

## **COVID-19 Guidance Packet**

for Schools, Child Care, and Other Youth Settings

\*This document is not reflective of guidelines for healthcare settings or congregate living facilities\*

Updated Feb 4, 2022

The following Guidance Packet has been developed in accordance with local and state guidance. It is intended to be used as an interpretation tool, not in place of any current standing guidance. In the event of a new update to local or state guidance, please refer to that source of guidance itself, until this packet is reflective of those changes.

#### Below are links to reference sources used to create this packet:

**CDPH Guidance on Isolation and Quarantine** 

**CDPH K-12 Guidance** 

CDPH K-12 Q&A / FAQ

**CDPH K-12 Group-Tracing Approach** 

**CDPH Guidance for Child Care Providers and Programs** 

Masks for Kids: Tips and Resources

<u>Cal/OSHA Emergency Temporary Standards (ETS)</u> - Our Public Health team may not be up-to-date on the Cal/OSHA ETS as they are revised. We recommend that your employer and staff be responsible for maintaining accordance with this very specific set of guidelines.

#### Recent updates to packet:

- 1/21 Added clarification to Scenarios A F. Added clarifications on use of Group Tracing Approach. Added scenario titles on General Guidance (for all settings) page. Clarified definitions for "Fully-vaccinated" and "Up-to-date." Added embedded CDPH links for masking guidance.
- 1/27 Updated quarantine exemptions to include all booster-eligible K-12 students (regardless of age). Added exclusion of those who were recently diagnosed with COVID-19 from Group Tracing testing requirements. Clarified that athletes must mask for full 10 days if returning early from Iso/Q
- Adjusted order of contact groups, for better reviewing of guidelines by reading "top-down." Highlighted page titles for better navigation between guidance applicable for all settings and guidance for close contacts exposed outside of the K-12 setting vs within a K-12 setting.

\*(SCROLL DOWN TO VIEW GUIDANCE PACKET)\*

	ISOLATION and COVID-19 Case Definitions (all settings)
COVID-19 "Case"	A <b>Case</b> is defined as a person who has tested positive for COVID-19, regardless of vaccination status, previous infection, or symptom status. <b>All Cases</b> should complete <b>Isolation</b> <sup>1</sup> (below).
	<b>To Note:</b> If a person develops COVID-like symptoms but declines to get tested, current guidance recommends they also follow protocol for Isolation.
COVID-19 Infectious	The Infectious period for a COVID-19 Case begins 2 days prior to symptom onset (or appx 2 days prior to the testing date, if no symptoms).
Period	COVID-19 Cases will continue to be infectious for an <i>additional</i> <b>5-10 days</b> after symptom onset (or test date, if no symptoms), and they should complete Isolation during this period (see below).
	A Case's <b>last infectious day</b> is the day before they are released from Isolation.
	Isolation separates those infected with a contagious disease from people who are not infected.
Isolation (Cases)	<b>Day 0 of Isolation</b> is the day their first symptoms began (or the day their positive test was collected, if they develop no symptoms). The full isolation period lasts for <b>5-10 days</b> .
	Cases can be released from Isolation when they meet the Isolation Release Criteria.
	A Case can be released any time <b>after 5 days</b> of Isolation if:  ✓ Fever has resolved, AND
Isolation	✓ Other symptoms are resolving (or have resolved), AND
Release Criteria	<ul> <li>✓ They are tested (antigen preferred) on Day 5 or later, and receive a negative result, AND</li> <li>✓ They wear a well-fitted mask around others for remainder of 10 days (especially indoors).</li> <li>If returning to extracurriculars, they must mask, otherwise they must be excluded for the remainder of the 10 days.</li> </ul>
	OR: Can be released after 10 days of Isolation, without a test if:  ✓ Fever has resolved, AND
	✓ Other symptoms are resolving (or have resolved)
	Once an individual is released from Isolation, they are considered "recovered."

- 1 Positive COVID-19 Cases involved in any school, childcare, community, or youth settings should follow these Isolation guidelines. However, Quarantine guidelines may vary by setting and nature of exposure. Please refer to specific corresponding pages for Quarantine guidance.
- 2 People who are confirmed positive for COVID-19 (by diagnostic testing) are exempt from future quarantine if they are exposed to COVID-19 again in the 90 days following their infection. Without the positive diagnostic test, they are not considered confirmed, and are not exempted from future quarantine or testing (should either be required). Should recently confirmed cases be required to test during that 90-day window, they should test by antigen, as a PCR test may pick up a positive result, even after the individual is no longer infectious (due to dead viral genetic material still being present in the body).
- 3 In certain circumstances, it is strongly advised that Contacts to do an initial test immediately after learning of their exposure. If negative, testing should be repeated later in the quarantine period, based on current quarantine guidelines and recommendations. A negative result on an early test does not guarantee that they will not develop COVID-19 later in their quarantine period, and a test done too soon will not clear them from Quarantine any sooner.

# **QUARANTINE & COVID-19 Contact Definitions (all settings)**

COVID-19 "Contact"	Someone is a <b>COVID-19 Contact</b> if they had close contact with an infectious COVID-19 Case. <b>Close contact</b> is defined as being <b>within 6 feet</b> of an individual for a total of <b>15 minutes</b> (or more) over the course of a day – <b>OR</b> if they <i>briefly</i> :  O Had direct physical contact with a COVID-19 Case (hugged, kissed, etc.)  Provided direct care for someone sick with COVID-19  Were sneezed/coughed on by a COVID-19 Case  Shared eating/drinking utensils with a COVID-19 Case
Quarantine (for Contacts)	Quarantine restricts the movement of persons who were <a href="exposed">exposed</a> to a contagious disease, in case they become infectious. When exposed people are in Quarantine, it breaks the chain of transmission.  Day 0 of Quarantine is the Contact's date of most recent exposure to an infectious Case.  The type and length of someone's Quarantine may vary. Please see the following pages for setting-based Quarantine guidance, to determine the applicable guidelines for close contacts exposed in your setting (or elsewhere).  If a close contact tests positive (or becomes symptomatic and does not test or get an alternate diagnosis), they should begin <a href="Isolation">Isolation</a> .
"Unvaccinated"	People are considered <b>unvaccinated</b> until they meet the criteria of "fully-vaccinated." This category includes <b>partially-vaccinated</b> individuals, and those who have completed their primary series of vaccinations within the last 2 weeks.
"Fully- Vaccinated"	Someone is considered <b>fully-vaccinated</b> when it has been <b>at least 2 weeks since receiving the final dose</b> of their primary COVID-19 vaccine series (Pfizer or Moderna: 2 doses, J&J: 1 dose). This term may be phased out, as it is ambiguous as to whether or not they are due for a booster.
"Booster- Eligible"	Someone is considered <b>booster-eligible</b> when they are <b>due</b> for a booster after already receiving their primary series. Booster eligibility can be checked here: <a href="CDC Booster Eligibility timelines">CDC Booster Eligibility timelines</a>
"Up-to-Date"	Someone is considered <b>up-to-date</b> immediately after receiving their booster. People who are <b>not yet due</b> for a booster may be also considered "up-to-date" if fully-vaccinated.
Quarantine Exemptions	The following Close Contacts are <b>not</b> required to quarantine after an exposure:  • Fully-Vaccinated (but not yet booster-eligible)  • Booster-eligible, AND is under the age of 18 or a K-12 student of any age  • Up-to date ("boosted," or fully-vaccinated but not booster-eligible)  • Recently diagnosed with COVID-19 within 90 days prior to exposure (& already recovered)  After being exposed, these individuals should:  ✓ Test 5 days after exposure (or right away if symptoms develop)  ✓ Wear a well-fitting mask around others for 10 days, especially indoors

## General Scenario-based Guidance (all settings)

General Scenario-based Guidance (all settings)		
Scenario	Actions	Considerations
Scenario 1:  Someone has symptoms of COVID-19	Should be tested ASAP and isolated while waiting for results, and until a determination can be made as to how to proceed.  Tests can be PCR or antigen. Over-the-counter (OTC) tests are acceptable if they are FDA approved and if results are verified.  Close contacts are not required to quarantine until a Case is confirmed positive by diagnostic testing.	Reinforce importance of <b>testing</b> to confirm COVID status <sup>2</sup> FDA-approved PCR & Antigen tests Result verification methods are outlined in OTC Testing Guidance.
Scenario 2:  Someone tests negative after symptom onset	They may return when they meet the criteria of your site's non-COVID illness policy.  Individual policies will vary by site/district, but might include:  ✓ No fever for a certain number of hours  ✓ No vomiting or diarrhea for a certain number of hours  If new or differing symptoms develop after testing, test again.	If they have symptoms specific to COVID (ie: loss of taste or smell) and receive a negative antigen result, consider testing by PCR and/or again by antigen.
Scenario 3:  Someone declines to get tested after symptom onset	Before returning, they must either:  Provide proof of alternate diagnosis (from a HCP) and meet your site's non-COVID illness policy criteria (see above)  OR: May alternatively complete <u>Isolation</u> and meet the <u>Isolation</u> Release Criteria prior to returning.	Encourage testing to confirm COVID-19 status, so that they may be exempt from future quarantine if exposed again in the following 90 days. <sup>2</sup>
Scenario 4:	The COVID-19 Case <b>should be sent home</b> with instructions to complete <u>Isolation</u> . The Case must meet the <u>Isolation Release</u> <u>Criteria</u> prior to returning.	If an infectious Case was on-site within the last 24 hours, <b>clean and disinfect</b> spaces occupied by that person (desk, etc.)
COVID-19 CASE  Someone has been confirmed positive for	<ul> <li>If the Case was on-site during their infectious period, use one of the following approaches for Contact Tracing (CT):</li> <li>Individual Contact Tracing approach (all settings): Identify and notify those who were Close Contacts to the infectious Case while on-site, including students, staff, or visitors.</li> </ul>	Provide all Cases with the  Resource packet for Cases  Provide Contacts with the
COVID-19	<ul> <li>See following pages to determine the applicable guidelines for close contacts in your specific setting.</li> </ul>	Resource packet for Contacts
	<ul> <li>2. Group-Tracing approach (for K-12 students only): When individual CT cannot be completed, due to high volume of cases on campus - Identify and notify exposed group of students who shared indoor space an infectious Case on-site.</li> <li>See page on Group-Tracing for details.</li> </ul>	Notifying Contacts: In their notification, be sure to include their last date of exposure, as well as recommended testing timeline.
	If the Case is involved with an on-site exposure, report the Case to Public Health by sending the completed Case Reporting form to SoCo.schools@sonoma-county.org. Please complete all required fields, and as many of the optional ones as you can. This reporting may be done in batches, or one case at a time.	If using the <b>Individual Tracing approach</b> , refer to the <b>Exposure Advisory Templates</b>
	<ul> <li>Being "involved with an on-site exposure" includes:</li> <li>The Case themselves caused an on-site exposure, OR</li> <li>The Case may have resulted from an on-site exposure (they were initially a Contact exposed to COVID on-site, and then ended up becoming a Case within the following 14 days)</li> </ul>	For the <b>Group-Tracing approach</b> (K-12 students only), refer to the <u>Group-Tracing Advisory templates</u>

## **Quarantine Guidance for Close Contacts who were**

Exposed <u>outside</u> of K-12 setting (at home, preschool, college/IHE, or any other community setting)

Close Contacts Exempt from Quarantine	Guidelines
<ul> <li>Up-to-date (boosted, or fully-vaccinated and not booster-eligible)</li> <li>Booster-eligible K-12 students (any age, exposed anywhere)</li> </ul>	Please refer to guidelines outlined in the <a href="Quarantine Exemptions">Quarantine Exemptions</a> section on page 3.
Previously confirmed positive in the 90 days prior to exposure	If being exposed at home, refer to FAQ Scenario F.

Booster-Eligible Contacts	Guidelines
Staff member was exposed to COVID-19.	Staff Contact may opt for <b>Work Quarantine</b> .  If being exposed at home, refer to FAQ Scenario F.
Student (non K-12) or other individual was exposed to COVID-19 in any setting, other than a K-12 site.	They must complete <b>Standard Quarantine</b> .  If being exposed at home, refer to FAQ Scenario F.

Unvaccinated Contacts	Guidelines
Child, Student, Staff, or other individual was exposed to COVID-19 in any setting, other	They must complete <b>Standard Quarantine</b> . <b>NO Work quarantine option</b> for those who are considered unvaccinated.
than a K-12 site.	If contact is being exposed at home, refer to FAQ Scenario F for strategies to stop continual exposure and to reduce quarantine length.

Type of Quarantine	Protocol
Standard (at-home) Quarantine	<ul> <li>Quarantine at home for 5-10 days, Day zero being the date of most recent exposure.</li> <li>If they remain asymptomatic:</li> <li>May discontinue quarantine after Day 5, if tested negative on/after Day 5.  Must wear a well-fitting mask around others through Day 10, especially indoors. If returning to extracurriculars, they must mask, otherwise they must be excluded for the remainder of the 10 days.</li> <li>May discontinue quarantine after Day 10, if declined testing on/after Day 5</li> <li>If symptoms develop, they should get tested and isolate in the meantime</li> </ul>
Work Quarantine	Must quarantine at home for 5-10 days (following protocol above).  The worker may continue working on-site (in-person) during quarantine if they:  ✓ Remain asymptomatic  ✓ Get tested (PCR or antigen) within 3-5 days after last exposure to an infectious Case  ✓ Continue to wear a well-fitting mask around others through Day 10, especially indoors.

## **Quarantine Guidance for Close Contacts who were**

## Exposed in a K-12 Setting - Individual Contact Tracing Approach (standard)

Includes child-care sites operating under K-12 guidance. If someone was exposed outside of the K-12 setting, refer to previous page.

Close Contacts Exempt from Quarantine	Guidelines
<ul> <li>Up-to-date (boosted, or fully-vaccinated and not booster-eligible)</li> <li>Booster-eligible K-12 students (any age)</li> <li>Previously confirmed positive in the 90 days prior to exposure</li> </ul>	Please refer to guidelines outlined in the Quarantine Exemptions section on page 3.

Booster-Eligible Staff Contacts	Guidelines for Contact
Staff was in close contact to a COVID-19 Case.	Staff Contact may opt for Work Quarantine (see previous page) OR may complete Standard Quarantine

Unvaccinated Contacts	Guidelines for Contact
Staff was in close contact to a COVID-19 Case	Staff Contact must complete <b>Standard Quarantine</b> .  NO Work quarantine option for those who are considered unvaccinated.
Student was in close contact to a COVID-19 Case.	Unmasked exposure: student must complete Standard Quarantine.**  Mask-on-Mask exposure: student may opt for Modified Quarantine.**

Type of Quarantine	Protocol
Standard (at-home) Quarantine	<ul> <li>Quarantine at home for 5-10 days, Day zero being the date of most recent exposure.</li> <li>If they remain asymptomatic: <ul> <li>May discontinue quarantine after Day 5, if tested negative on/after Day 5.</li> <li>Should wear a well-fitting mask around others through Day 10, especially indoors.</li> <li>May discontinue quarantine after Day 10, if declined testing on/after Day 5</li> </ul> </li> <li>If symptoms develop, they should get tested and isolate in the meantime</li> </ul>
Modified Quarantine (K-12 students only)	<ul> <li>Must quarantine at home for 5-10 days (following standard protocol above).</li> <li>The student may continue to attend in-person activities during quarantine if they:</li> <li>✓ Remain asymptomatic</li> <li>✓ Are excluded from all community and extracurricular activities until cleared</li> <li>✓ Get tested 2x (PCR or antigen), or once if on Day 5 or later to clear early on Day 6</li> <li>✓ Continue to appropriately mask, as required. If returning to extracurriculars before Day 11, they must mask, otherwise they must be excluded for the remainder of the 10 days.</li> </ul>

<sup>\*\*</sup> Schools who cannot realistically conduct individual contact tracing (due to high volume of cases on campus) should opt for the <a href="Group-Tracing approach">Group-Tracing approach</a> for exposed students. See next page for details.

## Quarantine Guidance for K-12 STUDENTS who were

Exposed in a K-12 Setting - Group Tracing Approach

#### This approach may <u>not</u> be used for exposed staff, or for students exposed outside of the K-12 setting.

This approach is intended for when prompt and accurate Individual CT for students exposed in K-12 settings (as outlined on the previous page) is not feasible. It can be utilized in place of, or alongside Individual CT of students. It is not intended to retroactively "release" individuals from quarantine if the school was able to complete Individual CT.

Exposed Group of Students	Guidelines
Exposed group of K-12 students who shared indoor space with an infectious Case in a K-12 setting, for 15 minutes (or more) over the course of 24 hours.  All of the exposed students are included in this group, regardless of:  their vaccination status recent infection, or mask status during exposure	<ul> <li>Should be notified of the exposure (Group-Tracing Advisory templates)</li> <li>Do not need to quarantine</li> <li>May stay in school for in-person instruction after exposure</li> <li>Should wear a face-covering as directed</li> <li>May continue with extracurricular activities</li> <li>Should get tested for COVID-19 within 3-5 days after last exposure (unless recently positive). Testing more often is always an option.</li> <li>Should stay home and test ASAP if symptoms develop</li> </ul>
The intent of this approach is to minimize the time it takes to identify and notify the exposed individuals (considering the context of Omicron, which has a much shorter incubation period)	In the event of wide-scale and/or repeated exposures (ie: in one classroom, grade-wide or campus-wide), weekly testing may be considered until such time that exposure events on-site become less frequent.  For more details on this approach, please refer to: CDPH K-12 Q&A / FAQ and CDPH Group-Tracing Approach for K-12 Students

#### **STAFF QUARANTINE GUIDELINES:**

(do not differ from Individual CT approach)

Staff Contacts Exempt from Quarantine	Guidelines
Staff Close Contacts who are: Up-to-date (boosted, or fully-vaccinated and not yet booster-eligible), Booster-eligible AND under the age of 18, or recently confirmed positive in the 90 days prior to exposure (& recovered).	Please refer to guidelines outlined in the <b>Quarantine Exemptions</b> section (page 3).

Booster-Eligible Staff Contacts	Guideline
Staff was in close contact to a COVID-19 Case	Staff Contact may opt for Work Quarantine OR may complete Standard Quarantine

Unvaccinated Staff Contacts	Guidelines
Staff was in close contact to a COVID-19 Case	Staff Contact must complete Standard Quarantine. NO Work quarantine option for those who are considered unvaccinated.





FAQ - Scenario	Recommendation
Scenario A: Household Contact of Contact  A student at our school has a sibling who has been exposed to COVID-19 and is in quarantine.  Can our student continue coming to school?	It is best for the exposed sibling (Sibling A) to <b>separate</b> from others in the home, in case they become infectious during their quarantine. Regardless of whether or not they are able to separate, the student who is <b>not</b> quarantining (Sibling B) may continue coming to school. <b>If Sibling A begins developing symptoms</b> , they should be tested ASAP. If Sibling A tests positive and has been in close contact with Sibling B (starting 2 days prior to their symptom onset, or starting 2 days prior to their positive test date if they had no symptoms), Sibling B must stay home and not return to school until after completing their <b>at-home quarantine</b> (if not exempt).
Scenario B:  A student at our school tested positive for COVID-19, and they were in multiple classes during their infectious period.  Do all of the students in those classes need to quarantine?	Only the individuals who were in <b>close contact</b> to the COVID-19 case will be required to quarantine (if not exempt). This may not be the entire classroom if a strict classroom seating charts have been maintained (including at lunch tables, when 6-foot spacing cannot be maintained).  The COVID Coordinator should work with the school to determine if they can <b>confidently confirm</b> who may have been a close contact. If this level of individual contact tracing cannot be completed, the school should opt for the Group-Tracing approach.
Scenario C:  A student received their 2nd vaccine dose one week ago but was just exposed to a positive case. Do they need to quarantine?	People are considered fully-vaccinated when it has been two full weeks since they received their final dose of their COVID-19 vaccine series (1st dose for J&J, 2nd dose for Pfizer or Moderna).  If they are exposed before they reach the two-week mark, they are still considered unvaccinated and they must quarantine as directed.
Scenario D: Sports Exposure  An athlete at our school tested positive for COVID-19, and was at sports practice all week.  Does their entire team need to quarantine?	Not necessarily. Schools should consider the full definition of a "close contact" when determining who needs to quarantine. Exposure can occur very quickly during direct physical contact, therefore, some activities don't require the 15 minutes to be considered close contact.  Different sports carry different levels of risk depending on if they are played indoors or outdoors, and whether they are low-contact or moderate/high-contact activities.  In moderate or high-contact activities, such as football or basketball, the entire team may have had direct physical contact during play, and therefore are considered exposed. When investigating exposure, schools should consider if players congregated on sidelines, in locker rooms, or before/after practice. Any player(s) who meet the criteria to be considered a close contact should quarantine (at home if unmasked) unless exempt and asymptomatic.  K-12 schools <i>may</i> opt for the <b>Group-Tracing approach</b> in this scenario.

## Scenario-based FAQ (2) (all settings)



#### **FAQ - Scenario**

#### Recommendation

# Scenario E: Preschool exposure

A COVID-19 positive child at our preschool was present while infectious. Do all of the kids in their cohort need to quarantine?

In the **preschool setting**, safe mitigation measures (vaccination, masking, distancing, etc.) and strict classroom seating charts are not always possible.

Because of the nature of the setting, it is not common for daycare/preschool sites to be able to **confidently confirm** who was and was not in close contact to the infectious case, unless the case is an infant or someone who was known to have minimal contact with others during the day. As a precaution, it may be best to consider the entire stable group as potentially exposed, especially indoors.

#### Scenario F: Household Exposure

Someone from our school/program has a household member who is positive for COVID-19.

When can they come back?

Even if someone is <u>exempt</u> from quarantine, they should make best efforts to **completely separate** from the infectious household member, to reduce risk of becoming sick. Complete separation is not required, but is still highly recommended. See "complete separation" criteria below.

If someone is **not** exempt from quarantine, and have had **close contact** at home, they must do **standard (at home) quarantine.** If they can **completely separate** from the infectious person, then their quarantine clock begins right away. Day 0 of their Quarantine would be the day they made **complete separation**.

#### Complete separation in the home includes ALL of the following:

- ✓ **Separate bedroom** OR: heads of beds at opposite ends, 6+ feet apart
- ✓ **Separate bathroom** OR: showering at separate times of day, wiping down high-touch surfaces, keeping toothbrushes separated, etc.
- ✓ Keeping at least 6 feet of distance from the positive Case at all times
- ✓ AND wearing masks when sharing common spaces (both the positive Case and the other household members)

If they *cannot* completely separate (they are being **continually exposed**), their quarantine "clock" may not begin until after their **final exposure** to an infectious Case. Final exposure (Day 0 of Quarantine) may end up being the Case's last day of their <u>Isolation / infectious</u> period.

#### Scenario G: Allergy Symptoms

A student at our site has sniffles (mild allergy-like symptoms).

Do they need to be tested?

When can they come back?

An informed decision about what warrants testing should be made on a **case-by-case basis**. This decision can be made by the school nurse, or by COVID liaison in conjunction with Public Health as needed. Schools should consider if the child in question has a **documented health history of allergies (alternate diagnosis)**, and be sure their current symptoms match their typical baseline symptoms for the diagnosis. If there is a change from their baseline symptoms, this would require follow-up (and possibly testing).

However, if the person has any other COVID-19 symptoms, recent exposure to COVID-19, **or** if the nasal discharge is not clear - then it would be indicated that they **test right away**, and be isolated while waiting for results.

**Those who test negative** after symptom onset can return to the site when they meet the criteria of your site's non-COVID illness policy.

**Please note** that other certain infectious diseases (like **Norovirus**) still need to be reported to Sonoma County Department of Public Health.

Please report all non-COVID infectious diseases to:

PHNurse@sonoma-county.org