

COVID-19 Guidance Packet

for Schools, Childcare, and Other Youth Settings*

Updated January 20, 2022

This document 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 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 the sources used to create this document:

[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](#)

[Cal/OSHA Emergency Temporary Standards \(ETS\)](#) - 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.

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

Recent updates:

When significant updates are made to this document, we will include a brief summary here. Thank you!

COVID-19 Case & Isolation Definitions (all settings)

<p>COVID-19 “Case”</p>	<p>A Case is defined as a person who has tested positive for COVID-19, regardless of vaccination status, previous infection, or symptom status. All Cases should complete Isolation¹ (below).</p> <p>To Note: If a person develops COVID-like symptoms but declines to get tested, current guidance recommends they also follow protocol for Isolation.</p>
<p>COVID-19 Infectious Period</p>	<p>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).</p> <p>COVID-19 Cases will continue to be infectious for an <i>additional 5-10 days</i> after symptom onset (or test date, if no symptoms), and they should complete Isolation during this period (see below).</p> <p>A Case’s last infectious day is the day before they are released from Isolation.</p>
<p>Isolation (Cases)</p>	<p>Isolation separates those infected with a contagious disease from people who are not infected.</p> <p>Day 0 of Isolation 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 5-10 days.</p> <p>Cases can be released from Isolation when they meet the Isolation Release Criteria.</p>
<p>Isolation Release Criteria</p>	<p>A Case can be released any time after 5 days of Isolation if:</p> <ul style="list-style-type: none"> ✓ Fever has resolved, AND ✓ Other symptoms are resolving (or have resolved), AND ✓ They are tested (antigen preferred) on Day 5 or later, and receive a negative result, AND ✓ They wear a well-fitted mask around others for remainder of 10 days (especially indoors) <p>OR: Can be released after 10 days of Isolation, without a test if:</p> <ul style="list-style-type: none"> ✓ Fever has resolved, AND ✓ Other symptoms are resolving (or have resolved) <p>Once an individual is released from Isolation, they are considered “recovered.”</p>

- 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.

COVID-19 Contact & Quarantine Definitions (all settings)

COVID-19 “Contact”

Someone is a **COVID-19 Contact** if they had close contact with an infectious COVID-19 Case.

Close contact is defined as being **within 6 feet** of an individual for a total of **15 minutes** (or more) over the course of a day – **OR** if they *briefly*:

- 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 exposed 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 their Quarantine may vary. Please see the following pages for **setting-based scenarios**, to determine the applicable guidelines for close contacts exposed in your setting.

If they test positive (or become symptomatic and do not get an alternate diagnosis or test), they begin **isolation**.

“Unvaccinated”

People are considered **unvaccinated** until they meet the criteria of “fully-vaccinated.” This category includes **partially-vaccinated** individuals, and those who have completed their primary series of vaccinations within the last 2 weeks.

“Fully-Vaccinated”

Someone is considered **fully-vaccinated** when it has been **at least 2 weeks since receiving the final dose** of their primary COVID-19 vaccine series (Pfizer or Moderna: 2 doses, J&J: 1 dose).

“Booster-Eligible”

Someone is considered **booster-eligible** when they are **due** for a booster after already receiving their primary series. Booster eligibility can be checked here: [CDC Booster Eligibility timelines](#)

“Up-to-Date”

Someone is considered up-to-date **immediately after** receiving their due booster. Sometimes referred to as “Fully-updated.”

Quarantine Exemptions

The following Close Contacts are **not** required to quarantine after an exposure:

- **Fully-Vaccinated** (but not yet booster-eligible)
- **Booster-eligible**, but under the age of 18
- **Up-to date** (“Fully-Updated” or “boosted”)
- 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)

Scenario	Actions	Considerations
Someone has symptoms of COVID-19	<p>Should be tested ASAP and isolated while waiting for results, and until a determination can be made as to how to proceed.</p> <p>Tests can be PCR or antigen. Over-the-counter (OTC) tests are acceptable if they are FDA approved and if results are verified.</p> <p>Close contacts are <u>not</u> required to quarantine until a Case is confirmed positive by diagnostic testing.</p>	<p>Reinforce importance of testing to confirm COVID status²</p> <p>FDA-approved PCR & Antigen tests</p> <p>Result verification methods are outlined in OTC Testing Guidance.</p>
Someone tests negative after onset of symptoms	<p>They may return when they meet the criteria of your site's non-COVID illness policy.</p> <p>Individual policies will vary by site/district, but <i>might include</i>:</p> <ul style="list-style-type: none"> ✓ No fever for a certain number of hours ✓ No vomiting or diarrhea for a certain number of hours <p><i>If new or differing symptoms develop after testing, test again.</i></p>	<p>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.</p>
A symptomatic person declines to get tested	<p>Before returning, they must:</p> <p>Provide proof of alternate diagnosis (from a HCP) and meet your site's non-COVID illness policy criteria (see above)</p> <p>OR: May alternatively complete Isolation and meet the Isolation Release Criteria prior to returning.</p>	<p>Encourage testing to confirm COVID-19 status, so that they may be exempt from future quarantine if exposed again in the following 90 days.²</p>
Someone has been confirmed positive for COVID-19 (+) Positive COVID-19 CASE	<p>The COVID-19 Case should be sent home with instructions to complete Isolation. The Case must meet the Isolation Release Criteria prior to returning.</p> <p>If the Case was on-site during their infectious period, use one of the following approaches for Contact Tracing (CT):</p> <ol style="list-style-type: none"> 1. 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. <ul style="list-style-type: none"> • See following pages to determine the applicable guidelines for close contacts in your specific setting. 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. <ul style="list-style-type: none"> • See page on Group-Tracing for details. <p>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.</p> <p>Being "involved with an on-site exposure" includes:</p> <ul style="list-style-type: none"> • The Case themselves caused an on-site exposure, OR • 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) 	<p>If an infectious Case was on-site within the last 24 hours, clean and disinfect spaces occupied by that person (desk, etc.)</p> <p>Provide all Cases with the Resource packet for Cases</p> <p>Provide Contacts with the Resource packet for Contacts</p> <p>Notifying Contacts:</p> <p>In their notification, be sure to include their last date of exposure, as well as recommended testing timeline.</p> <p>If using the Individual Tracing approach, refer to the Exposure Advisory Templates</p> <p>For the Group-Tracing approach (K-12 students only), refer to the Group-Tracing Advisory templates</p>

Quarantine Guidance for Close Contacts who were

Exposed at Home, Childcare, Preschool, Institutions of Higher Education, or Other Community Settings

Exempt from Quarantine	Guidelines
Close contacts who are: Up-to-date (boosted), Booster-eligible (but <u>under</u> the age of 18), Fully-vaccinated by primary series (not yet booster-eligible), or recently confirmed positive in the 90 days prior to exposure (already recovered).	Please refer to guidelines outlined in the Quarantine Exemptions section.

Unvaccinated	Guidelines
Child, Student, Staff, or other individual was exposed to a COVID-19 Case while on-site, at home, or in the community.	They must complete Standard Quarantine . <i>If exposed at home, refer to FAQ Scenario F (Household exposures) for more details on ways to stop continual exposure and reduce quarantine length.</i>

Booster Eligible (age 18+)	Guidelines
Staff member was exposed to a COVID-19 Case while on-site, at home, or in the community.	Staff Contact may opt for Work Quarantine . <i>If exposed at home, refer to FAQ Scenario F.</i>
Student or other individual was exposed to a COVID-19 Case while on-site, at home, or in the community.	They must complete Standard Quarantine . <i>If exposed at home, refer to FAQ Scenario F.</i>

Type of Quarantine	Protocol
Standard (at-home) Quarantine	<p>Quarantine at home for 5-10 days, Day zero being the date of most recent exposure.</p> <p>If they remain asymptomatic:</p> <ul style="list-style-type: none"> • May discontinue quarantine after Day 5, if tested negative on/after Day 5 • May discontinue quarantine after Day 10, if declined testing on/after Day 5 <p>Should wear a well-fitting mask around others through Day 10, especially indoors.</p> <p>➤ If symptoms develop, they should get tested and isolate in the meantime</p>
Work Quarantine	<p>Must quarantine at home for 5-10 days (following protocol above).</p> <p>The worker may continue working on-site (in-person) during quarantine if they:</p> <ul style="list-style-type: none"> ✓ 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 K-12 Settings (Individual CT Approach)

Exempt from Quarantine	Guidelines
Close contacts who are: Up-to-date (boosted), Booster-eligible (but <u>under</u> the age of 18), Fully-vaccinated by primary series (not yet booster-eligible), or recently confirmed positive in the 90 days prior to exposure (already recovered).	Please refer to guidelines outlined in the Quarantine Exemptions section.

Unvaccinated	Guidelines
Staff was in close contact to a COVID-19 Case in a K-12 setting	Staff Contact must complete Standard Quarantine . <i>(if exposed outside of the K-12 setting, refer to previous page)</i>
Student was in close contact to a COVID-19 Case in a K-12 setting	Unmasked exposure: Contact must complete Standard Quarantine .** Mask-on-Mask exposure: Contact may opt for Modified Quarantine .**

Booster Eligible (age 18 +)	Guidelines
Staff member was in close contact to a COVID-19 Case in a K-12 setting.	Staff Contact may opt for Work Quarantine .
Student was in close contact to a COVID-19 Case in a K-12 setting	Unmasked exposure: Contact must complete Standard Quarantine .** Mask-on-Mask exposure: Contact may opt for Modified Quarantine .**

Type of Quarantine	Protocol
Standard (at-home) Quarantine	<p>Quarantine at home for 5-10 days, Day zero being the date of most recent exposure.</p> <p>If they remain asymptomatic:</p> <ul style="list-style-type: none"> May discontinue quarantine after Day 5, if tested negative on/after Day 5 May discontinue quarantine after Day 10, if declined testing on/after Day 5 <p>Should wear a well-fitting mask around others through Day 10, especially indoors.</p> <p>➤ If symptoms develop, they should get tested and isolate in the meantime</p>
Modified Quarantine (K-12 students only)	<p>Must quarantine at home for 5-10 days (following standard protocol above).</p> <p>The student may continue to attend in-person instruction during quarantine if they:</p> <ul style="list-style-type: none"> ✓ Remain asymptomatic ✓ Get tested 2x (PCR or antigen), or once if on Day 5 or later ✓ Continue to appropriately mask, as required ✓ Are excluded from all community and extracurricular activities (including sports)

** Schools who cannot realistically conduct individual contact tracing (due to high volume of cases on campus) should opt for the [Group-Tracing approach](#) for exposed students. Staff close contacts must still be individually traced. See next page for details.

Group-Tracing Approach

only for Students Exposed in K-12 Settings

This approach is to be used during a surge, only when a K-12 school cannot complete Individual CT Approach for students, as outlined on previous page. Exposed staff must still be quarantined as applicable. This approach is not intended to retroactively “release” individuals from Quarantine if the school was able to complete Individual CT for that exposure event.

Exposed Group of Students	Guidelines
Exposed group of K-12 students (regardless of vaccination status or prior infection) who shared indoor space with a COVID-19 Case in a K-12 setting, for 15 minutes (or more) over the course of 24 hours.	<ul style="list-style-type: none">• May stay in school for in-person instruction after exposure• May continue with extracurricular activities and do not need to quarantine outside of school• Should get tested for COVID-19 (at least once) within 3-5 days after last exposure• Should wear a face-covering as directed• Should stay home and test ASAP if symptoms develop <p>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.</p> <p>For more details on this approach, please refer to: CDPH Group-Tracing Approach for K-12 Students and CDPH K-12 Q&A / FAQ</p>

Staff Exempt from Quarantine	Guidelines
Close contacts who are: Up-to-date (boosted), Booster-eligible (but <u>under</u> the age of 18), Fully-vaccinated by primary series (not yet booster-eligible), or recently confirmed positive in the 90 days prior to exposure (already recovered).	Please refer to guidelines outlined in the Quarantine Exemptions section.

Booster Eligible Staff (age 18 +)	Guideline
Staff member was in close contact to a COVID-19 Case	Staff Contact may opt for Work Quarantine .

Unvaccinated Staff	Guidelines
Staff was in close contact to a COVID-19 Case	Staff Contact must complete Standard Quarantine .

Scenario-based FAQ

FAQ - Scenario	Recommendation
<p>Scenario A:</p> <p>A student at our school has a sibling who has been exposed to COVID-19 and is in quarantine.</p> <p>Can our student continue coming to school?</p>	<p>It is best for the exposed sibling (Sibling A) to separate from others in the home (separate bedroom and bathroom), in case they become infectious during their quarantine. Regardless of whether or not they are able to separate, the student who is not quarantining (Sibling B) may continue coming to school.</p> <p>If Sibling A begins developing symptoms, 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 at-home quarantine (if not exempt).</p>
<p>Scenario B:</p> <p>A student at our school tested positive for COVID-19, and they were in multiple classes during their infectious period.</p> <p>Do all of the students in those classes need to quarantine?</p>	<p>Only the individuals who were in close contact 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).</p> <p>The COVID Coordinator should work with the school to determine if they can confidently confirm 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.</p>
<p>Scenario C:</p> <p>A student received their 2nd vaccine dose one week ago but was just exposed to a positive case. Do they need to quarantine?</p>	<p>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).</p> <p>If they are exposed before they reach the two-week mark, they are not considered fully-vaccinated and they must quarantine as directed.</p>
<p>Scenario D:</p> <p>An athlete at our school tested positive for COVID-19, and was at practice all week.</p> <p>Does their entire team need to quarantine?</p>	<p>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.</p> <p>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.</p> <p>In moderate-to-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) unless fully-vaccinated and asymptomatic.</p> <p>The school may opt for the Group-Tracing approach for these scenarios.</p>

FAQ - Scenario	Recommendation
<p>Scenario E: Preschool exposures</p> <p>A COVID-19 positive child at our preschool was present while infectious. Do all of the kids in their cohort need to quarantine?</p>	<p>In the preschool setting, proper mitigation measures (masking, distancing, etc.) and strict classroom seating charts are not always maintained.</p> <p>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, specifically if indoors.</p>
<p>Scenario F: Household Exposure</p> <p>A student (not vaccinated) at our school/program has a household member who is positive for COVID-19.</p> <p>When can they come back to school?</p>	<p>If the student has had close contact to a positive household member, they must quarantine at home (they are NOT eligible for modified quarantine).</p> <p>If they <i>cannot</i> separate completely from the positive household member, and they are being continually exposed in the home, their quarantine "clock" may not begin until after their final exposure to the positive case. Final exposure may end up being the positive case's last day of their isolation/infectious period.</p> <p>If the student can completely separate, then their quarantine clock can begin the day after they completely separated (the day after last exposure).</p> <p>Complete separation in the home includes <u>all</u> of the following:</p> <ul style="list-style-type: none"> ✓ Separate bedroom - or head of beds at opposite ends of room, 6+ feet apart ✓ Separate bathroom - Alternatives: showering at separate times of day, wiping down high-touch surfaces after shower steam settles, keeping toothbrushes separated, etc. ✓ Keeping at least 6 feet of distance from others at all times ✓ AND wearing masks when sharing common spaces (both the positive individual and the other household members)
<p>Scenario G: Allergy Symptoms</p> <p>A student at our site has sniffles or sneezing (mild symptoms).</p> <p>Do they need to be tested?</p> <p>When can they come back?</p>	<p>When addressing allergy-type symptoms, an informed decision about what warrantstesting should be made on a case-by-case basis. This decision can be made by the school nurse, or COVID liaison, in conjunction with Public Health as needed.</p> <p>Schools should consider if the child in question has a documented health history of allergies (alternate diagnosis), and that their current symptoms match their typical baseline symptoms for that diagnosis. If there is a change from their baselinesymptoms, this would require follow up (and possibly testing).</p> <p>However, if the person has any other COVID-19 symptoms in addition to the runny nose/allergy symptom, a possible recent exposure to COVID-19, or if the nasal discharge is not clear - then it would be indicated that they test right away for COVID-19, and be isolated while waiting for results. Those who do not test (or do not receive an alternate diagnosis from a primary care provider) will need to complete a minimum 10 day isolation as described in the Isolation protocol section.</p> <p>Those who test negative after symptom onset can return to their class/work when they meet the site's non-COVID illness policy criteria.</p> <p>Please note that other certain infectious diseases (like Norovirus) still need to be reported to Sonoma County Department of Public Health.</p> <p>Please report all non-COVID infectious diseases to: PHNurse@sonoma-county.org</p>