



Florida Chapter of the American Academy of Pediatrics

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Florida Chapter of the American Academy of Pediatrics, Inc.

1400 Village Square Blvd.
#3-87786
Tallahassee, FL 32312
(P) 850/224-3939
(F) 912/452-9050
(E) info@fcaap.org

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Governor Ron DeSantis
Office of Governor Ron DeSantis
State of Florida
The Capitol
400 S. Monroe St.
Tallahassee, FL 32399-0001
GovernorRon.Desantis@eog.myflorida.com

July 16, 2020

RE: Considerations for Re-Opening Schools

Dear Governor DeSantis,

I am writing to you as president of the Florida Chapter of the American Academy of Pediatrics (FCAAP). We are an organization that represents 2,600 pediatricians in the state of Florida. One of our main purposes is to protect the safety and welfare of children, in the same manner as the national AAP. Given this fact, I am writing to request that you and Commissioner Corcoran rethink your order requiring superintendents around the state to open their brick and mortar schools in August. Many people, including you and Commissioner Corcoran, are quoting the AAP statement that “children do best when they are in school” as your reasoning for this ruling. Please note that the AAP meant that statement only in situations in which children can safely go to school. In their statement of July 10, 2020, they state “science should drive decision-making on safely reopening schools...Public Health agencies must make recommendations based on evidence, not politics.”¹ Currently, viral infection rates in Florida are extremely high, with a rolling average of 14.2% of tests positive for new infections over the past two weeks.² Public health experts and infectious disease physicians almost universally recommend that children not go to schools until the positive test rate is 3-5% over a rolling two week average. If children go to school with such high infection rates, schools will be forced to close very quickly after opening, and many children and families will likely become ill with SARS-CoV-2. In other parts of the world where schools have successfully opened the infection rates from SARS-CoV-2 were much lower than here in Florida.

There are current studies that show children do not become as ill with SARS-CoV-2, and they do not spread it as efficiently as adults do. However, the fact that children, as a group, do not become as ill as adults does not mean every child with COVID does not become ill. There is great concern about children with special healthcare needs (asthma, obesity, diabetes, congenital heart disease, cystic fibrosis to name a few) infected with SARS-CoV-2, as there is in adolescents who smoke or vape. Further, as you undoubtedly know, some children have died of a rare multi-system inflammatory condition. In addition,

lower spread rates to adults does not mean no spread rate to adults, and it is already clear that adults have the potential to become very ill or die at a higher rate when infected.

The FCAAP believes that each school district in the state should be able to decide when and how they re-open in person learning based upon the prevalence of SARS-CoV-2 in the community. Further, they should be given guidance based on the risks involved to their community.

As the national AAP recommends, school districts need to be “nimble³,” able to make changes to details of their plans to reopen based on the situation in their counties during the fall and winter months. In order to be able to do this there must be an infusion of money to the school systems. They cannot possibly keep the children, teachers, and staff safe with the same level of funding as they have received in the past.

When it is safe to reopen schools the FCAAP is available to give guidance to superintendents, if they are interested. A “white paper” will be available to those superintendents who want to see it within the next week.

Thank you for your consideration of this letter.

Sincerely,



D. Paul Robinson, MD, FAAP
President
Florida Chapter of the American Academy of Pediatrics

CC: Commissioner Richard Corcoran, Florida Department of Education
The Honorable Bill Montford, The Florida Senate

¹ <https://www.aappublications.org/news/2020/07/10/schoolreentrysafety071020>

² Florida DOH data on new infections

http://ww11.doh.state.fl.us/comm/partners/covid19_report_archive/state_reports_latest.pdf

³ COVID-19 Planning Considerations: Guidance for School Re-entry. <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/>