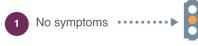
Student Symptom Decision Tree Low-risk: general symptoms High-risk: red flag symptoms Fever (≥100.4°F) Sore throat Cough Congestion/runny nose Headache **Difficulty breathing** Fatigue/muscle Loss of taste/smell Nausea/vomiting/diarrhea or body aches Symptomatic and exposure to a COVID-19 positive person? within 6 ft of a COVID + or clinically compatible person for >15 min in a 24 hr period, regardless of masking Return to school 24 hrs NO ▶1 low risk symptom Send home after symptom resolution (without fever reducing medication) ▶≥2 low risk symptoms Evaluation by Send home health care provider OR 1 high risk symptom Health care provider confirms alternative diagnosis for symptoms. A health care Return to school after 24 hrs without fever provider's note must be on file. and symptoms improving Certified SARS-CoV-2 PCR or Antigen Test not needed Return to school after 24 hrs without fever Negative certified SARS-CoV-2 PCR and symptoms improving or Antigen Test Return to school only after 10 days since Positive certified SARS-CoV-2 PCR symptom onset and 24 hrs without fever. or Antigen Test **Quarantine close contacts of confirmed** No provider visit or test. cases. Contact HCA if questions. (within 6 feet for >15 min in a 24 hr period, regardless of masking) Vaccinated or Documented COVID within 90-days Isolation for 10 days regardless of test results Any symptoms Get tested Get care No quarantine No required testing* No Symptoms Continue to monitor for symptoms through day 14 *CDC recommends testing between day 3-5 Unvaccinated

Face covering (well-fitting and used correctly) on BOTH infected and exposed person



Modified 10-day quarantine while attending school in-person if:

- school in-person it:

 Wears a mask (inside and outside)
 - Tests 2x per week for the 10 days, at least 3 days apart
 - Symptoms develop ••••••• Quarantine from any extra-curricular activity for 14 days
 - Modified quarantine may end at day 7 if test (-) after 5 days from last exposure (students may return to extracurricular activities as well)
- No face covering on EITHER infected or exposed person

Symptoms

No symptoms

of test results
Get tested

 Home self-quarantine until after 10 days from last exposure (if not tested) OR

· Isolation for 10 days regardless

May return to school after 7 days if test negative after 5 days from last exposure (students may return to extracurricular activities as well)



This care pathway was designed to assist school personnel and is not intended to replace the clinician's judgment or establish a protocol for all patients with a particular condition. Diagnosis and treatment should be under the close supervision of a qualified health care provider. Guidance might change 08-09-2021

COMMON QUESTIONS & ANSWERS

FACE COVERINGS

Q. Why does the AAP still recommend universal masking in schools?

- 1. Newly discovered variants of COVID-19 are more easily spread among children, adolescents, and adults
- To protect unvaccinated students, some who are not yet eligible for immunization, from COVID-19 and to reduce COVID transmission
- 3. Difficulty in monitoring or enforcing mask policies for those who are not vaccinated

Q. When does a child need to wear a mask at school?

A. According to the CDC and CDPH, masks should be worn inside the classroom, but masks are not required outside, assuming 3-feet of separation is maintained.

Q. When do faculty and staff need to wear a mask at school?

A. Teachers, regardless of immunization status, should remain masked when indoors at school, even when a student is not present.

PHYSICAL DISTANCE

Q. Do we still need to enforce physical distancing in schools?

A. When masks are worn, there are no physical distancing requirements in the K-12 setting, which includes school transportation. During times when masks come off, such as during snack or lunch, physical separation of at least 3-feet is important to reduce transmission of COVID-19.

GENERAL HEALTH & SCREENING TESTING RECOMMENDATIONS (refer page 1)

Q. How does a health screener know whether a student with minor symptoms should be sent home?

A. To dismiss COVID as a cause, we recommend that the following questions be considered:

- Does the student have any previously reported health concerns that may have similar symptoms as Covid such as allergies, asthma, diabetes, or IBS?
- Has the child had any exposure to other illnesses, i.e., the mother has a cold and has tested Negative for Covid?
- If the student has a cough, is the cough continuous or rarely noted? If the cough is not explained by a
 known health issue such as asthma and does not last longer than 15 minutes, consider allowing the
 student to rest.
- If the child's symptoms (i.e., runny nose or congestion), impact their ability to wear a mask, you may
 dismiss COVID as a cause, but still need to send a child home.

CASE REPORTING/CONTACT TRACING/INVESTIGATION

Q. Is the school responsible for case reporting and contact tracing?

A. Schools are required to report COVID-19 cases to the local public health department in accordance with applicable privacy laws as soon as they are informed (Title 17, section 2500). Districts must continue to conduct contact tracing for close contacts (less than 3-feet of separation, unmasked, with contact duration > 15 minutes) that occur in indoor or outdoor environments.

QUARANTINE & ISOLATION RECOMMENDATIONS (see diagram on page 1) HAND HYGIENE RECOMMENDATIONS:

Q. Is hand washing still a critical mitigation strategy?

1. Yes! Please teach and reinforce washing hands throughout the day, especially before and after eating, after using the toilet, and after handling garbage, or removing gloves.

CLEANING RECOMMENDATIONS

Q. How often should indoor surfaces be cleaned to keep students and faculty safe?

A. Cleaning once a day is usually enough to sufficiently remove a potential virus that may be on surfaces. Surfaces that encounter food should be washed, rinsed, and sanitized before and after meals. Use recommended cleaning agents (see U.S. Environmental Protection Agency COVID-19 list).

FOOD SERVICE RECOMMENDATION

Q. If children are eating outside, COVID transmission is unlikely, right?

A. Data suggests this eating during snack or lunch can be a time when COVID-19 is commonly transmitted in schools. Maximize distance as much as possible while eating, especially indoors.

VACCINATION VERIFICATION

Q. Should schools try to keep track of COVID-19 vaccinations?

A. Schools should maintain documentation of a student's immunization records, including COVID-19, in compliance with all relevant state, local or territorial laws.

COVID-19 SAFETY PLANNING

Q. We want to keep our school safe. What works?

A. Develop and share your safety plans, outline expectations, guidelines, and consequences.

A. Clarify roles and responsibilities for plan implementation and establish an oversight committee. Clearly assign roles (health screening personnel, food service staff, COVID-19 liaison to report cases and support contact tracing, eating supervision to maintain physical distance, & staff to maintain cleaning supplies).