the first time, listed above.
- For students seeking to participate in athletics, an in-person physical exam should be conducted annually prior to a student's participation in competitive athletics. Students who have not had this in-person exam should not be excluded from school, but may not participate in competitive athletics.

The Department encourages in-person physical examination of all students, when possible, to help detect physical and developmental abnormalities. However, given that the current public health emergency has created delays at many medical offices and increased the use of telemedicine, the Department recommends the following flexibility in timing and modality of physical examinations for all other students during the public health emergency:

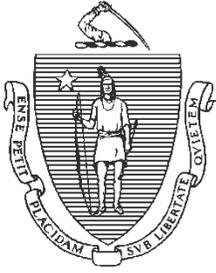
- A telemedicine well-child visit may be substituted for an in-person physical exam for the purposes of school attendance (with exceptions noted above). Video telemedicine visits are preferred over phone-only visits. However, a telemedicine well-child visit may not substitute for an in-person physical exam if the physical exam on file is older than four years.
- For students submitting documentation of a recent in-person physical exam:
  - For elementary and high school students (typically, 4<sup>th</sup> and 10<sup>th</sup> grade), the exam may be conducted up to two years before or within 120 days of school start.
  - For middle school students (typically, 7<sup>th</sup> grade), the exam should be conducted one year before or within 120 days of school start.
- For all students, exclusion from school for lack of documentation of a well-child visit during the 120-day grace period is discouraged.

105 CMR 200.400: Vision and Hearing Screenings and 105 CMR 200.500: Height and Weight Measurements

At this time, requirements for health screenings pursuant to 105 CMR 200.400 and 105 CMR 200.500 remain suspended, per the [Order of The Commissioner of Public Health Exempting School Committees or Boards of Health from Conducting Health Screenings](#) issued on April 28, 2020. The Commissioner reserves the right to rescind this suspension of screening requirements during the 2020-2021 school year; once the waiver is lifted, screening should resume as soon as possible. The Department will provide guidance for resuming screenings.

105 CMR 220.500: Immunization Requirements for Preschool, Elementary, and Secondary School Students

Immunization requirements should continue to be followed, including the [new requirement for flu vaccination for all K-12 students starting with the 2020-2021 school year](#). Documentation of immunization status should be submitted to schools within 60 days of school start; however, excluding students from school based on immunization status during the 60-day grace period is discouraged except in the case of a documented school-based outbreak of a vaccine-preventable disease.



# Massachusetts Department of Elementary and Secondary Education

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Jeffrey C. Riley  
Commissioner

## MEMORANDUM

**To:** Superintendents, Charter School Leaders, Assistant Superintendents, Collaborative Leaders, Leaders of Approved Special Education Schools, School Nurses, and Local Public Health Colleagues

**From:** Jeffrey C. Riley, Commissioner of Elementary and Secondary Education  
Dr. Monica Bharel, Commissioner, Department of Public Health

**Date:** August 18, 2020

**Subject:** Joint Memo Clarifying Key Health and Safety Requirements for Schools

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We are issuing this joint memo to provide refinements and updates to previously released Department of Elementary and Secondary Education (DESE) guidance, with a particular focus on protocols for responding to COVID-19 scenarios in school, on the bus, or in community settings. These refinements and updates are a result of questions that have come from the practical implementation of both DESE and Department of Public Health (DPH) guidance, as well as from evolving medical and scientific findings related to COVID-19. Please note that DESE and DPH intend to collaborate throughout the school year to conduct periodic reviews of guidance for schools and issue additional updates as necessary. DESE will also update its relevant guidance documents so that they include the clarified guidelines described below.

### Definition of a close contact

- If a student or staff member tests positive for COVID-19, their close contacts will be defined as only those who have been within 6 feet of distance of the individual for at least fifteen minutes, while the person was infectious. 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. While previous guidance stated that all students in an elementary classroom would be defined as close contacts, this new guidance provides a narrower definition of a close contact which mirrors DPH guidance.

### Policy of when a close contact may return to school

- All close contacts should be tested but must self-quarantine for 14 days after the last exposure to the person who tested positive, regardless of test result. After further consultation with the medical community, we are updating this guidance as the virus can cause illness from 2-14 days after exposure and even asymptomatic individuals can transmit the virus. Going forward, even if an individual identified as a close contact

receives a negative test result, they must continue to self-quarantine for the full 14 days as the virus may take up to 14 days to cause illness.

### **Policy of when a student/staff person may return to school after COVID-19 symptoms**

- If a student or staff member has COVID-19-like symptoms, they may return to school after they have tested negative for COVID-19, have improvement in symptoms, and have been without fever for at least 24 hours without the use of fever reducing medications. If a provider makes an alternative diagnosis for the COVID-19-like symptoms, the individual may return to school based on the recommendations for that alternative diagnosis (e.g., influenza or strep pharyngitis).
- If a student or staff member presents COVID-19-like symptoms and chooses not to be tested, they may return to school 10 days from start of symptoms, as long as their symptoms have improved and they have been without fever for at least 24 hours prior to their return to school without the use of fever reducing medication.

### **Definition of COVID-19 related fever**

- Over the summer, the threshold for a COVID-19 related fever by the Centers for Disease Control and Prevention (CDC) has been updated from greater than 100.4°F to greater than 100.0°F. As a result, going forward, a fever as a COVID-19 symptom will be defined as 100.0°F or higher.

### **Students wearing masks**

- Masks or face coverings are among the most critical components to reduce the transmission of COVID-19. Students in grade 2 and above are required to wear a mask/face covering that covers their nose and mouth at all times, with the exception of meals and mask breaks. Whenever possible, students in pre-kindergarten through grade 1 who can safely and appropriately wear, remove, and handle masks should do so. Even if students are spaced six feet apart in classrooms, the use of masks is still required unless students are eating lunch or taking a mask break.

### **Physical distancing guidelines**

- Physical distancing is a critical tool in preventing the spread of COVID-19. The CDC<sup>1</sup> and DPH<sup>2</sup> recommend 6 feet of distance between individuals. The World Health Organization<sup>3</sup> and the American Academy of Pediatrics<sup>4</sup> recommend a minimum of 3 feet of distance. DESE recommends that districts aim for 6 feet of distance where feasible. When 6 feet is not feasible, 3 feet is an acceptable minimum as long as staff and students wear masks covering the nose and mouth at all times. If the 3 feet minimum is applied on the bus, all staff and students regardless of age must wear masks at all times. Please note that decisions to apply a 3-foot minimum will likely increase the number of close contacts associated with the occurrence of a case.

### **Immunizations required in all models of learning**

- Previously released guidance emphasized the importance of maintaining school immunization requirements and obtaining the flu vaccine as students return to in-person

school. This is equally important for students who are enrolled in remote or hybrid schooling models. Immunization requirements must be met in all models of learning.

### **Medical waiting room**

- As noted in previous DESE guidance, schools must establish a separate room for students exhibiting COVID-19 symptoms or who may have learned about a positive test result while at school, while waiting to be picked up by a family member. This space must be supervised. If feasible given space and staffing constraints, schools are encouraged to provide individual students with their own waiting room. If more than one student is in the same waiting room at a time, each student must be at least 6 feet apart (and should be spaced as far apart as possible) and wearing a surgical mask (non-N95 and non-cloth) while in the medical waiting room.<sup>5</sup> If a student does not already have a surgical mask, the school should provide one. Schools must also be equipped with the PPE for the staff involved with supervision of the waiting room.

### **Supporting the safe application of hand sanitizer**

- Handwashing with soap and water for at least 20 seconds is the best practice. However, hand sanitizer containing at least 60% alcohol should be substituted when handwashing is not available. Hand sanitizer stations should be set up where school staff are typically present, such as common areas, hallways, and classrooms. While the application of hand sanitizer may be necessary throughout the school day (especially if hand washing is less accessible) and does not require specialized instructions for use, districts and schools should avoid placing sanitizer stations in areas that are not typically supervised through the regular presence of staff.

Supporting the safety of our students, teachers, staff, and community is our most important mutual priority. We will continue to work in collaboration to update and refine our guidance for schools as the science evolves. Thank you for your efforts on behalf of our students and to provide a safe environment for everyone in our schools.

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<sup>1</sup> CDC, Social Distancing, Quarantine, and Isolation. (2020, May 6). Retrieved from

<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/social-distancing.html>

<sup>2</sup> DPH, COVID-19 Prevention and Treatment (2020). Retrieved from <https://www.mass.gov/info-details/covid-19-prevention-and-treatment#social-distancing->

<sup>3</sup> WHO, Considerations for school-related public health measures in the context of COVID-19. (2020, May 10). Available at <https://www.who.int/publications/i/item/considerations-for-school-related-public-health-measures-in-the-context-of-covid-19>

<sup>4</sup> American Academy of Pediatrics (2020). COVID-19 Planning Considerations: Guidance for School Re-entry Retrieved from <https://services.aap.org/en/pages/2019-novel-coronavirus-covid-19-infections/clinical-guidance/covid-19-planning-considerations-return-to-in-person-education-in-schools/>

<sup>5</sup> FDA, N95 Respirators, Surgical Masks, and Face Masks (2020, July 6). Retrieved from: <https://www.fda.gov/medical-devices/personal-protective-equipment-infection-control/n95-respirators-surgical-masks-and-face-masks#s2>