8/17/2020

Public Health Interim Guidance for Pre-K-12 Schools and Day Care Programs[1] for Addressing COVID-19

Procedures for Students, Faculty and Support Staff who Test Positive:

- An immediate notification should be sent to the school/day care from the parent, faculty, or support staff, and this reporting requirement should be communicated to all in advance.
- The school/day care should send an immediate written notification to the Local Health Department (LHD) and begin discussions on next steps; the school/day care should share with the LHD all available information about the case's movements and potential exposures within the facility. This includes:
  - Total number of classrooms impacted
  - Total number of students at the school/day care and total number of classrooms
  - Total number of staff at the school/day care
  - Total number of students and staff potentially exposed
  - The COVID-positive individual's reported/observed onset date of symptoms
  - The COVID-positive individual's last day at the school/day care
- The LHD will contact the COVID-positive staff person, or the parents/guardians of the COVID-positive child to complete the investigation and conduct contact tracing to identify close contacts to the case (persons within 6 feet, for at least 15 minutes cumulatively while the individual was infectious).
- If the COVID-positive child/staff person was in the daycare/school during their infectious period, i.e., from 48 hours prior to symptom onset (for a symptomatic person) or, 48 hours before specimen collection (for an asymptomatic person) through the date of last attendance, areas used by the individual should be cleaned and disinfected thoroughly according to CDC guidelines and as described below.
- The school/daycare will notify families, teachers, and support staff while maintaining confidentiality as required by the Americans with Disabilities Act (ACA) and the Family Educational Rights and Privacy Act. The notification should be sent as soon as possible and include information on symptom monitoring, what to do if symptoms develop, COVID-19 prevention strategies, and information on what the school/day care is doing in response to the positive case. In advance of a positive case, the school/day care

[1] Day Care Programs includes all day care centers, day care homes, and group day care homes licensed by the Department of Children & Family Services (DCFS) and day care centers that are exempt from licensure.

should prepare a draft notification and have it reviewed by the LHD. A sample notification is available on ISBE's COVID website and IDPH's LHD COVID WebPortal.
- The COVID-positive individual should remain in home isolation as instructed by the LHD.
- Before isolation precautions are discontinued and clearance is granted for entry or return to school/day care, CDC's Discontinuation of Isolation requirements should be met.

Procedures for Students, Faculty and Support Staff who are Close Contacts to a Confirmed COVID-19 Case:

- Schools/day cares should provide to the LHD attendance records, classroom schedules, seating charts, transportation schedules, and staff assignments to identify close school contacts (within 6 feet for 15 minutes) to the COVID-positive child/staff person.
- Close household and social contacts to a COVID-19 case will be identified by the LHD through contact tracing interviews with the COVID-positive staff person, or the parents/guardians of the COVID-positive child.
- In day care settings, especially with infants and toddlers, the entire class and staff will be considered close contacts.
- The school/day care should determine if other staff members not normally assigned to classrooms were exposed by reviewing records and interviewing staff.
- Close contacts to a case of COVID-19 should be quarantined at home for 14 days, as long as they remain asymptomatic. Siblings, parents/guardians, and other household members of the case who are deemed to be close contacts will also be quarantined. After completing 14 calendar days in quarantine, asymptomatic contacts may return to school/day care.
- If the contact becomes symptomatic during quarantine, they will be managed as a probable case (if not tested) or a confirmed case (if they test positive).
- Probable and confirmed cases should complete 10 days of isolation from the date of first symptom onset, demonstrate improvement of symptoms and be fever-free for 24 hours without use of fever-reducing medications before they are allowed to return to school/day care.

Procedures for Students, Teachers, and Support Staff who Become Sick at School/Day Care:

- If a student or staff person at a school or day care becomes sick with COVID-like symptom, the school or day care should immediately notify the LHD.
- The student or staff person who becomes sick while at school/day care or arrives sick with a COVID-like symptom(s) should be immediately masked, if not already so, and sent to the designated separation room (a room that can be used to isolate a sick child for evaluation of the sick individual).
- If the nurse is screening a symptomatic student, it will be safest for them to be wearing fit tested N95 mask, eye protection with face shield or googles, gown and gloves. With N95 masks, the user should be trained on the type of PPE required and how to don (put on) and doff (remove) it correctly and safely. Respirators such as N95s must be used as part of a written

respiratory protection program.[3] OSHA requires that N95 masks be fit tested prior to use. This is an important step to ensure a tight fit for the mask to be effective in providing protection. Schools should contact their LHD to determine where fit testing can be obtained in their area.

- Based on clinical assessments and when possible (e.g., schools with school-based health clinics), the sick individual should be tested for COVID-19 and other respiratory viruses, where indicated. Depending on the severity of illness:
    - Sick students and staff should be:
        - safely transported home by parent or guardian as soon as possible, or
        - safely transported by parent or guardian to a healthcare facility for clinical evaluation and testing, if necessary.

  Schools/day cares are encouraged to work with their LHD to arrange for medical evaluation and testing options to ensure testing arrangements can be made quickly when indicated.

    - Sick individuals should remain in home isolation until testing is completed. If COVID-negative, the child or staff person should remain out of school/day care until they have been afebrile (fever-free) for 24 hours without fever-reducing medication, and symptoms improved.
    - If they test COVID-positive, refer to the section, "**Procedures for Students, Faculty and Support Staff who Test Positive**."
    - If testing is not performed due to the clinical judgment of the healthcare provider, a medical note is needed to return to school/day care documenting that there is no clinical suspicion for COVID-19 infection and indicate an alternative diagnosis with exclusion consistent with this diagnosis, e.g., 24 hours afebrile.
    - If testing is not performed for other reasons, the child should remain out of school/day care for 10 calendar days after symptom onset and 24 hours afebrile (fever-free) without fever-reducing medication and symptoms improved.

- All areas used by the sick individual should be cleaned and disinfected thoroughly according to CDC guidelines and as described below.

Procedures for Contact Tracing and Quarantining Persons Exposed to a Confirmed COVID-19 Case:

- Parents/guardians of a COVID-positive child, or a COVID-positive staff person will be interviewed by personnel from the LHD. The purpose for the interview is to identify everyone with whom the COVID-positive individual had close contact (within 6 feet for a cumulative 15 minutes or more while the individual was infectious).
    - The infectious period begins 2 days before the onset of symptoms (for a symptomatic person) or 2 days before the positive sample was obtained (for an

asymptomatic person) and ends when the COVID-positive individual was placed in isolation.
    - Factors to consider when defining close contact include proximity, the duration of exposure (e.g., longer exposure time likely increases exposure risk), and whether the exposure was to a person with symptoms (e.g., coughing likely increases exposure risk). Brief interactions are less likely to result in transmission; however, symptoms and the type of interaction (e.g., did the infected person cough directly into the face of the exposed individual) remain important.
    - Parents/guardians and staff must cooperate with the LHD for purposes of conducting contact tracing or any outbreak pursuant to the Control of Communicable Disease Code, 77 Illinois Administrative Code 690.
- School/day care personnel will inform the LHDs about possible exposures within the school/day care, including transportation, classroom, common areas and extracurricular activities. Schools/day cares should designate a person for this role and have them available after hours.
- All close contacts to a confirmed case of COVID-19 will be placed in quarantine for 14 days and monitored daily by the LHD for the onset of any signs and symptoms of COVID-19 . Testing of close contacts is also recommended and where possible, should be facilitated by the school/day care/LHD. CDC does not recommend universal testing of all students and staff. See CDC's Interim Considerations for testing in schools.

Procedures for Temporary Closure and Environmental Cleaning and Disinfection when a Confirmed or Possible Case of COVID-19 is Identified in a School/Day Care:

- If a person diagnosed with COVID-19 is determined to have been within the school/day care during the 48 hours prior to symptom onset (for a symptomatic person) or 48 hours before specimen collection (for an asymptomatic person), the school/day care may be closed temporarily for cleaning and disinfection. School/day care closure will be determined by the LHD investigation as described below.
- An initial, temporary closure allows time for the LHD to gain a better understanding of the COVID-19 situation impacting the school/day care. This allows the LHD to help the school/day care determine appropriate next steps, including whether an extended dismissal duration is needed to stop or slow further spread of COVID-19.
- Areas used by the individual with COVID-19, e.g., classroom, restrooms, separation room in the School Nurse's office, will be closed off for as long as practical before beginning cleaning and disinfection to minimize potential for exposure to respiratory droplets. If possible, wait up to 24 hours before beginning cleaning and disinfection.
- Cleaning staff should clean and disinfect all areas (e.g., offices, bathrooms, and common areas) used by the individual with COVID-19, focusing especially on frequently touched surfaces.
- Schools/day care facilities should clean, sanitize and disinfect toys and bedding per CDC's guidance.

Procedures for Outbreak Response and Consideration for Closure:

- An outbreak is defined as two cases that are linked epidemiologically with respect to person, place, and time. In other words, the two cases have shared close contacts and location and have onsets within 14 calendar days of each other. Conversely, two cases that occurred in different time frames (at least calendar 15 days apart), separate locations, and having no common source of exposure would not constitute an outbreak.
- Once an outbreak is identified, the LHD will further investigate to determine the extent of exposures at the school/day care and what control measures are needed to mitigate the outbreak. Alternative social distancing strategies, less drastic than closure, might include:
    - Quarantining the affected classroom, especially for infant and toddler classrooms where masking is not achievable and social distancing is challenging.
    - Suspending in-person learning for affected classes
    - Closing playgrounds.
    - Canceling non-essential activities and meetings.
    - Keeping students in stable class groups or classrooms and moving teachers between classes, if necessary.
    - Increasing spacing between students in classes.
    - Shortening the in-person school week.
    - Staggering school/day care start and lunch/break times across year groups or classes.

If there is substantial transmission in the local community, local health officials may suggest remote instruction as part of a community mitigation strategy. This longer-term, and likely broader-reaching, remote instruction is intended to slow transmission rates of COVID-19 in the community.

- Windows should be opened to increase air circulation in the area used by the individual with COVID-19.
- If surfaces are dirty, they should be cleaned using a detergent or soap and water prior to disinfection.
- For disinfection, most common EPA-registered household disinfectants should be effective.

COVID-19 EXCLUSION GUIDANCE

Decision Tree for Symptomatic Individuals in Pre-K, K-12 Schools and Day Care Programs

IDPH
ILLINOIS DEPARTMENT OF PUBLIC HEALTH

Send home or deny entry (and provide remote instruction) if **ANY** of the following symptoms are present: Fever (100.4°F or higher), headache, shortness of breath, cough, sore throat, vomiting, diarrhea, abdominal pain.
In addition, some individuals (especially adults) may present with the following symptoms:
congestion or runny nose, new loss of sense of taste or smell, nausea, fatigue, muscle or body aches.
Medical Evaluation and Testing are Strongly Recommended for ALL Persons with COVID-Like Symptoms.

Status	COVID-19 diagnostic test Positive (confirmed case) OR COVID-19 diagnosis without diagnostic testing (probable case)	Symptomatic individual with a negative COVID-19 diagnostic test[2] *(Negative COVID-19 diagnostic test must be from a specimen collected 48 hours prior to or after symptom onset.)*	Symptomatic individual with an alternative diagnosis without negative COVID-19 diagnostic test[2]	Symptomatic individual without diagnostic testing or clinical evaluation	Asymptomatic individual who is a close contact to a confirmed OR probable COVID-19 case
Evaluated by Healthcare Provider?	YES	YES / NO	YES	NO	NA
Return to School Guidance	Stay home at least ten[1] calendar days from onset of symptoms **AND** for 24 hours with no fever (without fever-reducing medication) **AND** improvement of **respiratory** symptoms.	Stay home until symptoms have improved/resolved per return-to-school criteria for diagnosed condition. Follow provider directions, recommended treatment & return to school guidance as per school policies and IDPH Communicable Diseases in Schools.	Stay home until symptoms have improved/resolved per return-to-school criteria for diagnosed condition. Follow provider directions, recommended treatment & return to school guidance as per school policies and IDPH Communicable Diseases in Schools.	Stay home at least 10[1] calendar days from onset of symptoms **AND** for 24 hours with no fever (without fever-reducing medication) **AND** improvement of respiratory symptoms.	Stay home for 14 calendar days after last exposure to the COVID-19 case. If COVID-19 illness develops, use the ten-day isolation period[1] guidance for a COVID-19 case from the onset date. Testing is recommended.
Quarantine for Close Contacts?	YES	NO	NO	YES	NA
Documentation Required to Return to School	'Release from Isolation' letter issued by Local Health Department and provided to parent/guardian or individual	Healthcare Provider's note with alternative diagnosis **and** negative COVID-19 test result	Healthcare Provider's note with alternative diagnosis	'Release from Isolation' letter issued by Local Health Department and provided to parent/guardian or individual	'Release from Quarantine' letter issued by Local Health Department and provided to parent/guardian or individual

1 Severely immunocompromised or severely ill: may need to isolate for 20 days as per guidance from individual's infectious disease physician.
2 If individual has been identified by public health for quarantine or knows they are a close contact to a case, the 14-calendar-day quarantine must be completed.

8/17/2020 Interim Guidance, Subject to change