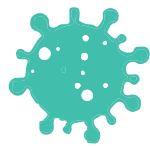


COVID-19 School Manual

K-12 public, private, and charter schools

*This manual is not intended for use by higher education institutions
or child care settings.*



CORONAVIRUS
UTAH.GOV

Responding to COVID-19 in your school

There are many things to think about as schools reopen during the pandemic. Schools are not only a place of learning for students, but workplaces for teachers and employees. Decisions about how to respond to COVID-19 in schools should be made to protect both the immediate and long-term health and safety of students, teachers, and employees.

The goal of the Utah Department of Health (UDOH) and Utah's 13 local health departments is to provide a safe learning environment for students and a safe workplace for teachers and employees.

COVID-19 spreads very easily and quickly. Even if you are doing everything right, your school may see cases of COVID-19. The types of prevention measures in schools and how much COVID-19 is in your community will also impact your school. Schools cannot stop the spread of COVID-19 alone. It is critical for communities, families, and individuals to take all of the necessary measures they can to lower the spread of COVID-19.

The two most important things you need to know are:

1. What to do if a student, teacher, or employee is exposed to COVID-19 or tests positive for the virus.
 2. How to make a healthy learning environment and protect your school.
-

COVID-19 is a new disease. We learn more every day about COVID-19 and the best ways to stop it from spreading.

We know this can make it very hard for school administrators, teachers, employees, and families to know what to do. This manual provides public health recommendations to help you make informed decisions about how to protect your school and prevent the spread of COVID-19.

Recommendations may change as we learn more about COVID-19. Schools and public health need to be willing to adapt to these changes as we learn more about the best ways to keep students, teachers, and employees safe and schools open for in-person learning.

COVID-19 School Manual

This manual provides public health recommendations for K-12 public, private, and charter schools. It is not intended to be used by institutions of higher education or child care settings.

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Why is it important to open schools for in-person instruction?^{1,2,3,4}

Schools play an essential role in the infrastructure and well-being of our state and our communities.



Schools provide safe and supportive environments.

- When they are in school, children benefit from important routines, structure, and support services.
- Schools are essential for the economic health of communities. Schools give jobs to teachers and other employees and allow parents, guardians, and caregivers to be able to work.
- Schools provide critical psychological, mental, and behavioral health services to children who may not have access to these services outside of school (such as psychological counseling, and other mental health and behavioral assessments).



Schools provide critical instruction and academic support that benefit students and communities in both the short- and long-term.

- Schools provide age-appropriate instruction and support students' academic development.
- In-person instruction allows teachers and students to communicate better. It also provides students with critical academic services which are not always available or accessible if students are not in school. Some examples of these services are: school-based tutoring, special education, and other specialized learning supports.

¹ <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/prepare-safe-return.html>

² <https://www.nationalacademies.org/news/2020/07/schools-should-prioritize-reopening-in-fall-2020-especially-for-grades-k-5-while-weighing-risks-and-benefits>

³ <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/>

⁴ <https://pws.byu.edu/making-sense-of-the-research-on-covid-19-and-school-reopenings>



Students benefit from the interpersonal interactions they get in school.

- Social interaction for children in grades K-12 is important not only for emotional wellbeing, but also for children's language, communication, social, and interpersonal skills.
- Schools provide part of children's foundation for socialization. When children are out of school, they may be separated from their social network and peer-to-peer social support.
- Teachers are able to more actively participate in student learning and provide feedback.
- In-person instruction may be even more important for students with more learning needs. Children with disabilities may not have virtual access to the support they need, such as specialized instruction, related services, or any additional support required by their Individualized Education Programs (IEPs) or 504 Plans.
- Students may also not have access virtually to quality English Language Learning (ELL).



When schools are closed to in-person instruction, disparities in educational outcomes could become wider.

- Some families may not be able to fully participate in distance learning because of computer and internet access issues or lack of support due to parent, guardian, or caregivers' work schedules. Families may rely on school-based services that support their child's academic success.
- The achievement gaps which existed before COVID-19 closures, such as disparities across income levels and racial and ethnic groups, could get worse and cause long-term effects on children's educational outcomes, health, and the economic wellbeing of families and communities.
- Students who rely on key services, such as school food programs, special education and related services (speech and social work services, occupational therapy), and after school programs can't access these programs and services when school buildings are closed. Students are put at greater risk for poor health and educational outcomes.

For more information about reopening schools around the world, visit <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/prepare-safe-return.html>.

Everyone must help to prevent the spread of COVID-19 in our schools.



Who is considered part of the education sector?

- Students and parents
- Teachers
- Employees
- Paraprofessionals
- School nurses
- Volunteers



Students should:

- Tell their parents or teacher if they feel sick or have symptoms of COVID-19.
- Stay home from school and other activities if they feel sick or have symptoms of COVID-19.
- Stay home from school and other activities if they are waiting for test results or test positive for COVID-19.
- Follow the quarantine guidance if they are exposed to someone with COVID-19.
- Wear a face mask at school and when they are around people they don't live with.
- Practice physical distancing as much as possible.
- Wash their hands with soap and water often.



Parents should:

- Check their child for symptoms of COVID-19 every day before school.
- Take their child's temperature every day before school. If their child has a temperature of 100.4 degrees F (38 degrees C) or higher, the child has a fever. If parents do not have a thermometer, they should check their child's skin to see if it feels warm or is red, or ask if he or she has chills or is sweaty.
- Keep their child home from school if he or she feels sick, has a fever or other symptoms of COVID-19, or is waiting for test results.
- Get their child tested if he or she has symptoms of COVID-19.
- Follow the isolation guidance from the health department if their child or anyone who lives in their home tests positive for COVID-19.
- Follow the quarantine guidance if their child or anyone who lives in their home is exposed to someone with COVID-19.
- Before the school year starts, tell the school if their child has a health condition that puts him or her at a [higher risk](#) for severe illness from COVID-19. The health department will call parents of students who are at higher risk for severe illness from COVID-19 if they are exposed at the school.
- Review and update their child's plans (Individual Healthcare Plan, Individualized Education Plan, 504 plan) with the school.
- Help their child clean his or her face mask.
- Make sure their child, and everyone in their family, wears a face mask when they are around people they don't live with.



Teachers, employees, paraprofessionals, and volunteers should:

- Stay home from school or work if they feel sick, have symptoms of COVID-19, or are waiting for test results.
- Get tested if he or she has symptoms of COVID-19.
- Follow the isolation guidance from the health department if they test positive for COVID-19.
- Follow the quarantine guidance if they are exposed to someone with COVID-19.
- Understand privacy laws and how these laws relate to any information the school is given by the health department.
- Know if they have a medical condition that puts them at [higher risk](#) for severe disease due to COVID-19.
- Provide a safe learning environment for students by following their school plan for reopening.
- Prepare curriculum plans in case they have to isolate or quarantine.
- Encourage students to wash their hands with soap and water often.
- Wear a face mask at school and when they are around people they don't live with.
- Practice physical distancing as much as possible.



School administrators should:

- Decide who the COVID-19 point of contact (POC) will be at the school. The POC will work with the local health department on contact tracing in the school. It is a good idea for schools to have several employees who are trained as backups for this role. Provide any needed support or equipment to the POC so he or she can work with the health department on contact tracing.
- Understand the privacy laws that protect student, teacher, and employee personally identifiable information (PII).
- Make sure all teachers, employees, and the school POC understand privacy laws and how these laws relate to any information the school is given by the health department. This includes privacy laws that protect students, teachers, and employees.
- Write and implement a plan for how to reopen the school and prevent the spread of COVID-19.
- Provide a safe learning environment for students, teachers, and employees. This includes considering their emotional and social needs.
- Write a plan that addresses the needs of students, teachers, and employees at [higher risk](#) for severe illness from COVID-19. This plan may include how the school will handle parent requests for alternative learning arrangements, remote learning, and work re-assignments.
- Review plans (Individual Healthcare Plan, Individualized Education Plan, 504 plan) for students with special healthcare needs with the student's parents and update care plans to help lower the risk of exposure to COVID-19 in the school.
- Provide resources to parents and students who choose or need to continue remote learning.
- Wear a face mask at school and work, and when they are around people they don't live with.



Point of contact (POC) at each school should:

- Work with the local health department and school administrators to identify students, teachers, and employees who may have been exposed to someone with COVID-19 in the school.
- Provide a list of students, teachers, and employees who are at [higher risk](#) for severe illness from COVID-19 to the health department when there is an exposure at the school. The health department will call parents of students, teachers, and employees who are at higher risk of severe illness from COVID-19 if they are exposed at the school and to tell them what to do.
- Understand privacy laws and how these laws relate to any information the school is given by the health department. This includes privacy laws that protect students, teachers, and employees.
- Protect the privacy of the student, teacher, or employee who tests positive or is exposed to someone with COVID-19 as much as possible.
- Notify the parents of students, eligible students, teachers, and employees if they have been exposed to someone with COVID-19 in the school.
- Provide guidance on when and how to quarantine, check for symptoms, and when to get tested.
- Work with school administrators to prevent the spread of COVID-19 in the school.
- Wear a face mask at school and work, and when they are around people they don't live with.



Health departments should:

- Call students, teachers, and employees who test positive for COVID-19.
- Protect the privacy of the student, teacher, or employee who tests positive or is exposed to someone with COVID-19 as much as possible.
- Conduct a case investigation to find out if a person who tests positive was at school up to 2 days before he or she got sick or tested positive.
- Provide isolation guidance to students, teachers, and employees who test positive for COVID-19. Work closely with the POC and school administrators on contact tracing in the school.
- Get a list of students, teachers, and employees who are at [higher risk](#) for severe illness from COVID-19 from the POC.
- Call students, teachers, and employees who are at higher risk for severe illness from COVID-19 who were exposed.
- Provide quarantine guidance to students, teachers, and employees who are at higher risk for severe illness from COVID-19, as well as anyone living with a person who tests positive for COVID-19.
- Tell the POC at the school the names of students, teachers, or employees who have tested positive for COVID-19.
- Notify the POC when the student, teacher, or employee is no longer under isolation and can return to school.
- Provide guidance to the POC and school administrators on how to prevent the spread of COVID-19 in the school.



Community members should:

- Wear a face mask when they are around people they don't live with.
- Stay home if they are sick, have symptoms of COVID-19, or are waiting for test results.
- Get tested if they have symptoms of COVID-19.
- Follow quarantine and isolation guidelines if they test positive for or are exposed to COVID-19.
- Consider volunteering with community organizations to help families in their community without the resources necessary to quarantine or isolate.
- If they are an employer, follow the recommendations in the [COVID-19 Business Manual](#) to protect their employees and reduce the risk of exposure in their business.

What do we know about how COVID-19 is spread?

We still have much to learn about COVID-19. From what we know right now about the virus and about similar coronaviruses, COVID-19 is most easily spread through large respiratory droplets when in close contact with someone who has the virus (within about 6 feet).

Sometimes it can be spread through airborne transmission.⁵ Airborne transmission means that an infection can be spread by small droplets and particles that have stayed in the air for a long time or over long distances (more than 6 feet). Some viruses and bacteria, like tuberculosis, seem to be more easily spread through airborne transmission. The reason scientists and researchers believe that COVID-19 is not mainly spread by airborne transmission is based upon the infection rates of COVID-19 as it quickly spread around the world. We know a significant amount of COVID-19 cases are found in asymptomatic individuals (people who don't have any symptoms), so if the virus was spread easily through airborne transmission, scientists believe there would have been many more cases of COVID-19 early on in 2020. This data tells us that COVID-19 is spread mainly by close contact in shorter distances.



However, airborne transmission can happen under special circumstances:

- **In enclosed spaces.** People have gotten the virus if they were exposed in an enclosed space to someone who had the virus or were in the enclosed space shortly after the infected person left.
- **Exposed to respiratory particles for long periods of time.** Certain activities put more respiratory droplets into the air, such as singing, shouting, and exercising. When you do these activities with other people, it means that everyone is putting more of their respiratory droplets in the air than you would normally have. Especially if people aren't wearing face coverings in enclosed spaces during these activities. People have gotten the virus if they were in environments such as these that increased the amount of respiratory droplets in the air.
- **Inadequate ventilation or air handling.** People have gotten the virus if they were exposed in environments that had poor ventilation.



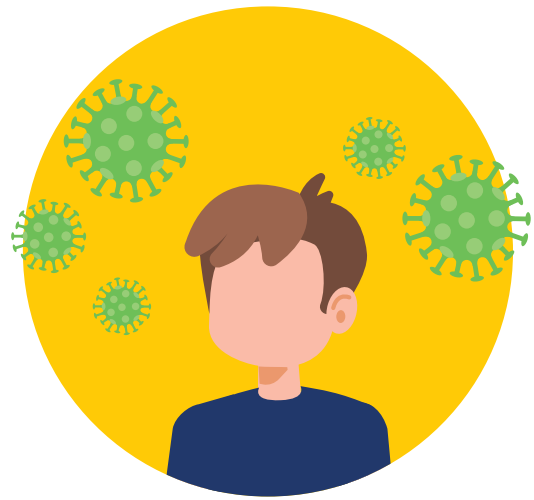
Recommended interventions (such as wearing face coverings, physical distancing, cleaning and disinfection, hand hygiene, etc.) seem to be sufficient to prevent airborne transmission of COVID-19.

It may be possible that a person can get COVID-19 by touching a surface or object that has the virus on it and then touching his or her own mouth, nose, or their eyes. This is not thought to be the main way the virus spreads. From what we know, COVID-19 can live on surfaces for hours to days. Warmer temperatures and exposure to sunlight may reduce the amount of time the virus lives on objects. We are still learning many things about COVID-19 and how it spreads.

⁵ <https://www.cdc.gov/coronavirus/2019-ncov/more/scientific-brief-sars-cov-2.html>

What do we know about COVID-19 and children?^{6,7}

The amount of available data and research on COVID-19 and children is growing. This not only helps us understand the risk of the virus to children, but also gives us more information about the best ways to prevent the spread of COVID-19 in schools. The science available right now suggests:



- Fewer children have been sick with COVID-19 than adults. However, children of any age can get the virus that causes COVID-19 and spread the virus to other people.
- When children do get COVID-19, they usually have mild symptoms or even no symptoms at all.⁸ However, some children can get very sick from COVID-19.
- Children can spread the virus that causes COVID-19 even when they do not have any symptoms (asymptomatic).
- Children younger than age 10 may be less likely to get COVID-19 and less likely to spread the virus to others. Children and adolescents older than age 10 may spread the virus as much as adults.
- Studies from other countries show that most children get COVID-19 from a family member.
- Since March 2020, there have been 2 times as many cases of adolescents aged 12-17 years old who have gotten COVID-19 than children aged 5-11 years old.

⁶ <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/prepare-safe-return.html>

⁷ <https://pws.byu.edu/making-sense-of-the-research-on-covid-19-and-school-reopenings>

⁸ <https://jamanetwork.com/journals/jamapediatrics/fullarticle/2770150>



- Children are significantly less likely than adults to be hospitalized or die from COVID-19 related illnesses. However, it is still very important to help children take precautions to stay safe. Even though the risk is lower, 1 in 3 children who are hospitalized with a COVID-19 related illness end up in intensive care.
- Most children who had severe illness from COVID-19 had underlying medical conditions. Severe illness means they may need to be in the hospital, in intensive care, need a ventilator to help them breathe, or may even die.
- Children with intellectual and developmental disabilities are more likely to have additional health conditions that put them at increased risk for severe illness from COVID-19.
- Although rare, some children have developed multisystem inflammatory syndrome (MIS-C) after exposure to COVID-19. According to the Centers for Disease Control and Prevention (CDC), as of May 20, 2020, most of the children hospitalized with MIS-C had recovered.
- We do not know the long-term health effects of COVID-19 on children. Some research indicates youth and young adults may be at risk for heart damage even if they had mild symptoms of COVID-19.

Some students, teachers, and employees may be at higher risk for severe illness from COVID-19

We are learning more about COVID-19 every day. There may be other medical conditions that increase your risk of severe illness from COVID-19, which are not included here. This list will likely change as doctors and scientists learn more about COVID-19. Talk to your doctor about any extra precautions you should take if you have a condition you feel may put you at higher-risk for severe illness from COVID-19. For more information, visit <https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-with-medical-conditions.html>.

Adults of any age with the following conditions **are** at increased risk of severe illness from COVID-19:

- Cancer
- Chronic kidney disease
- COPD (chronic obstructive pulmonary disease)
- Down syndrome
- Heart conditions, such as heart failure, coronary artery disease, or cardiomyopathies
- Immunocompromised (weakened immune system) from solid organ transplant
- Obesity (body mass index, or BMI, of 30 or higher)
- Pregnancy
- Sickle cell disease
- Smoking
- Type 2 diabetes

Based on what we know now, adults with the following health conditions **might be** at increased risk for severe illness from COVID-19:

- Asthma (moderate to severe)
- Cerebrovascular disease (a disease which affects blood vessels and blood supply to the brain)
- Cystic fibrosis
- High blood pressure or hypertension
- Immunocompromised state (a weakened immune system) from blood or bone marrow transplant, immune deficiencies, HIV/AIDS, use of corticosteroids, or use of other immune weakening medicines
- Liver disease
- Neurologic conditions such as dementia
- Overweight (body mass index, or BMI greater than 25, but less than 30)
- Pulmonary fibrosis (having damaged or scarred lung tissue)
- Thalassemia (a type of blood disorder)
- Type 1 diabetes



Even though children have been affected less by COVID-19 than adults, they can still get the virus that causes COVID-19 and suffer severe illness. Some children have had a rare, but serious complication from COVID-19, called [Multisystem Inflammatory Syndrome in Children, or MIS-C](#). This complication is not the same thing as the severe illnesses experienced by children who are at higher-risk from underlying medical conditions. We don't know yet which children are at risk for MIS-C, but it's not just children with underlying health conditions. Although most children who get COVID-19 don't get very sick, and MIS-C is rare, this is one of the reasons it's so important to take precautions and reduce the chance children are exposed to the virus. We just don't know yet which children are at risk. However, based on what we know right now, children who have one of the following medical conditions are at a higher risk of severe illness, compared to children who do not have one of these conditions:

- Asthma and other chronic lung diseases
- Chronic kidney disease
- Congenital heart disease (heart disease he or she has had since birth)
- Diabetes
- Immunosuppression due to cancer or from taking medicine that weakens your immune system, like corticosteroids, etc.
- Inherited metabolic disorders
- Medical complexity
- Obesity
- Severe genetic disorders
- Severe neurologic disorders
- Sickle cell disease



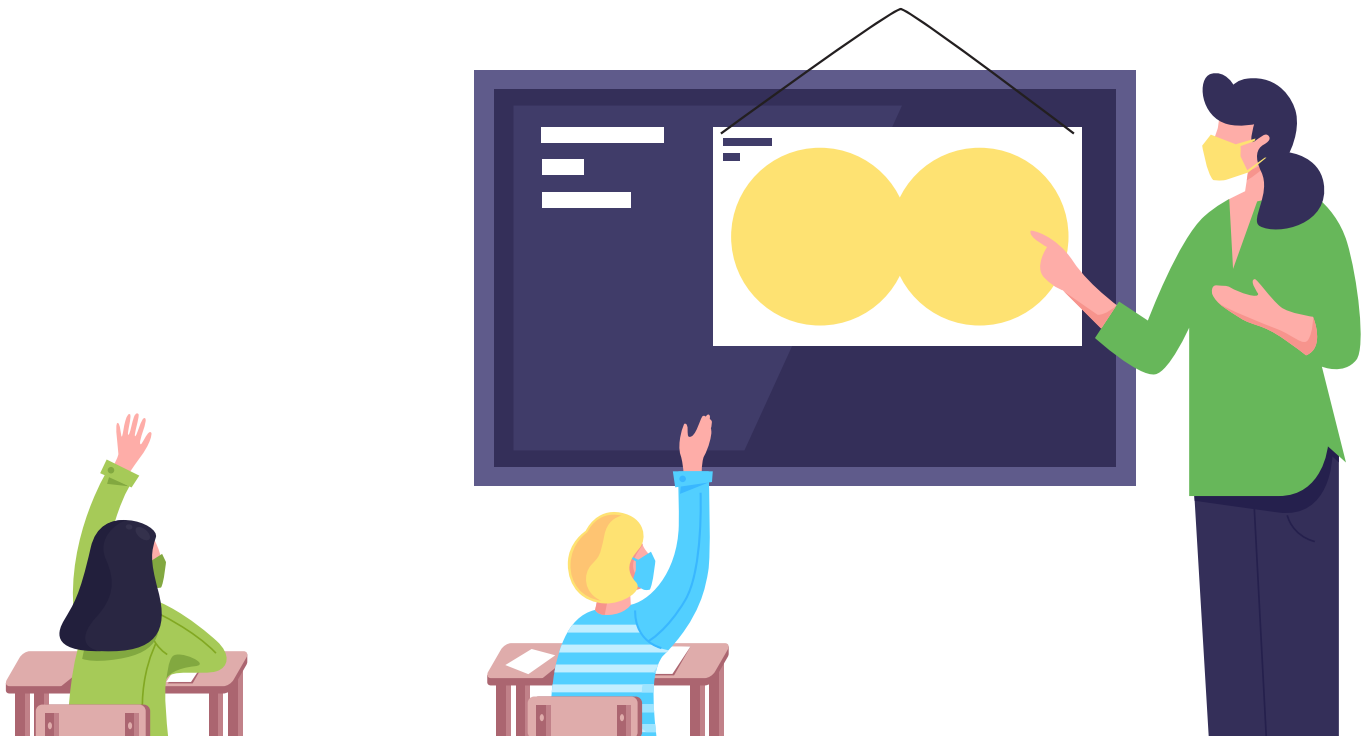
Keeping your school open if students, teachers, or employees are exposed to or test positive for COVID-19

COVID-19 is spreading in many Utah communities. This means students, teachers, and employees are at risk for being exposed to COVID-19 in their homes, community, or at school. It is important everyone do their part to help slow the spread of COVID-19.

Following public health recommendations will help keep schools open for in-person learning. If one of your students, teachers, or employees tests positive for COVID-19, it does not mean he or she did anything wrong. It also does not mean your school necessarily did anything wrong.



If you have questions about what to do after a student, teacher, or employee is exposed to COVID-19 or tests positive, call your local health department. You can find your local health department at <https://ualhd.org/>.



What is the difference between quarantine and isolation?

[Quarantine](#) is for people who may have been exposed to COVID-19, but aren't sick yet. [Isolation](#) is for people who have tested positive or who have symptoms of COVID-19.

Quarantine

You should quarantine if you were exposed to COVID-19 and are not fully vaccinated. This means you were in close contact with someone who has COVID-19 while that person was infectious. Close contact means:⁹

- You were closer than 6 feet from someone who has the virus for a cumulative total of 15 minutes or longer in a 24 hour period.¹⁰
- You cared for someone at home who is sick with COVID-19.
- You had direct physical contact with the person who has COVID-19 (hugged or kissed them).
- You shared eating or drinking utensils with the person who has COVID-19.
- The person who has COVID-19 sneezed, coughed, or somehow got respiratory droplets on you.



If you are not fully immune and were in close contact with someone who has COVID-19, up to 2 days before he or she had symptoms, you were exposed to the virus and should quarantine. Even if the person who has COVID-19 didn't have any symptoms, he or she is infectious up to 2 days before they were tested.

Quarantine keeps you away from others so you don't infect someone else without knowing it. Symptoms of COVID-19 may appear 2-14 days after exposure. This is why you should quarantine for 14 days from the last date of exposure, because it can take 14 days for you to get sick. This means you can spread the virus for 14 days after you were exposed. That's why a 14-day quarantine is still the best and most effective way to protect other people from being exposed to the virus.

As we learn more about COVID-19, public health officials can now provide alternatives for those who may not be able to quarantine for 14 days.^{11,12,13,14,15,16,17,18} While these alternatives are not the very best way to protect people from the virus, they balance reducing the burden on families and schools against a small possibility of spreading the virus.

You may end quarantine:

- **On day 10 without testing.** If you don't have symptoms of COVID-19, you can end quarantine 10 days after the last time you had close contact with the person who tested positive.
- **On day 7 with a negative test result.** You can get tested on day 7 of your quarantine. You can end quarantine if your test is negative and you do not have any symptoms of COVID-19. You must wait at least 7 days after the exposure to be tested. The test can be a [PCR or rapid antigen test](#). You must continue to quarantine until you get your test results back.



⁹ <https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/quarantine.html>

¹⁰ <https://www.cdc.gov/coronavirus/2019-ncov/php/contact-tracing/contact-tracing-plan/appendix.html#contact>

¹¹ <https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/quarantine.html>

¹² <https://www.medrxiv.org/content/10.1101/2020.08.21.20177808v3>

¹³ <https://bmjopen.bmj.com/content/10/8/e039652>

¹⁴ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7217033/>

¹⁵ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7014672/>

¹⁶ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7081172/>

¹⁷ <https://www.cdc.gov/mmwr/volumes/69/wr/mm6944e1.htm>

¹⁸ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7217033/>

These recommendations DO NOT apply to people who are living with someone who has COVID-19 or congregate living settings.

- You must quarantine for 10 days if you live with someone who has tested positive for COVID-19, even if you do not have symptoms or test negative.
- You must quarantine for 10 days if you live or work in a congregate living setting (like a group home or dormitory) and were exposed to COVID-19, even if you do not have symptoms or test negative.
- Employees and residents of long-term care facilities will continue to follow a 14-day quarantine because the chance for spread and severe illness is very high.

Schools may allow some students, teachers, and employees to return to school or work immediately after an exposure if they meet the criteria on page 21.

If you end quarantine early using one of these alternatives:

- Watch for symptoms until it has been 14 days after your exposure. If you end quarantine sooner than 14 days, it is important you keep checking for symptoms. There is a small chance you can still get COVID-19.
- Isolate right away if you get symptoms of COVID-19. Call a healthcare provider and get tested, even if you tested negative for COVID-19 earlier in your quarantine period.
- Wear a mask, stay at least 6 feet away from others, wash your hands often, avoid crowds, and take other steps to [prevent the spread of COVID-19](#).

Symptoms of COVID-19



Fever

(temperature of 100.4°F or 38°C or higher or feeling feverish)



Cough



Shortness of breath



Decrease in sense of smell or taste



Sore throat



Muscle aches and pains

During quarantine, you should stay home and away from other people as much as possible. You should not go to work, school, extracurricular activities, religious services, family gatherings, or other activities. If you must leave your home for essential medical care, it is very important you take extra safety precautions so you don't spread the virus to other people.



Wait 7 days after you were exposed to get tested for COVID-19. This lets enough of the virus build up in your body to be detected by the tests. Isolate and call a healthcare provider right away if you get sick or have symptoms of COVID-19 while on quarantine. You should be tested for COVID-19. If you choose not to get tested, you can end quarantine 10 days after the last time you were around the person who has COVID-19.

You must quarantine for at least 10 days if you live with someone who tests positive for COVID-19. You are at a much higher risk of getting infected with the virus. You must finish the entire 10-day quarantine, even if you don't have symptoms or test negative. It can be very hard to stay isolated from people who live in your home. If you live with a person who tests positive for COVID-19, you may keep having exposures and may need to quarantine longer than 10 days. Every time you come into close contact with the person who tested positive while they are infectious, your quarantine starts over because you were exposed to the virus again.

A public health worker may also try to contact you if you were exposed to COVID-19. This is called [contact tracing](#). A public health worker may call you or send you a text or email.

Isolation

Isolate if you have symptoms of COVID-19 or test positive. This means you stay at home except to get medical care. If you have tested positive, you should isolate until you have been:

- Fever-free for 24 hours (this means you did not use medicine to lower your fever), and
- Your respiratory symptoms have improved for 24 hours, and
- It has been at least 10 days since you first got sick.
- If you did not have symptoms, isolate for 10 days from the day you were tested.



AND



Without Medicine



If you test positive for COVID-19, try to stay in a different room in your home from other people. You should also try to use a different bathroom than other people. If you can't stay in a different room or use a different bathroom, stay as far away from other people in your home as possible. Wear a mask if you need to be around other people. Don't share personal items like cups, plates, or towels. Clean surfaces that are touched often (like phones, doorknobs, light switches, toilet handles, sink handles, countertops, and anything metal).

You are infectious and can spread the virus to others starting up to 2 days before you first had symptoms until your isolation period is over. If you never had symptoms, you are infectious starting 2 days before the day you were tested for COVID-19. Anyone who came into close contact with you during this time should quarantine.

If you test positive for COVID-19, anyone who lives in your home should quarantine for 10 days from the last time they were in close contact with you during isolation.

A public health worker will also try to contact you if you test positive to conduct a [case investigation](#). Sometimes people call this contact tracing. A public health worker may call you or send you a text or email.



Safety precautions for people who have been exposed to someone with COVID-19

- Check for symptoms of COVID-19 every day, including taking your temperature if possible. If you do not have a thermometer, check your skin to see if it feels warm or looks red. A helpful booklet called, “What to do if you are on quarantine or isolation,” can be downloaded at <https://coronavirus.utah.gov/protect-yourself/>.
- Stay home and away from other people as much as possible. Don’t go to school, work, extracurricular activities, religious services, family gatherings, or other activities until your quarantine is over or you have met the testing requirements to end quarantine early.
- Wear a face mask if you need to leave your home for essential errands like getting groceries or to get medical care. Only leave your home if you have to.
- Limit the number of visitors to your home. This is especially important if you or someone you live with is at higher risk for severe illness from COVID-19.
- Clean surfaces that you touch often with your hands (phones, doorknobs, light switches, toilet handles, sink handles, countertops, and anything metal).
- Wash your hands with soap and water often. If soap and water are not available, use an alcohol-based hand sanitizer that is at least 60% alcohol.
- Open the windows as much as you can to improve the ventilation and increase air exchanges in rooms.
- Do not share food or utensils with other people.
- Do not share personal items like a toothbrush with other people.



Students, teachers, and employees who test positive for COVID-19 should isolate.

Students, teachers, or employees should isolate right away if they test positive for COVID-19. This means to stay home except to get medical care. You should not go to school or work.

If you've tested positive, you should isolate until you have been:

- Fever-free for 24 hours, and
- Your respiratory symptoms have improved for 24 hours, and
- It has been at least 10 days since you first got sick.
- If you did not have symptoms, you should isolate for 10 days from the day you were tested.

Anyone who was in close contact with a person who has COVID-19 up to 2 days before he or she had symptoms is considered exposed and should quarantine. Even if the person who has COVID-19 did not have any symptoms, he or she is infectious up to 2 days before they were tested. Close contact means someone was closer than 6 feet or 2 meters (about 2 arm lengths) to a person who has COVID-19 for a total of 15 minutes or longer in a 24-hour period.

The health department will call, text, or email the person who tested positive to conduct a [case investigation and contact tracing](#). A case investigation helps public health workers figure out how a person may have been exposed to the virus. It can also help public health workers find out who else may be at risk of COVID-19. The health department will ask the employee who they may have been in close contact with while they were infectious. The health department may ask the person to tell their close contacts to quarantine or the health department may contact these individuals directly.



Your school needs to be prepared for times when students or teachers need to isolate or quarantine at home.

Being prepared to respond to COVID-19 in your school may require lesson planning in advance. You should also have a plan to provide another learning option for students who need to isolate or quarantine at home. School policies should allow students to make up any missed classwork without penalty if they are sick or need to quarantine.¹⁹ This will be a critical aspect of schools being able to stay open for in-person learning. With an increase in the spread of COVID-19 in Utah, it is likely some students and teachers will need to stay at home.

The time period for isolation is the amount of time someone is infectious and can pass the virus to other people. A student or teacher who tests positive for COVID-19 will be required to isolate at home for at least 10 days. This does not mean someone will only be sick for that amount of time. Some people who get COVID-19 are sick for a long time. The time period for quarantine may also be longer than 10 days if the person has ongoing exposures to COVID-19. You need to be prepared in advance to continue student instruction without disruption. This can only happen if schools are well prepared.



Will the health department notify the school if a student, teacher, or employee tests positive?

Yes. The health department will notify the point of contact (POC) at the school if a student, teacher, or employee at the school tested positive for COVID-19. A school may learn about a student, teacher, or employee testing positive before the health department. In these cases, the school POC should contact the health department. The POC will work closely with the health department on contact tracing.

¹⁹ <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/symptom-screening.html>

School quarantine guidance changes as we learn more about COVID-19.

The school quarantine guidance has changed, effective January 4, 2021. While a 14-day quarantine is still the best and most effective way to protect other people from being exposed to the virus, this change is based on the evidence that face masks greatly reduce the risk of COVID-19 transmission. This change will also further incentivize mask wearing. The updated guidance will also provide more opportunities for students and staff to participate in in-person learning. It is contingent on compliance with the state mask requirements in schools.²⁰

The guidance is ONLY for K-12 public, private, and charter schools. It is not intended for use by institutions of higher education or child care settings. Worksites and private businesses should follow the quarantine protocols in the [COVID-19 Business Manual](#).



Wearing face masks will reduce the spread of COVID-19 in schools and the number of students and teachers on quarantine.

There is clear scientific evidence that wearing a face mask prevents the spread of COVID-19. One of the simplest ways to protect lives and livelihoods is by wearing a face mask.²¹ Nearly all reputable medical and scientific organizations agree that masks are an effective way to stop the spread of COVID-19.^{22,23,24,25,26,27} A study by

the Centers for Disease Control and Prevention showed not only do masks protect other people from getting infected with the virus that causes COVID-19, but that masks can also be protective for the person wearing a mask.²⁸

A recent study found children who tested positive for COVID-19 were NOT more likely to have attended school in the 2 weeks before their positive test as compared to children who tested negative.²⁹ Children who tested positive were more likely to have attended a family gathering (wedding, funeral, parties, or playdates) in the 2 weeks before their positive test result. Children who tested positive were also less likely to report consistent wearing of face masks in the school by both students and staff.

The convincing evidence that masks are effective gives Utah schools and public health officials the opportunity to change quarantine protocols to balance the need for in-person learning with reducing the risk of spreading the virus.

²⁰ <https://coronavirus.utah.gov/utah-health-guidance-levels/> <https://coronavirus-download.utah.gov/Governor/State-Public-Health-Order-UPHO-2020-11-v.2.pdf>

²¹ <https://s3-us-west-2.amazonaws.com/marriner-wpmedia/wp-content/uploads/2020/11/SeegertGaulinYangNavarroSanchez2020-web.pdf>

²² <https://pws.byu.edu/covid-19-and-masks>

²³ [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(20\)31142-9/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(20)31142-9/fulltext)

²⁴ <https://msphere.asm.org/content/5/5/e00637-20/article-info>

²⁵ <https://msphere.asm.org/content/5/5/e00637-20/article-info>

²⁶ https://www.cdc.gov/mmwr/volumes/69/wr/mm6928e2.htm?s_cid=mm6928e2_w

²⁷ <https://jamanetwork.com/journals/jama/fullarticle/2768532>

²⁸ <https://www.cdc.gov/coronavirus/2019-ncov/more/masking-science-sars-cov2.html>

²⁹ https://www.cdc.gov/mmwr/volumes/69/wr/mm6950e3.htm?s_cid=mm6950e3_w

When can students, teachers, or employees who are exposed to COVID-19 end quarantine?



If both people wore masks at the time of exposure

Students, teachers, or employees who were exposed to someone with COVID-19 at school do not have to quarantine if:

- The school can verify that both people were wearing face masks (the person who was exposed and the person who tested positive) as defined by [state public health order](#), and
- The person who was exposed does not have any symptoms of COVID-19.

If at any time during the 14 days after their exposure a student, teacher, or employee develops symptoms of COVID-19, he or she should isolate and get tested right away. If the person does not have symptoms, he or she should wait 7 days after they were exposed to get tested.

If either person was not wearing a mask at the time of exposure

Students, teachers, or employees who were not wearing a mask at the time of exposure or who were exposed to someone who was not wearing a mask may end quarantine:

- **On day 10 without testing.** If you don't have symptoms of COVID-19, you can end quarantine 10 days after the last time you had close contact with the person who tested positive.
- **On day 7 with a negative test result.** You can get tested on day 7 of your quarantine. You can end quarantine if your test is negative and you do not have any symptoms of COVID-19. You must wait at least 7 days after the exposure to be tested. The test can be a PCR or rapid antigen test. You must continue to quarantine until you get your test results back.



Students, teachers, or employees who live with someone who tests positive for COVID-19 must quarantine for 10 days from the last day of exposure to the person who tested positive. You must finish the entire 10-day quarantine, even if you don't have symptoms or test negative.

Anyone who was exposed to the virus needs to watch for symptoms until it has been 14 days since they were last exposed, even if they have returned to in-person learning or work.

It is important they keep checking for symptoms and take extra safety precautions found on page 18. There is a small chance you can still get COVID-19. If you have symptoms of COVID-19, you need to isolate at home, call your healthcare provider, and may need to get tested again.

Schools are expected to notify all close contacts, even if they meet the criteria to not quarantine, and provide instructions on what they should do. Close contacts should be told to watch for symptoms of COVID-19 until it has been 14 days after their exposure and what safety precautions should be taken.



What does wearing a face mask correctly mean?

The school is responsible for verifying that face masks were worn correctly at the time of the exposure. This means the person who tests positive and the person who came into close contact with them were both wearing a face mask as outlined in the [state public health order](#).

A face mask that is worn correctly must:

- Cover the nose and mouth without openings that can be seen through.
- Be made of synthetic or natural fabrics.
- Secure under the chin.
- Fit snugly against the nose and sides of the face.
- Not have exhalation valves or vents.



How long do students, teachers, or employees have to quarantine if they have a mask exemption or were only wearing a face shield?

Students, teachers, or employees who were not wearing a mask at the time of exposure or who were exposed to someone who was not wearing a mask may end quarantine:

- **On day 10 without testing.** If you don't have symptoms of COVID-19, you can end quarantine 10 days after the last time you had close contact with the person who tested positive.
- **On day 7 with a negative test result.** You can get tested on day 7 of your quarantine. You can end quarantine if your test is negative and you don't have any symptoms of COVID-19. You must wait at least 7 days after the exposure to be tested. The test can be a PCR or rapid antigen test. You must continue to quarantine until you get your test results back.



Anyone who is exposed should watch for symptoms until it has been 14 days after their exposure. There is a small chance he or she can still get COVID-19. If the person has symptoms of COVID-19, he or she should isolate at home, call their healthcare provider, and may need to get tested again.

The point of contact (POC) at the school will work with the local health department to determine whether the students, teachers, or employees who were exposed were wearing masks as defined in [state public health order](#).

For information on exemptions allowed under the state public health order, visit https://coronavirus-download.utah.gov/Health/Mask_Order_FAQ.pdf.

If students, teachers, or employees live with someone who has COVID-19, how long do they have to quarantine?

A household contact is a person who lives with someone who has tested positive for COVID-19. Household contacts are at a much higher risk of getting infected with the virus.

Students, teachers, or employees who are a household contact should quarantine for 10 days from the last day of exposure to the person who tested positive. **You must finish the entire 10-day quarantine, even if you don't have symptoms or test negative.** You may not end quarantine before 10 days.

It can be very hard to stay isolated from people who live in your home. If you live with a person who tests positive for COVID-19, you may keep having exposures and may need to quarantine longer than 10 days. Every time you come into close contact with the person who tested positive while they are infectious, your quarantine starts over because you were exposed to the virus again.



If a student, teacher, or employee is exposed to COVID-19 at home or outside of school, how long does he or she have to quarantine?

These guidelines only apply to exposures that occur at school. The point of contact (POC) will work with the local health department to determine if the exposure happened at school.

Students, teachers, and employees who are exposed to COVID-19 outside of the school setting may end quarantine:

- **On day 10 without testing.** If you don't have symptoms of COVID-19, you can end quarantine 10 days after the last time you had close contact with the person who tested positive.
- **On day 7 with a negative test result.** You can get tested on day 7 of your quarantine. You can end quarantine if your test is negative and you don't have any symptoms of COVID-19. You must wait at least 7 days after the exposure to be tested. You must continue to quarantine until you get your test results back.

People who live with someone who tests positive (called a household contact) must quarantine for 10 days from the last day of exposure to the person who tested positive. They may not end quarantine sooner than 10 days, even if they don't have any symptoms or test negative.



If students, teachers, or employees are exposed to COVID-19 at a school extracurricular activity, how long do they have to quarantine?



How long someone has to quarantine if they are exposed during school extracurricular activities, including sports, depends on whether face masks were worn correctly at the time of the exposure.

If both people wore masks at the time of exposure

Students, teachers, or employees who were exposed to someone with COVID-19 during extracurricular activities do not have to quarantine if:

- The school can verify that both people were wearing face masks (the person who was exposed and the person who tested positive) as defined by [state public health order](#), and
- The person who was exposed does not have any symptoms of COVID-19.

If either person was not wearing a mask at the time of exposure

Students, teachers, or employees who were not wearing a mask at the time of exposure or who were exposed to someone who was not wearing a mask may end quarantine:

- **On day 10 without testing.** If you don't have symptoms of COVID-19, you can end quarantine 10 days after the last time you had close contact with the person who tested positive.
- **On day 7 with a negative test result.** You can get tested on day 7 of your quarantine. You can end quarantine if your test is negative and you do not have any symptoms of COVID-19. You must wait at least 7 days after the exposure to be tested. The test can be a PCR or rapid antigen test. You must continue to quarantine until you get your test results back.

Do the quarantine guidelines change if someone is vaccinated?

A person is fully immune if it has been 2 weeks since their final dose of the COVID-19 vaccine. Students and staff who are fully immune don't have to:

- Quarantine after being exposed to someone with COVID-19. However, if you get symptoms of COVID-19 after you were exposed (which would be rare), you should isolate and talk to a doctor or healthcare provider. You may need to get tested for COVID-19.
- Participate in Test to Play or Test to Stay.

Learn more about how vaccination affects quarantine, isolation, and school testing protocols on page 21.

What happens if students, teachers, or employees are exposed to COVID-19 after testing positive?³⁰

If you are exposed to COVID-19 again (a new exposure) **within 90 days** of testing positive for COVID-19 and do not have symptoms of COVID-19, you don't need to quarantine or be tested again during this 90-day timeframe. Students and school staff who are within this 90-day period after testing positive also don't have to participate in Test to Play or Test to Stay testing events.

You should follow these guidelines for 14 days from the date of your last exposure:

- Take your temperature before school or work.
- Check for symptoms of COVID-19 every day.
- Wear a face mask when you are at school, work, or around people you don't live with.
- If you get sick or have symptoms of COVID-19, isolate for at least 10 days after your symptoms start and call a doctor or healthcare provider to find out if you should get tested for COVID-19 again.

If you are exposed to COVID-19 again (a new exposure) and it has been **more than 90 days** since you tested positive for COVID-19, you should quarantine and get tested again. If you get sick or have symptoms while on quarantine, isolate and call a doctor or healthcare provider. However, you may meet the criteria to end quarantine found on page 21. Students and school staff who tested positive more than 90 days ago must participate in Test to Play or Test to Stay testing events.

You don't have to quarantine if you are fully immune. This means it has been at least 2 weeks since your final dose. However, if you get symptoms of COVID-19 after you were exposed (which would be rare), you should isolate and talk to a doctor or healthcare provider. You may need to get tested for COVID-19.



³⁰ <https://www.cdc.gov/coronavirus/2019-ncov/php/contact-tracing/contact-tracing-plan/contact-tracing.html>

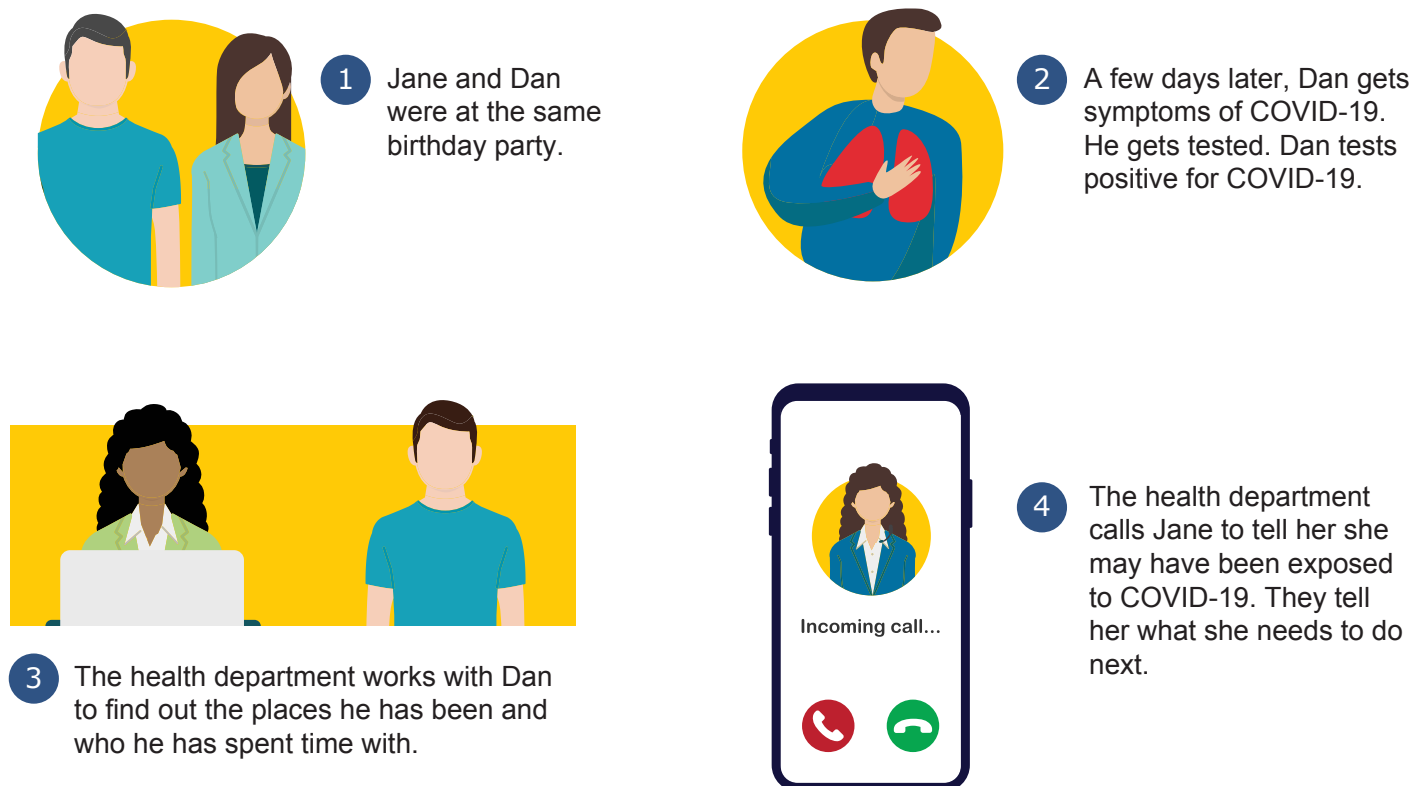
Case investigations and contact tracing

Contact tracing is an important part of how public health responds and stops disease outbreaks. People who have been in close contact with someone who has COVID-19 are more at risk of getting infected and making others sick. Contact tracing is how public health workers find the close contacts of someone who has COVID-19.

When a person tests positive for COVID-19, the health department tries to contact the individual to conduct a case investigation. A **case investigation** is when a public health worker identifies and interviews a person who tested positive about possible exposures to COVID-19. The public health worker will ask where the person has been while they were infectious, when their symptoms started, and who else may have been exposed.

Contact tracing happens after a case investigation is done. Contact tracing is how public health finds who else may have been exposed to a virus or disease and then contacts these people to let them know how long they should quarantine. Contact tracing also provides support to individuals who were exposed and who may need other services so they can quarantine.³¹

Contact tracing process



³¹ <https://www.cdc.gov/coronavirus/2019-ncov/community/contact-tracing-nonhealthcare-workplaces.html>



Schools will do their own contact tracing with help from the local health department.

Each school should have a COVID-19 point of contact (POC).

The POC will work with the health department on contact tracing. The POC will notify eligible students, parents, teachers, and employees if they were exposed to COVID-19 at school. The POC may also conduct a hazard assessment or help implement prevention and mitigation strategies. The POC will work closely with your school district's human resources and legal teams, school nurse, and your local health department.

The POC should also be familiar with:

- School or district policies that may be applicable to contact tracing.
- Laws regarding student and employee privacy.
- Patient confidentiality and how to conduct interviews with someone who has been exposed or tested positive without violating confidentiality.
- Medical terms and principles such as exposure, infection, infectious period, symptoms of COVID-19, testing options, quarantine, and isolation.
- Crisis counseling and knowing when to refer students or employees to wrap-around services.
- Cultural or language barriers that might make individuals reluctant to provide information or which may make it hard for them to know what they should do if they are exposed to or test positive for COVID-19.
- Interpersonal communication and interviewing skills so trust can be built.

There are many helpful trainings and resources from the CDC on contact tracing:

- [CDC contact training](#)
- [Case investigation and contact tracing in non-healthcare workplaces: Information for employers](#)
- [Contact tracing and case investigation general training modules](#)

The POC will notify students, teachers, and employees if they were exposed to COVID-19 at school.

- 1 People who are tested for COVID-19 will get their test results from the healthcare provider or testing location where their sample was collected.
- 2 The health department will call anyone who tests positive for COVID-19. It may take a few days for the health department to call the person who tested positive. They will ask the person who he or she may have been in close contact with up to 2 days before he or she got sick or tested positive.
- 3 The health department will notify the POC at the school if a student, teacher, or employee tests positive for COVID-19. The health department gives the name of the person who tested positive and the date of last exposure to the POC.

- 4 The POC collects and provides a list to the health department of students, teachers, or employees who are a [higher risk](#) for severe illness from COVID-19 and anyone at higher risk known to have come into close contact with the person who tested positive.

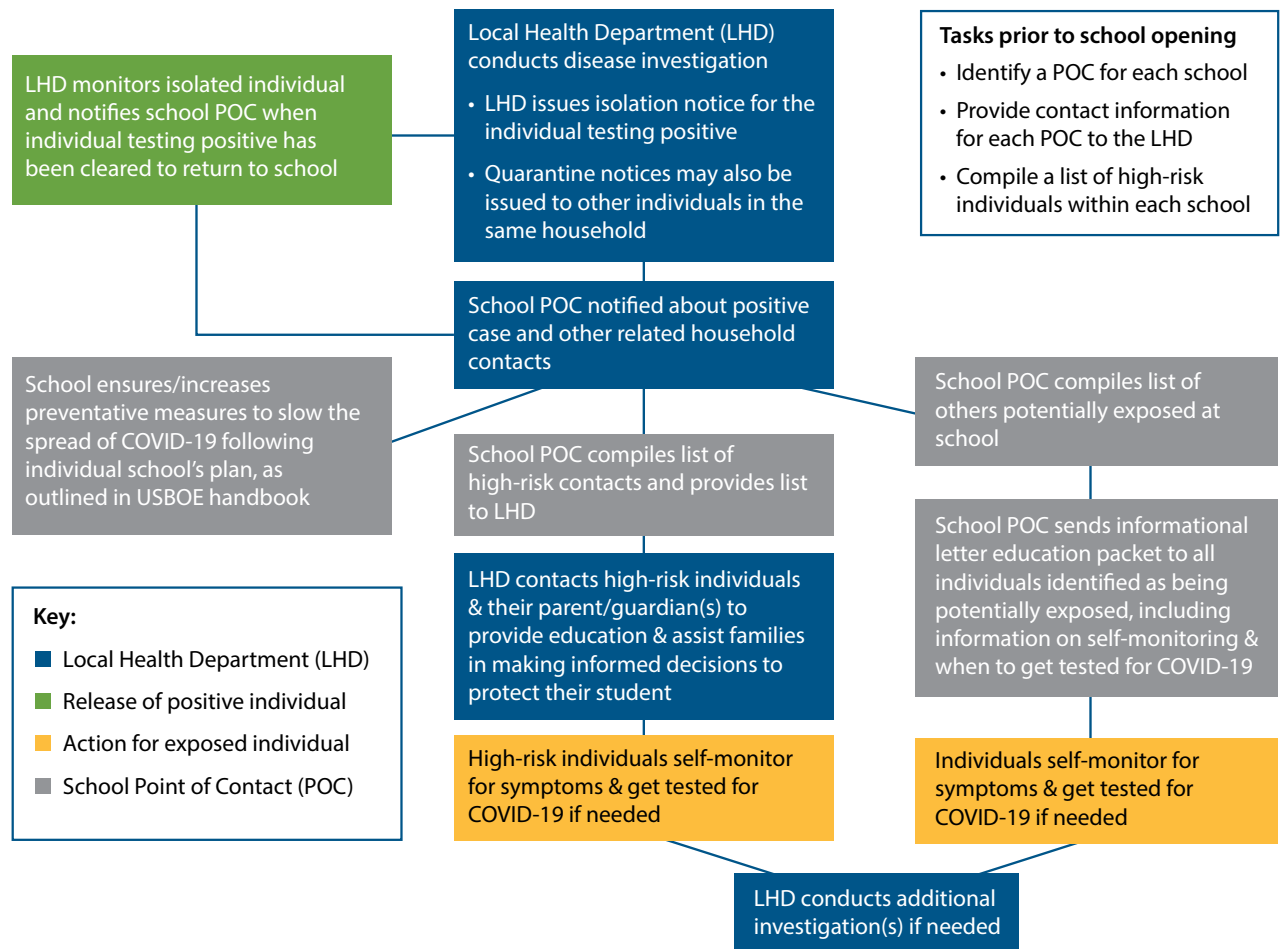
The health department will notify the parents of students, teachers, or employees who are at higher risk and provide guidance on how long they should quarantine, how to check for symptoms, and when to consider testing. This notification may also be done by the schools in some cases.

- 5 The POC will notify any other eligible students or students' parents, teachers, or employees who may have been exposed to the person who tested positive. The POC will provide guidance on how long they should quarantine, how to check for symptoms, and when to consider testing. The POC will only notify people who were exposed to the person who tested positive while at school. Schools are expected to notify all close contacts, even if they meet the criteria to not quarantine, and provide instructions on what they should do. The POC is not responsible for contacting anyone who was exposed to COVID-19 outside of the school setting.

In most cases, the school may only notify the parents of an eligible student (a student who is 18 years old or a student of any age who has taken postsecondary courses) if the eligible student has signed a written consent. There are some situations where parents of eligible students will be notified without a written consent.

- 6 Only students, teachers, or employees who came into close contact with the person who tested positive will be notified of a possible exposure.

Case investigation and contact tracing in schools (K-12) 2020-2021



Privacy laws and how student, teacher, and employee information will be protected

It is important to make sure administrators, employees, and parents understand privacy laws and how they apply during the COVID-19 pandemic.

What laws protect student, teacher, and employee privacy?

Public health laws

COVID-19 is reportable by law, under [Utah Code Annotated § 26-6-1 et seq.](#), the [Utah Communicable Disease Control Act](#), and [Utah Administrative Code R386-702 Communicable Disease Rule](#), to the Utah Department of Health or the local health department in the health district where the individual lives. This means a person's COVID-19 test results must be reported to public health by the provider or testing location where the person was tested.



A person's test result is considered private health information and is kept confidential by public health. Public health agencies are allowed, by law, to disclose the name of a person who tested positive to a school if it is necessary to protect the health and safety of students, teachers, and employees. The information that is disclosed by the health department to the school is strictly confidential and protected under [Utah Code § 26-6-27](#).



If the information is about an employee, [Utah Code § 26-6-27](#) continues to protect the privacy of the information even after it is shared with the school's point of contact (POC). The POC must maintain the confidentiality of the employee while acquiring information necessary to assist the health department to contact others who may have been exposed. The POC must emphasize the importance of not re-disclosing the information to anyone else and that all notifications will be made by the POC or the health department.

If the information is about a student, the information, once shared with the POC becomes protected by [FERPA](#). The POC must ensure that this information remains confidential and is shared only with those who have a need to know to assist the POC in carrying out the responsibility to notify others who may have been exposed. The POC must emphasize the importance of not re-disclosing the information to anyone else and that all notifications will be made by the POC or the health department.



The POC and the school officials cannot release the private health information disclosed by public health under any circumstances. This includes the name of the person who tested positive for COVID-19.

The POC may need to share the identity of the person who has tested positive for COVID-19 with other school officials to determine the identity of individuals who have been in close contact with the person who has tested positive for COVID-19 and the risk level of those individuals. This must be limited to the least number of school officials possible and each must be notified that the information is confidential and cannot be redisclosed or shared with anyone else.

Other laws schools need to consider

There are other laws that protect the privacy of students, teachers, and employees. Schools are responsible to work with their legal counsel to understand these laws and how they apply during the COVID-19 pandemic. Schools must follow all regulatory requirements and governing structures that apply to an educational setting.

Some of these laws may include:

- [Family Educational Rights and Privacy Act](#) (FERPA³²)
- [Utah Code Annotated § 53E-9-101 et seq., Student Privacy and Data Protection](#)
- State and federal labor laws



There are very few circumstances when the name of an individual who tested positive for COVID-19 may be released. If this situation were to occur, the determination to release this information and to whom it may be released will be made on a case-by-case basis by the local health officer.

The [Family Educational Rights and Privacy Act](#) (FERPA³³) is a federal law that protects the privacy of student education records. FERPA gives parents certain rights about their child's education records. When a student turns 18 years old or if a student attends a postsecondary institution (such as a college) at any age, the student becomes an "eligible student" (a student who is 18 years old or a student of any age who has taken postsecondary courses). This means the student, not the parent, becomes the only person who has rights to the student's educational record. In some cases, FERPA information can still be provided to the parents of eligible students without a written consent.

FERPA says that in most cases, a parent or eligible student must give his or her written consent, or permission, before a school can give out any personally identifiable information (PII) from an education record.



32 https://studentprivacy.ed.gov/sites/default/files/resource_document/file/FERPA%20and%20Coronavirus%20Frequently%20Asked%20Questions.pdf

33 https://studentprivacy.ed.gov/sites/default/files/resource_document/file/FERPA%20and%20Coronavirus%20Frequently%20Asked%20Questions.pdf

Personally identifiable information (PII)

- This is information that can be used to identify who a student is, such as a student's name or identification number.
- PII includes information that directly or indirectly identifies a student. This means PII does not just include information that has a student's name on it. If someone can use a piece of information that does not say who the student is, with a different piece of information, and is able to link the pieces of information together to know who the student is, all of the information is considered to be PII.



Under FERPA, a school is allowed to disclose student PII to the health department on a case-by-case basis if it is necessary to protect the health and safety of the student or others, without the written consent of an eligible student or parent or guardian.

The United States Department of Education oversees FERPA and has published [Frequently Asked Questions \(FAQs\) regarding FERPA and COVID-19](#) which is linked within this document and may be consulted for more information in addition to specific guidance by a school's legal counsel.



What information can a school disclose when someone in the school tests positive for COVID-19?

A school may disclose that someone at the school tested positive for COVID-19, as long as the facts alone or in combination with other information released, do not identify the person.

The school may not publicly release the PII of the student such as the student's name or whether they tested positive for COVID-19.

The school may not publicly release the name of a teacher or employee who tested positive for COVID-19.

What does close contact mean?

A close contact exposure means a person was closer than 6 feet or 2 meters (about 2 arm lengths) from someone who tested positive for COVID-19 for a total of 15 minutes or longer within a 24-hour period.^{34,35} This is a cumulative total meaning you could have different exposure events throughout the day. For example, you could be closer than 6 feet to the person who tested positive 3 different times in the day for 5-minutes each time, bringing the total time you were in close contact to 15 minutes. You may also have a close contact exposure if:

- You cared for someone at home who is sick with COVID-19.
- You had direct physical contact with the person who has COVID-19 (hugged or kissed them).
- You shared eating or drinking utensils with the person who has COVID-19.
- The person who has COVID-19 sneezed, coughed, or somehow got respiratory droplets on you.



**For a total of
15 Minutes**

If you were in close contact with someone who has COVID-19, up to 2 days before he or she had symptoms, you were exposed to the virus and should quarantine. Even if the person who has COVID-19 didn't have any symptoms, he or she is infectious up to 2 days before they were tested.

In a school setting, close contact exposure means:

- Anyone in a school setting (like a classroom) or in a school bus who sat 6 feet or 2 meters in the front, back, or to the side of the person who tested positive for a total of 15 minutes or longer.
- A teacher, employee (such as a paraprofessional or bus driver), or visitor who was 6 feet or 2 meters for a total of 15 minutes or longer from the person who tested positive.
- Anyone who was closer than 6 feet or 2 meters for a total of 15 minutes or longer to the person who tested positive during extracurricular activities (sports, dances, clubs); during a school gathering (assemblies, dances); or during lunch or free periods.



If the health department or point of contact at the school are unable to determine who was in close contact with the person who tested positive, everyone in the classroom, school bus, lunch or free period, extracurricular activity (sports, dances, clubs), or school gathering (assemblies, dances) is considered exposed.

³⁴ <https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/quarantine.html>

³⁵ <https://www.cdc.gov/coronavirus/2019-ncov/php/contact-tracing/contact-tracing-plan/appendix.html#contact>

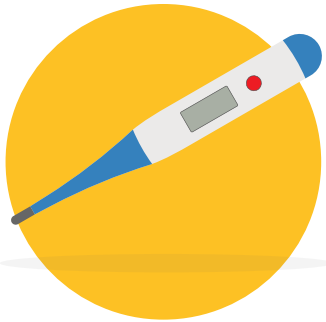
The health department may also consider other things when deciding if someone had a close contact exposure, depending on the situation.³⁶ These are things we know increase the risk of exposure to COVID-19:



**For a total of
15 Minutes**

- **Proximity.** This means how close someone was to the person who has COVID-19. The closer you are, the more chance there is for exposure.

- **Duration of exposure.** This means how long you were around the person who has COVID-19. The more time you spend with a person who is infectious, the more chance there is for exposure.



- **Symptoms.** People are most infectious and can spread the virus to others more easily around the time their symptoms begin.



- **Respiratory aerosols.** The chance of exposure increases if the person who has COVID-19 is coughing, singing, shouting, or doing other things that make it easier for respiratory droplets to spread.



- **Environmental factors.** The chance of exposure increases from things like crowded spaces, poor ventilation, and if the exposure happened indoors instead of outdoors.

³⁶ <https://www.cdc.gov/coronavirus/2019-ncov/php/contact-tracing/contact-tracing-plan/appendix.html#contact>

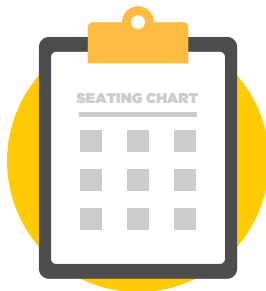
Schools will determine close contact exposures

The point of contact (POC) will work closely with the health department to determine who came into close contact at school with the person who tested positive.

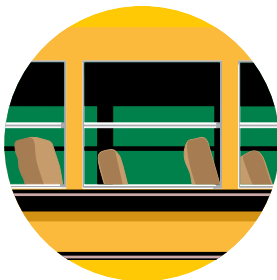
The POC may need to talk with a teacher or coach to understand who a student was in close contact with. Sharing this information must be limited to the least number of school officials possible and each must be notified that the information is confidential and cannot be re-disclosed or shared with anyone else.



To protect the privacy of the person who tested positive as much as possible and help with contact tracing efforts, schools may want to consider:



Asking teachers to have written seating charts and student groupings in advance for classroom activities.



Students should have assigned seats on buses if possible. This includes if a bus is used to take students to an activity, field trip, or sports events.



Coaches may want to consider advance written plans for practices that include student names and groupings for each activity or drill. Coaches and activity directors should keep a roster of attendance at activities, practice, and games.

Understanding the date of exposure

The date of exposure is when the person who tested positive for COVID-19 was first considered infectious and could spread the virus to others. This date begins 2 days before the person has symptoms. If the person did not have symptoms, he or she is infectious starting 2 days before the person was tested for COVID-19. Anyone who came into close contact with the person who tested positive from the date of exposure until the person has ended isolation and is no longer considered infectious, is exposed to the virus. The health department will give the POC the date of exposure.



It is important to select a POC who can be trusted with confidential information and who has the ability to communicate with employees in a way that builds trust.

How we talk to someone who has been exposed or tested positive for COVID-19 is important. Using open-ended questions and expressing genuine concern can help build trust with the employee. When an employee feels safe sharing about their experience, he or she is more likely to provide detailed information to the POC or health department which is necessary to stop the spread of the virus.

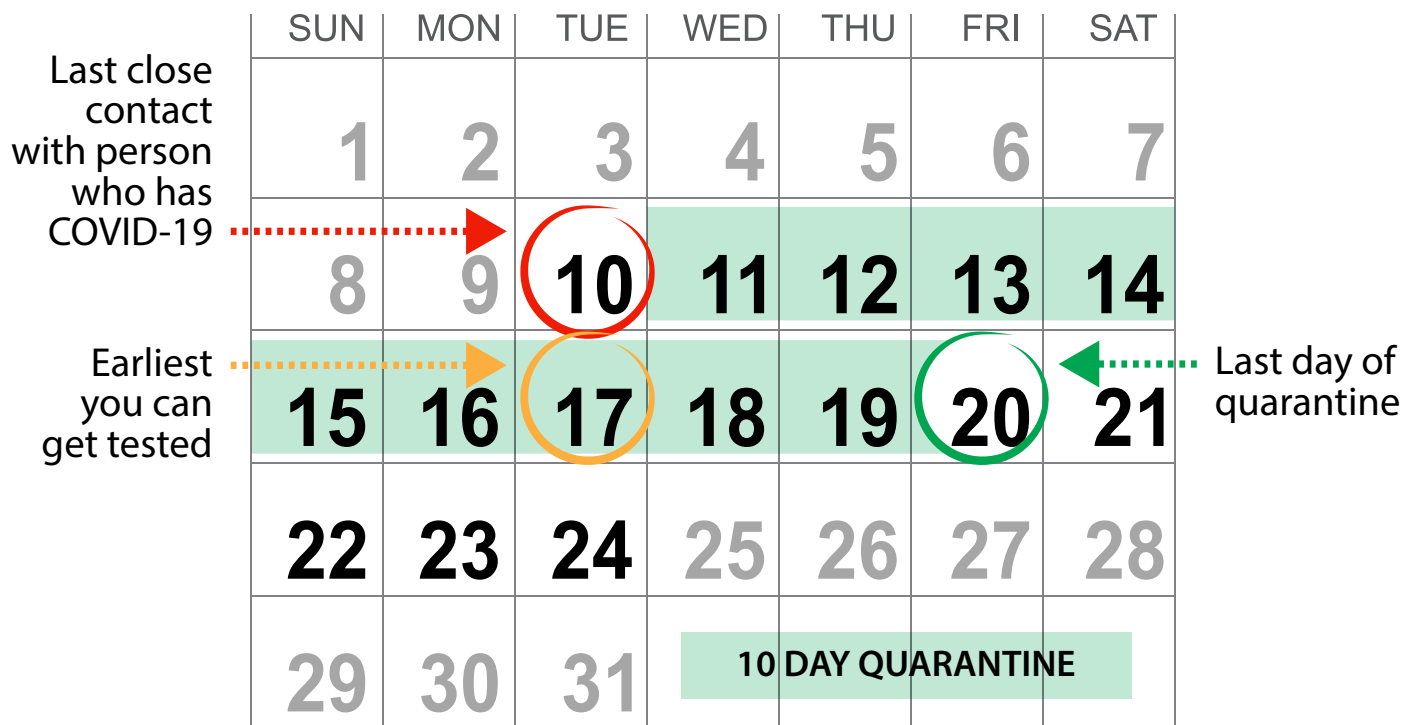
- ✓ Ask open-ended questions.
- ✓ Use reflective listening techniques.
- ✓ Use culturally and linguistically appropriate language.
- ✓ Be emphatic and judgement-free.

Questions the POC may need to ask to figure out who else was exposed at school:

- ✓ Does the student ride a school bus to and from school? Is there assigned seating on the school bus? If so, who sits within 6 feet of him or her to the front, back, and to the side?
- ✓ What classes does the student have? Are any of his or her classes off-campus? Does he or she have release time?
- ✓ Does the student have assigned seating during class? Who sits within 6 feet of him or her in the front, back and to the side? Are students in the class grouped into cohorts or pods? Are students able to physical distance?
- ✓ What lunch period does the student have? Is there assigned seating during lunch? If so, who sits within 6 feet of him or her in the front, back, and to the side?
- ✓ What extracurricular activities at the school is the student involved in? These activities may include sports teams, drill, clubs, theater, choir, or other activities.
- ✓ Did the student attend any school gatherings like assemblies, spirit nights, dances, or parent teacher conferences?
- ✓ Does the teacher, coach, or organizer of the activity keep a roster or attendance tracking sheet? Are students at the activities grouped into cohorts or pods? Are students able to physical distance?
- ✓ Are there other times during the school day when the student is in close contact with other students, teachers, or employees?

How to determine when someone can end quarantine³⁷

- The POC will work closely with the health department to find out the last time someone had close contact with the person who tested positive for COVID-19 (last date of exposure).
- The POC will give the person who was exposed the date of last exposure and when the person can return to school or work.
- If the person who was exposed meets the criteria on page 21 to NOT quarantine, he or she should monitor for symptoms for 14 days. Public health also recommends testing 7 days after the exposure, even though testing is not required to return to school in this case.
- If the person who was exposed meets the criteria on page 21 to quarantine, he or she should quarantine for 10 FULL days. If the person who was exposed chooses to be tested, he or she must wait 7 FULL days from the date of last exposure to get tested.
- People who are living with someone who tests positive for COVID-19 may need to quarantine for longer than 10 days because they have ongoing exposures.
- If the person is fully immune, he or she does not need to quarantine after being exposed to someone with COVID-19.



³⁷ <https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/quarantine.html>

Students, teachers, and employees with symptoms of COVID-19 should get tested.

The most common symptoms of COVID-19 in children are fever and cough. Symptoms can also look like other common illnesses like strep throat, colds, flu, or allergies.³⁸ Anyone with symptoms of COVID-19 should isolate, call a healthcare provider, and get tested for COVID-19 right away, even if their symptoms are mild. Testing locations can be found at <https://coronavirus.utah.gov/testing-locations/>.

People with COVID-19 generally develop symptoms 5-6 days after infection.³⁹ About 75% of people will develop symptoms within 7 days after exposure. About 95% of people will develop symptoms within 12 days after exposure.^{40,41,42,43}

Some people may be asymptomatic. This means they have no signs or symptoms of the virus but can still spread it to others. Testing may be recommended for people without symptoms in certain situations, such as if there is a high number of cases in a school. Asymptomatic testing may also be done if a person is exposed to someone who tested positive for COVID-19.



Fever
(temperature of 100.4°F or 38°C or higher or feeling feverish)



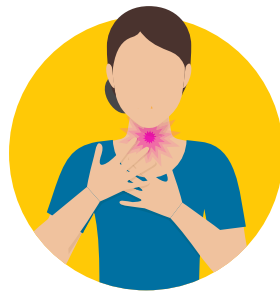
Cough



Shortness of breath



Decrease in sense of smell or taste



Sore throat



Muscle aches and pains

Visit the Centers for Disease Control and Prevention (CDC) website to find out other [symptoms](#) that may be associated with COVID-19.

³⁸ <https://www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/children/symptoms.html>

³⁹ <https://www.who.int/docs/default-source/coronaviruse/who-china-joint-mission-on-covid-19-final-report.pdf>

⁴⁰ <https://www.acpjournals.org/doi/10.7326/M20-0504>

⁴¹ <https://www.cdc.gov/mmwr/volumes/69/wr/mm6913e1.htm>

⁴² <https://bmjopen.bmj.com/content/10/8/e039652>

⁴³ <https://bmjopen.bmj.com/content/10/8/e039856>

Students, teachers, and employees who are exposed to COVID-19 should get tested.

Anyone who comes into close contact with someone who tested positive for COVID-19 should get tested for COVID-19. **Wait 7 days after the exposure to get tested.** This lets enough of the virus build up in your body to be detected by the test. Getting tested too soon can result in an inaccurate test result. Testing locations can be found at <https://coronavirus.utah.gov/testing-locations/>.



Is testing for COVID-19 free?

Most people will not have to pay for COVID-19 testing. You should not be asked for payment when you go to a testing location. The [Families First Coronavirus Response Act and subsequent sub-regulatory guidance](#) ensures the cost of getting a COVID-19 test is covered at 100% if you have health insurance and you have a medical reason to be tested. This means you have symptoms of COVID-19, you have had close contact with someone who has COVID-19, or you have a referral from a healthcare professional.

If you have health insurance:

- You should not be charged for a test no matter what testing site you go to.
- Healthcare providers are required by federal law to post a cash price for COVID-19 tests. This is to inform health insurance companies what to pay if you get tested by a provider that is out-of-network. If you are insured and have been charged for a test, please email the Utah Department of Health at COVID19TestingCoverage@utah.gov or the Utah Insurance Department at health.uid@utah.gov.
- Your insurance company may require you to have an order from a physician, practitioner, pharmacist, or other authorized health care professional for the cost of your test to be covered. Please check with your individual health insurance company to determine if this is a requirement for coverage. This type of visit or assessment should also be covered at 100%.

If you have Medicare coverage:

- Medicare will make payment for one diagnostic test per resident/patient without an order from a physician, practitioner, pharmacist, or other authorized health care professional. For more than one COVID-19 test to be covered by Medicare, you will need an order from a doctor or medical provider. This type of visit or assessment should also be covered at 100%.

If you are tested for a non-medical reason:

- You may be charged if you are getting tested for employment, travel, or non-medical reasons.
- Your health insurance company may not cover the cost of the test if you are getting tested for a non-medical reason. This includes if you get tested for general workplace health and safety (such as employee 'return to work' programs) or public health surveillance. Health insurance may only cover tests used to diagnose or treat you for COVID-19 or another health condition included in the requirements of the Families First Coronavirus Response Act.
- Before you get tested, check with your health insurance company for coverage details.

If you are uninsured and are a U.S. citizen and a Utah resident:

- You qualify for COVID-19 testing coverage through Medicaid. You must apply for this program at <https://medicaid.utah.gov/covid-19-uninsured-testing-coverage/>.
- Medicaid COVID-19 testing coverage for the uninsured covers the COVID-19 tests and all testing related services including doctor appointments (both in-person and through telehealth), ER visits, and any services performed in order to diagnose COVID-19, including X-rays, etc. Testing and other services will be paid for back to the date of your services.

If you are uninsured and do not qualify for the Medicaid option:

- There are locations that will provide testing free of charge. If you need help finding a location that provides free testing please call the Utah Coronavirus Hotline at 1-800-456-7707 or use the chat feature on the coronavirus.utah.gov website.



What are the types of COVID-19 tests?⁴⁴

There are three types of tests related to COVID-19.



PCR test: A PCR test tells you if you have COVID-19 right now and could spread it to other people. A PCR test looks for the genetic material of the virus. It is a very accurate test and almost always detects if a person is infected with the virus. PCR tests are processed in a lab and the results can take a few days to get back. PCR tests are usually done by:

- **Nasal or nasopharyngeal swab:** A healthcare worker puts a swab into your nose to collect a sample either just inside your nose or reaching further down your throat.
- **Saliva:** The saliva test is easier to perform, safer for healthcare workers, and more comfortable for the patient. You spit into a cup or tube and your saliva is then tested. The saliva test is as accurate as the swab test.



Rapid antigen test: An antigen test looks for proteins found on or within the virus. It tells you if you have COVID-19 right now and could spread it to other people. Samples for an antigen test are collected with a nasal or nasopharyngeal swab, but you are able to get the results much quicker than a PCR test. Results take about 15 minutes.

Antigen tests are less sensitive than PCR tests. This means that PCR tests are better than antigen tests at detecting the virus, particularly when a person has small amounts of virus in their body. Antigen tests work best when someone has symptoms of COVID-19 or when a person has high amounts of virus in their body. Antigen tests are most accurate during the first 7 days of your illness when your viral load is highest.⁴⁵ Because of this, even if you test negative with an antigen test, you may still be infected and you may be able to transmit the virus to others.



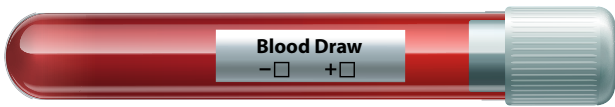
You may need to get a PCR test to confirm the results of your antigen test. You should get a PCR test within 48 hours after you got your rapid antigen test if:

- You have symptoms of COVID-19 but your rapid antigen test result was negative.
- You do not have symptoms of COVID-19 and were not in close contact with someone who has COVID-19 but your rapid antigen test result was positive.
- It's best to get a follow up PCR test the same day as your antigen test. However, if this isn't possible, you should get the PCR test no later than 48 hours after your antigen test.

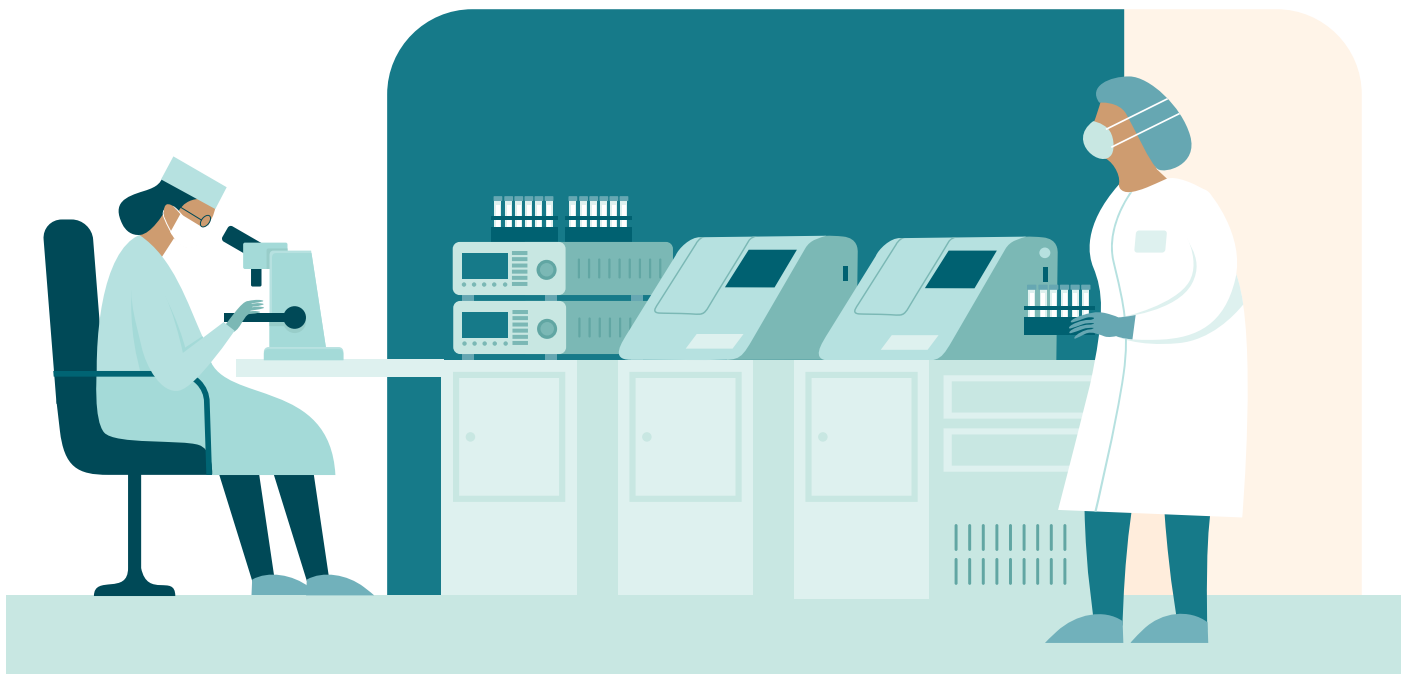
A PCR test is considered more accurate than an antigen test. In situations where a person has both an antigen and a PCR test within 48 hours of each other, public health officials will use the PCR test result to determine if a person needs to isolate or quarantine. More information on antigen tests can be found at https://coronavirus-download.utah.gov/Health/COVID-19_Rapid_Antigen_Test.pdf.

⁴⁴ <https://www.fda.gov/media/140161/download>

⁴⁵ <https://www.cdc.gov/coronavirus/2019-ncov/lab/resources/antigen-tests-guidelines.html>



Serology or antibody test: Serology, or antibody tests, may be able to tell if you have ever been exposed to the virus that causes COVID-19. They do not tell you if you are infected with the virus that causes COVID-19 right now and can spread it to other people. Antibody tests should not be used to diagnose current infections. A positive antibody test does not guarantee immunity to COVID-19. A sample of your blood is collected and is used to see if your body has made antibodies to the virus. Your body makes antibodies when it fights an infection. Antibodies in your blood mean, at one time, you were exposed to COVID-19. Antibody tests find these antibodies in your blood and tell you if your immune system has responded to the infection.





Testing for COVID-19 is most accurate when someone has symptoms.

Testing students, teachers, and employees who do not have symptoms or were not exposed to COVID-19 can increase the chance of an inaccurate test result. Getting tested too soon after being exposed to someone with COVID-19 may also increase the chance of an inaccurate test result.

If a person who was exposed to COVID-19 chooses to get tested, he or she should wait at least 7 days after their last exposure to get tested. This lets enough of the virus build up in his or her body to be detected by the test. Getting tested before this time may result in a false negative test result. This means the person tested negative but is really positive and can infect others with COVID-19.

Some testing sites in Utah may not test people who are asymptomatic (this means they do not have symptoms), even if they were exposed to COVID-19. It's always best to call a healthcare provider or testing site first, to make sure you are able to get tested. Testing people who do not have symptoms or who have not had a known exposure to COVID-19 may also place strains on limited testing resources.

The decision about who can be tested for COVID-19 is made by a healthcare provider, the Utah Department of Health, and the health systems in Utah.

Should students, teachers, or employees get an antibody test?

Antibodies develop several days after an individual gets infected and the strength of the immune response is highly variable among people. Right now, we know having antibodies to the virus that causes COVID-19 may offer some protection from getting infected again. We don't know how much protection the antibodies may provide or how long this protection will last.⁴⁶

Schools should not require students, teachers, or employees to have an antibody test to come to school or work. Antibody test results can't be used to avoid or end quarantine or isolation. Antibody testing may be expensive and does not tell you if someone could spread the virus to other people.

If a person wants to get an antibody test, he or she will need to ask a healthcare provider to order the test. Antibody tests may also be available through private companies. There may be a cost for this test. If someone tests positive for COVID-19 antibodies, there is a chance that the person could still be infectious. He or she should get a PCR test to know if he or she is infectious right now and can spread the virus to others.



⁴⁶ <https://www.cdc.gov/coronavirus/2019-ncov/testing/serology-overview.html>

If students, teachers, or employees test positive for COVID-19, do they need a doctor's note before they come back to school or work?

No. If a student, teacher, or employee tests positive for COVID-19, the health department will tell the person how long to isolate. In some situations, the health department may also call the point of contact (POC) at the school to let him or her know the person who tested positive has finished their isolation and can return to school. Once the person has finished isolation, they no longer are at risk for spreading the disease.

Studies also show people may test positive long after they are infectious. This means a person who at one time was sick with COVID-19 could still test positive even though he or she can't spread the virus to other people anymore. This makes it hard to know when they can return to school or work if a school requires a negative test result after their isolation is done.

You should not ask students, teachers, or employees who tested positive for COVID-19 for a negative test result, a doctor's note, or a note from the health department to prove they are ill, qualify for sick leave, or to come back to school or work after their isolation is done. This places a burden on the healthcare and public health systems. Employers do not need a doctor's note to get the tax credits under the [Families First Coronavirus Response Act](#).

Students, teachers, and employees may not have health insurance, access to a healthcare provider, or the financial means to get a doctor's note or a negative test result.



If students, teachers, or employees test negative for COVID-19, do they need a doctor's note to go back to school or work?

Students, teachers, and employees who were exposed and meet the criteria on page 21 to NOT quarantine don't need to provide proof of a negative test result to return to school or work.

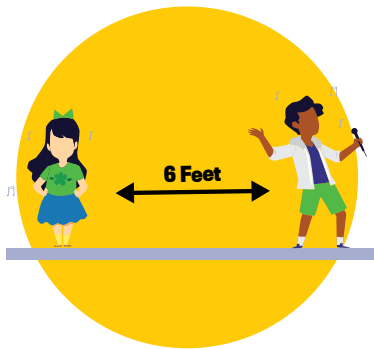
Students, teachers, and employees who were exposed and meet the criteria on page 21 to quarantine, must provide proof of a negative COVID-19 test to return to school or work sooner than 10 days. The local health department will determine what documentation meets this requirement.

Extracurricular activities and COVID-19

Extracurricular activities are important to students, their families, and our communities. This is why we are asking students, schools, families, and community members to take extra precautions to slow the spread of COVID-19 in their communities. It will take everyone working together and taking precautions to make sure students get to participate in these activities.



What precautions can we take to make sure students are able to participate in school extracurricular activities, sports, and clubs?



Schools should follow the specific requirements for extracurricular activities from the [Utah High School Activities Association](#), [Utah State Board of Education](#), and any state or local public health orders. Schools should work closely with their local health department to make sure state or local requirements are followed and best practices are implemented at extracurricular activities and events.

You are expected to wear a mask at all times during extracurricular activities, unless you are engaged in competition play that requires heavy physical exertion or if wearing a mask could be dangerous (like swimming in a pool). You are also expected to physical distance as much as possible during extracurricular activities. This means to stay at least 6 feet or 2 meters (about 2 arm lengths) away from other people as much as possible.

Until more people can get vaccinated, we encourage everyone to follow best practices to make sure students have the opportunity to participate in extracurricular activities.

- ✓ Everyone should wear a face mask in public and when you are around people you don't live with, even when you are outside.
- ✓ Activity directors, coaches, and training staff should encourage students to wear a face mask, physical distance, limit the number of people they come into close contact with in their personal lives, and limit the number of places they go where they may be in large groups.
- ✓ Everyone should wear a face mask at extracurricular events. Participants and athletes don't have to wear a face mask while they are performing or playing. Participants and athletes should wear a face mask as much as possible, including while sitting on the bench or sideline or even during the activity, practice, or game when it is feasible.

- ✓ Participants must wear a mask at one-time extracurricular activities, like a dance or graduation ceremony.
- ✓ Explain to participants that all of the extra precautions they are taking to stay safe and keep activities going are undone if they don't wear a mask any time they are in close contact with people who don't live in their home. This includes times like riding in a car with other people or after school at someone's house. They need to wear a mask any time they are close to other people, especially indoors.
- ✓ Space participants 6 feet apart as much as possible at activities, events, practices, and games.
- ✓ When possible, practice in cohorts to limit possible exposures.
- ✓ Consider placing markers 6 feet apart to make it easy for participants and coaches to practice physical distancing without having to think about it. People are more likely to practice health behaviors when they are easy. Place markers in both home and away sections, to keep everyone safe.
- ✓ Limit spectators to only the families of participants, and not the general public.
- ✓ Group bleachers or seating areas to keep household groups 6 feet from other people who do not live in their home.
- ✓ Consider blocking off every other row of seating.
- ✓ Place markers 6 feet apart in typical areas of congestion (outside restrooms, at entrances and exits, in front of concession stands).
- ✓ Provide hand sanitizer at concession stands. Only serve individually packaged items or grab and go items at concession stands.
- ✓ Have automatic hand sanitizer stations outside restrooms.

Students may not understand the severity of many students being exposed to the virus. Influential adults should consider explaining to students the effect many students being exposed would have on their events or sports seasons.

- ✓ Influential adults may also consider using the students in their circle of influence as school and community leaders to encourage other students, their families, and members of the community to take precautions at all times. Positive peer influence may help everyone in the school adopt more personal safety measures to stop the spread of the virus in the community, even when they are not at school.

Test to Play (testing for high school extracurricular activities)

The “Test to Play” testing requirements apply only to high schools. The goal of “Test to Play” is to allow students and staff to participate in extracurricular activities as safely as possible. Regular testing can find students and staff who are infectious with COVID-19 quickly and help prevent further spread of the virus in the school and community. Extracurricular activities may be higher risk environments than a school classroom if masks are not worn during the activity. Students who participate in these activities may also be in close contact with each other during participation. Some activities, such as indoor sports, may pose a greater risk for COVID-19 transmission if precautions are not taken.

Students, teachers, and staff may participate in extracurricular activities if they:⁴⁷

- Are tested for COVID-19 at least once every 14 days. The test can be a PCR or rapid antigen test. Antibody tests are not allowed.
- Are not in isolation or quarantine.
- Don't have any symptoms of COVID-19.



One-time extracurricular activities or events that are held indoors, like a school dance, are included in the Test to Play requirements. This means participants are required to get tested for COVID-19 — within 2 days of the start of a one-time extracurricular activity that is held indoors.

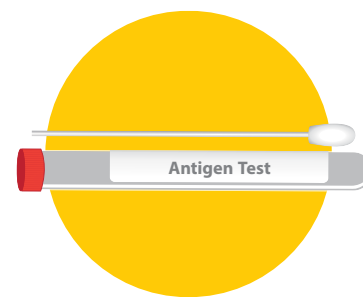
Test to Play does not require participants to be tested for COVID-19 to participate in one-time extracurricular events that are held outdoors, unless testing is required by their school or local health department. If a school or local health department requires students to be tested in order to participate in a one-time outdoor extracurricular activity, students must follow the requirements for their individual school or local health department.

Participants must wear a mask if they participate in one-time extracurricular events, even if the event is held outdoors. Spectators must wear a mask at all school sponsored events, including one-time extracurricular events or activities.

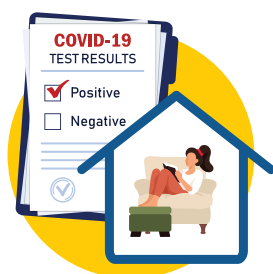
Schools should work closely with their local health department to make sure one-time extracurricular activities or events follow best practices to keep students and staff members safe, as well as state or local requirements.



Schools will provide rapid antigen testing for participants of high school extracurricular activities. Schools may also provide testing to any teacher or staff member who wants to get tested but are not involved in extracurricular activities as part of the “Test to Play” program. Schools will determine when and how to offer the testing to participants of extracurricular activities.



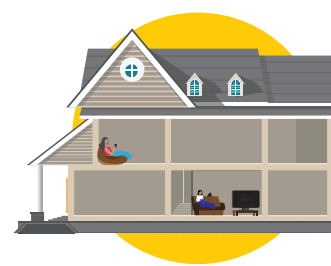
- All test results must be reported to the Utah Department of Health.
- Students who miss the testing event at the school may get tested at a testing provider of their choice. There are many free testing locations across the state, listed at <https://coronavirus.utah.gov/utah-covid-19-testing-locations>. They must show proof of the test result to the school. This documentation must include the student’s name, testing location, date of the test, type of test, and test result. At-home PCR or antigen test results are not allowed.
- Positive test results from “Test to Play” will NOT count toward the school’s outbreak threshold.
- You can’t participate in extracurricular activities if you test **positive**. You must isolate for 10 days from the date of the test, even if you had symptoms before the test. You may return to school and participate in extracurricular activities after you are done with your isolation period.
- You may participate in extracurricular activities if you test **negative**, are not in isolation or quarantine, and do not have any symptoms of COVID-19.
- Those who choose not to get tested will be unable to participate in the extracurricular activity.
- Students and staff who tested positive for COVID-19 before do NOT have to participate in Test to Play if it has been less than 90 days since they tested positive. If it has been longer than 90 days since they tested positive, they are required to participate in Test to Play.
- Students and staff who are fully immune do NOT have to participate in Test to Play. A person is fully immune if it has been 2 weeks since their final dose of the COVID-19 vaccine.



or



or



Schools need to be familiar with the limitations of antigen testing. These tests work best when someone has symptoms of COVID-19 or it has been 7 days after an exposure to the virus. A negative antigen test result does not mean they won’t ever get sick with COVID-19. Precautions like wearing a mask, physical distancing, and following isolation and quarantine guidelines must still be taken. More information on antigen tests can be found at: https://coronavirus-download.utah.gov/Health/COVID-19_Rapid_Antigen_Test.pdf.



Help conducting a testing event

The Utah Department of Health provides training resources for schools on how to complete a testing event at <https://coronavirus.utah.gov/school-training>. At the request of LEAs, the Utah Department of Health also helps conduct testing events:

- Entire testing event (pre-registration, testing, and reporting). The school only needs to provide the location, time, and staff to help direct those getting tested.
- Testing (swabbers) only. The school does the pre-registration and reporting.
- On-site technical assistance for reporting and registration. The school does the testing and pre-registration.

47 <https://coronavirus.utah.gov/special-orders/>



Schools must get parental permission prior to testing.

Prior to a test being administered to a student, the school must obtain written permission from the student's parent or guardian. The permission, if clearly stated in the permission document, is valid for the duration of the school year for the student's testing as part of the Test to Play or Test to Stay protocols. This helps the school move quickly to hold a testing event if the outbreak threshold is met and prevent disruptions to in-classroom learning. Schools may choose to get permission from parents during each term instead of one time for the entire school year but should not ask for permission more than once every term. A parent may rescind permission for their student's participation in testing events at any time during the school year by notifying the school in writing.

Contact tracing will be done for anyone who tests positive.

Students, teachers, or staff who are exposed to a person who tests positive should follow the school quarantine guidelines (found on page 21).



- You don't have to quarantine if both you and the person who tested positive were at school or were participating in a school extracurricular activity and were both wearing masks at the time of the exposure. The person who tested positive needs to isolate for at least 10 days, even if you were both wearing a mask.



- You need to quarantine if you were exposed at school and either you or the person who tested positive were not wearing masks. You may end quarantine on day 10 without testing, or on day 7 with a negative test result if the test was conducted on day 7 or later of your quarantine.



- If a student is quarantined when the school offers "Test to Play" testing, the school may choose to offer individual testing to the student after he or she has completed their quarantine so they can return to extracurricular activities. Students must complete their quarantine before they can return to extracurricular activities or participate in "Test to Play" testing.

Schools are expected to notify all close contacts, even if they meet the criteria to not quarantine, and provide instructions on what they should do. Close contacts should be told to watch for symptoms of COVID-19 until it has been 14 days after their exposure and what safety precautions should be taken. If at any time during the 14 days after their exposure a person develops symptoms of COVID-19, he or she should isolate and get tested right away. If the person does not have symptoms, he or she should wait 7 days after they were exposed to get tested.

The "Test to Play" option has different timeframes for when a person who tests positive should start isolation. If you test positive as part of "Test to Play," your isolation begins the day you are tested, not when your symptoms begin. You must isolate even if you don't get symptoms. The health department will determine the dates close contacts were exposed and when quarantine begins.



What does an extracurricular activity mean?

An extracurricular activity means an activity, course, or program that is:

- Not directly related to delivering instruction
- Provided, sponsored, or supported by a school or public or private institution of higher education

Examples of extracurricular activities may include sports teams, drill team, band, concert choir, drama, debate team, school dances, graduation ceremonies, recitals, etc.

If a student who participates in extracurricular activities tests positive for COVID-19, will the whole group, team, or club be quarantined?

It depends on the situation.

Anyone who was in close contact, 6 feet or 2 meters (about 2 arm lengths) for a total of 15 minutes or longer during a 24-hour period with the person who tested positive for COVID-19 is exposed and should follow the quarantine protocols on page 21. This means if both people were wearing face masks (the person who was exposed and the person who tested positive) and the person who was exposed does not have any symptoms of COVID-19, no quarantine is required. Every participant wearing a face mask as much as possible during extracurricular activities will result in fewer students needing to quarantine.

The entire team, club, or extracurricular activity may be considered exposed if the school point of contact (POC) or the local health department cannot clearly determine who the person who tested positive came into close contact with.

Anyone who tests positive for COVID-19 will need to isolate at home. He or she will not be able to go to school or participate in extracurricular activities or sports until his or her isolation is over.



**For a total of
15 Minutes**



Is it safe to travel for extracurricular activities?

Travel is a risk factor for the spread of COVID-19. The [CDC](#) recommends avoiding travel right now. If a school allows overnight travel right now, like for a team competition, participants should be tested for COVID-19 within 2 days of departure.

- Participants who test positive, or choose not to get tested, should not be allowed to travel.
- Participants who test negative, don't have symptoms of COVID-19, and have not been in close contact with someone who has COVID-19 within the past 10 days may travel.
- Participants should also get tested 5-7 days after they return from overnight travel for an extracurricular event.

COVID-19 outbreaks in schools

The Utah Department of Health and Utah's 13 local health departments provide guidelines to help school administrators understand when a group of students, teachers, or employees at the school may need to be dismissed from in-person learning because there is a concerning number of cases among the school population.

Schools are lower risk than other settings;⁴⁸ however, if students who have COVID-19 are at school (including those who are infected but don't have symptoms), it increases the risk of the virus spreading throughout a school. That risk increases exponentially the more people who are infected and as new variants of the virus continue to spread.⁴⁹ The earlier we identify students who have COVID-19, it not only prevents the virus from spreading within the school, but also lets students know they need to isolate, and protects their families and community. The spread of the virus in communities affects the spread of the virus in schools.

These guidelines may change as we learn more about COVID-19. Schools and public health agencies need to be willing to adapt to these changes as we learn more about the best ways to keep students, teachers, and employees safe and schools open for in-person learning.

What is an outbreak of COVID-19 in a school?

An outbreak is when a disease happens in higher numbers than expected. An outbreak can happen in one area (like a classroom) or extend more widely (like a school).

As cases are identified in a school, the school should consider notifying parents, teachers, and employees about the situation and ask them to take extra precautions, including checking for symptoms of COVID-19 every day and staying home when sick.

School outbreak thresholds

[Senate Bill 107](#) requires schools to do a Test to Stay event when:

- Schools with 1,500 or more students have 2% of their students test positive for COVID-19.
- Schools with fewer than 1,500 students have 30 students test positive for COVID-19.

Positive test results from Test to Play do NOT count toward the outbreak threshold.

To keep students and staff safe until more people get vaccinated, public health recommends schools consider testing when:

- Schools with 1,500 or more students and staff have 1% of students and/or staff who test positive for COVID-19.
- Schools with fewer than 1,500 students and staff have 15 students and/or staff test positive for COVID-19.



Help conducting a testing event

The Utah Department of Health provides training resources for schools on how to complete a testing event at <https://coronavirus.utah.gov/school-training>. At the request of LEAs, the Utah Department of Health also helps conduct testing events:

- Entire testing event (pre-registration, testing, and reporting). The school only needs to provide the location, time, and staff to help direct those getting tested.
- Testing (swabbers) only. The school does the pre-registration and reporting.
- On-site technical assistance for reporting and registration. The school does the testing and pre-registration.

⁴⁸ https://www.cdc.gov/mmwr/volumes/70/wr/mm7004e3.htm?s_cid=mm7004e3_w

⁴⁹ https://www.cdc.gov/mmwr/volumes/70/wr/mm7008e4.htm?s_cid=mm7008e4_w

School outbreak thresholds

Where is the outbreak happening?	How many people tested positive for COVID-19?	What are the recommendations to protect students, teachers, and employees at the school?
Classroom - Elementary schools only *Classroom outbreaks are a public health recommendation only.	3 people who are connected by setting is considered a classroom outbreak. The threshold for a classroom outbreak applies ONLY to elementary schools.	The people who test positive should isolate. The people who were exposed should follow the school quarantine protocols. The classroom should be cleaned using the cleaning guidelines on page 75. Local education authority in consultation with the local health department decides to either: • Offer rapid antigen testing for students and staff in the classroom (Test to Stay), or • Take other actions consistent with public health guidance to stop the spread of COVID-19.
School - applies to all K-12 schools	Required by law: Schools with 1,500 or more students, the outbreak threshold is 2% of the student population. Schools with 1,500 or fewer students, the outbreak threshold is 30 students who test positive. Positive test results from Test to Play do NOT count toward the outbreak threshold. Public health recommends: Schools with 1,500 or more students and staff, the outbreak threshold is 1% of the school population (students and staff). For schools with 1,500 or fewer students and staff, the outbreak threshold is 15 cases in the school (students and staff).	The people who test positive should isolate. The people who were exposed should follow the school quarantine protocols. The whole school should be cleaned using the cleaning guidelines on page 75. Local education authority in consultation with the local health department conducts a testing event for students and staff (Test to Stay).

What test results count toward the outbreak thresholds?

[Senate Bill 107](#) only counts students who have tested positive and attended at least some in-person instruction at the school within the last 14 days toward the outbreak threshold. Students who test positive as part of Test to Play events don't count toward the outbreak threshold.

The Utah Department tracks all school-associated cases, including both students and staff, at <https://coronavirus.utah.gov/case-counts>. A person who tests positive is considered a school-associated case when someone:

- Had symptoms of COVID-19 while he or she attended, worked in, or visited a school in-person, or
- Attended, worked in, or visited a school in-person during the 14 days before his or her symptoms started, or
- Attended, worked in, or visited a school in-person during the 14 days before his or her positive test result.

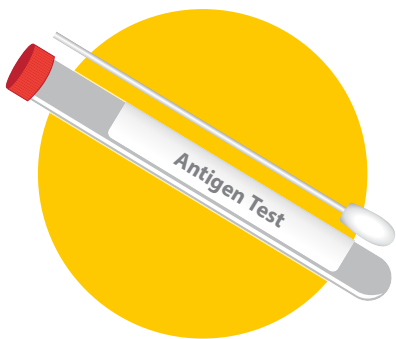
Schools should use a rolling 14-day window to determine if an outbreak threshold has been reached. The number of cases resets after a school meets the outbreak threshold and completes an intervention.

Test to Stay (testing for school outbreaks)

The goals of “Test to Stay” are to allow students and staff to participate in in-person learning as safely as possible while lessening the burden of quarantine and multiple soft closures on students and their families, teachers, and school administrators. It was officially implemented January 4, 2021.

Data from pilot tests of “Test to Stay” in 2 Utah high schools (Kearns High School and Syracuse High School) showed this strategy can successfully identify students and staff who need to isolate or quarantine while also allowing in-person learning to continue for those who test negative. The percent of positive students and staff from these pilot tests was between 1 and 2%. A survey conducted with school administrators in February 2021 by the Utah Department of Health showed:

- 61% of survey respondents believe the Test to Stay program is effective at keeping schools open for in-person learning.
- Test to Stay events helped students’ families feel more comfortable and confident sending their students to school
- Test to Stay events increased community buy-in for future testing events and mitigation strategies.
- Low positivity rates after Test to Stay events indicates these types of testing strategies, along with the guidelines in the COVID-19 School Manual, are making a difference and helping to stop the spread of COVID-19 in schools.



When a school meets the outbreak thresholds, the local education authority in consultation with the local health department should offer rapid antigen testing for all students and staff.

- Students and staff who tested positive for COVID-19 before do NOT have to participate in Test to Stay if it has been less than 90 days since they tested positive. If it has been longer than 90 days since they tested positive, they should participate in Test to Stay.
- Students and staff who are fully immune do NOT have to participate in Test to Stay. A person is fully immune if it has been 2 weeks since their final dose of the COVID-19 vaccine.

Schools must get parental permission prior to testing.

Prior to a test being administered to a student, the school must obtain written permission from the student’s parent or guardian. The permission, if clearly stated in the permission document, is valid for the duration of the school year for the student’s testing as part of the Test to Play or Test to Stay protocols. This helps the school move quickly to hold a testing event if the outbreak threshold is met and prevent disruptions to in-classroom learning. Schools may choose to get permission from parents during each term instead of one time for the entire school year but should not ask for permission more than once every term. A parent may revoke permission for their student’s participation in testing events at any time during the school year by notifying the school in writing.



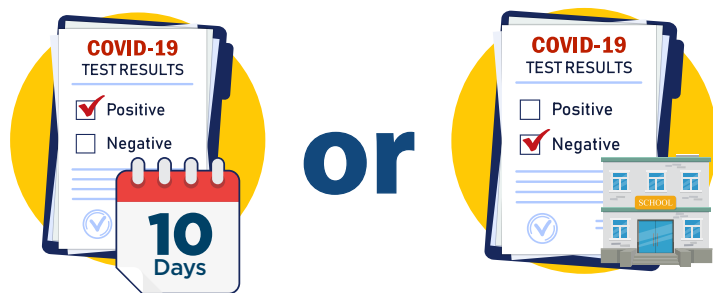
Rapid antigen testing

Schools will provide rapid antigen testing for the “Test to Stay” option. Schools will determine when and how to offer the testing to students, teachers, and staff. All test results must be reported to the Utah Department of Health.

Schools need to be familiar with the limitations of antigen testing. These tests work best when someone has symptoms of COVID-19 or it has been 7 days after an exposure to the virus. A negative antigen test result does not mean they won’t ever get sick with COVID-19. Precautions like wearing a mask, physical distancing, and following isolation and quarantine guidelines must still be taken. More information on antigen tests can be found at: <https://coronavirus-download.utah.gov/Health/COVID-19-Rapid-Antigen-Test.pdf>.

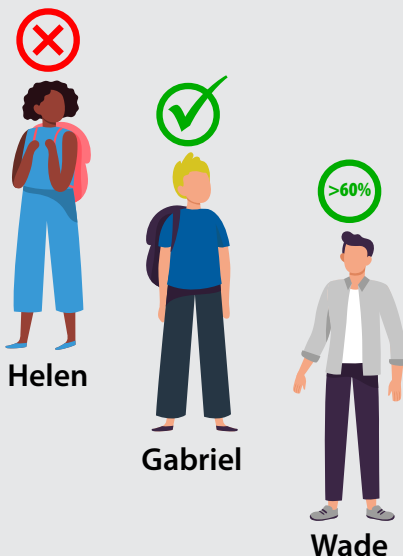
Students who are offered rapid antigen testing:

- Must isolate at home if they test **positive**, even if they had symptoms before the test. They may return to in-person learning after they are done with their isolation period.
- May continue in-person learning if they test **negative**, are not a close contact of a person who tests positive, and do not have any symptoms of COVID-19.



Public health recommends students who choose not to get tested should move to virtual or remote learning for at least 10 days if:

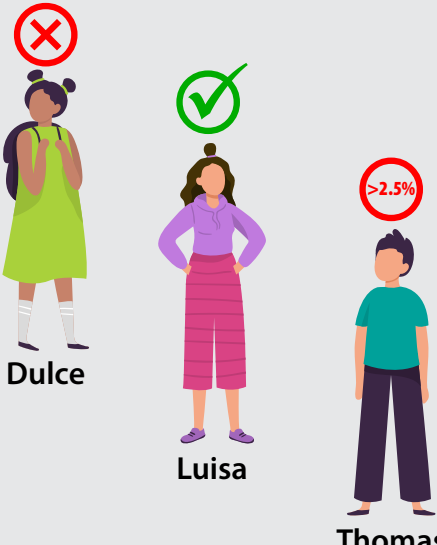
- Fewer than 60% of students in the school participate in the testing event, or
- The percent of positive tests among those who participated in the testing event (called percent positivity) is 2.5% or greater.
- **This is a recommendation ONLY.** LEAs may work with their local health department to determine how to handle situations where students choose not to participate in Test to Stay events.



Scenario - Recommendation ONLY

Helen, Gabriel, and Wade are high school students. Their school recently met the outbreak threshold and held a Test to Stay event. The school had 75% of their students and staff participate in the Test to Stay event.

- Helen tested positive and will go to virtual or remote learning while she isolates at home.
- Gabriel tested negative and does not have symptoms of COVID-19. He is able to continue in-classroom learning.
- Wade didn’t participate in the testing event. However, because the school had more than 60% participation in the event, Wade is able to continue in-classroom learning.



Dulce

Luisa

Thomas

Scenario - Recommendation ONLY

Dulce, Luisa, and Thomas are high school students. Their school recently met the outbreak threshold and held a Test to Stay event. The school percent positivity after testing was 3%.

- Dulce tested positive and will go to virtual or remote learning while she isolates at home.
- Luisa tested negative and does not have symptoms of COVID-19. She is able to continue in-classroom learning.
- Thomas didn't participate in the testing event. He will need to go to virtual or remote learning because the school's percent positivity is greater than 2.5%.

Teachers and staff are expected to continue their normal job duties in-person if they choose not to get tested or test negative. They should isolate at home if they test positive or follow quarantine guidelines if they were exposed to COVID-19.

Students who miss the testing event at the school may get tested at a testing provider of their choice. This testing must be done within the same 2-days as the school Test to Stay event. There are many free testing locations across the state, listed at <https://coronavirus.utah.gov/utah-covid-19-testing-locations>. They must show proof of the test result to the school. This documentation must include the student's name, testing location, date of the test, type of test, and test result. At-home PCR or antigen test results are not allowed.

There may be situations where students with special healthcare needs may be unable to participate in testing because of physical, mental, or behavioral limitations. Parents should work with their child's healthcare provider and the school to see if accommodations are possible in these situations, such as using a saliva PCR test instead of a nasal swab test.

In rare circumstances, a student who is unable to participate in the Test to Stay testing, or is unable to use a different type of test, may be allowed to attend school. Parents of children with special healthcare needs should make this request to the school. Parents may wish to talk with their child's healthcare provider, the school nurse, or local health department when making this decision. Parents and the school should consider the following circumstances when deciding if a student returns to in-person learning without being tested:

- If strict prevention measures can be taken, including mask wearing by the student, teachers, and the student's other classmates.
- The student's IEP or 504 plan services would be significantly disrupted if the student was moved to remote or virtual learning.
- The student attends school in a self-contained unit, away from the general student population.



Help conducting a testing event

The Utah Department of Health provides training resources for schools on how to complete a testing event at <https://coronavirus.utah.gov/school-training>. At the request of LEAs, the Utah Department of Health also helps conduct testing events:

- Entire testing event (pre-registration, testing, and reporting). The school only needs to provide the location, time, and staff to help direct those getting tested.
- Testing (swabbers) only. The school does the pre-registration and reporting.
- On-site technical assistance for reporting and registration. The school does the testing and pre-registration.

Contact tracing will be done for anyone who tests positive.

Students, teachers, or staff who are exposed to a person who tests positive should follow the quarantine guidelines (found on page 21).



You don't have to quarantine if both you and the person who tested positive were at school and were both wearing masks at the time of the exposure while at school. The person who tested positive needs to isolate for at least 10 days, even if you were both wearing a mask.



You need to quarantine if you were exposed at school, and either you or the person who tested positive were not wearing masks. You may end quarantine on day 10 without testing, or on day 7 with a negative test result if the test was conducted on day 7 of your quarantine or later.

Schools are expected to notify all close contacts, even if they meet the criteria to not quarantine, and provide instructions on what they should do. Close contacts should be told to watch for symptoms of COVID-19 until it has been 14 days after their exposure and what safety precautions should be taken. If at any time during the 14 days after their exposure a person develops symptoms of COVID-19, he or she should isolate and get tested right away. If the person does not have symptoms, he or she should wait 7 days after they were exposed to get tested.

The "Test to Stay" option has different timeframes for when a person who tests positive should start isolation. If you test positive as part of "Test to Stay," your isolation begins the day you are tested, not when your symptoms begin. You must isolate even if you don't get symptoms. The health department will determine the dates close contacts were exposed and when quarantine begins.

Who decides if a school will transition from in-person learning to hybrid or remote learning?

While the Governor, state health department, and local health department each have legal authority to close schools in response to a public health emergency, the local school board will decide if or when a school will move to remote or hybrid learning during the pandemic.⁵⁰ The local health department should be consulted in this decision. Many things will be considered in this situation including the:

- Importance of in-person learning to the social, emotional, economic, and academic growth and well-being of students.
- Number of people in the community who are testing positive for COVID-19 (called community spread or community transmission).
- Number of students, teachers, and employees who are testing positive for COVID-19 or who are on quarantine due to an exposure.
- Growth rate of new cases (people who tested positive) in the area.
- Statewide capacity for testing, hospital beds, and ICUs.
- The COVID-19 Transmission Index level the county is currently in.⁵¹
- Interaction of students, teachers, and employees among other schools in the district.
- Ability to provide virtual learning to students.
- Economic and social hardships on families and students.

Who is involved in the decision-making process for schools?

There are many people and organizations involved in the plans for reopening schools during the pandemic.

- Utah State Board of Education (USBE)
- State and local health departments
- Local education associations (school districts and charter schools are also known as LEAs)
- State and local government officials
- School administrators
- Parents
- Eligible students (students who are 18 years old or students of any age who have taken postsecondary classes)
- Teachers
- Employees who work in the education sector
- State and local elected officials

⁵⁰ <https://schools.utah.gov/coronavirus?mid=4985&aid=1>

⁵¹ <https://coronavirus.utah.gov/utahs-health-guidance-system/>

COVID-19 vaccines

Getting vaccinated will help keep you, your family, and your community healthy and safe.

All COVID-19 vaccines authorized by the FDA are safe and effective at protecting you from the virus. They keep you from getting sick, needing to be hospitalized, and or dying from COVID-19. Recent studies⁵² show the vaccines can prevent transmission of the virus to other people and work against the new variants of the virus identified so far. By getting vaccinated, you're helping to end the damage to our economy, prevent more deaths and illnesses, and stop COVID-19 from continuing to spread. Vaccines are how we get our lives back. [Learn more](#)



How do COVID-19 vaccinations affect quarantine and isolation guidelines?

You are considered fully immune, or protected from the virus, 2 weeks after your final dose of the COVID-19 vaccine. If you were exposed to the virus before you had the chance to get your final dose of the vaccine, or were exposed before your body developed full immunity, you can still get sick with COVID-19.

Two-dose vaccines: 2 weeks after 2nd shot (you need both shots to be fully protected).

One-dose vaccines: 2 weeks after shot (you only need one shot to be fully protected).

Most K-12 students won't be able to get vaccinated because they are too young to receive the vaccine. COVID-19 vaccines are only approved for people 16 years of age and older. The Pfizer vaccine is approved for people 16 years of age and older. The Moderna and Johnson & Johnson vaccines are approved for people 18 years of age and older. Right now, quarantine and school testing protocols- (like Test to Play and Test to Stay) will most likely only impact school staff and teachers.

It's likely recommendations for testing, isolation, and quarantine will change as we learn more about COVID-19 vaccines.



⁵² <https://www.cdc.gov/coronavirus/2019-ncov/science/science-briefs/fully-vaccinated-people.html>

Do I have to get tested for the Test to Play or Test to Stay school testing protocols if I've been vaccinated?

Have not been vaccinated yet	Have been partially vaccinated (had only 1 dose of a 2-dose vaccine like Pfizer or Moderna)
You must participate in the Test to Play or Test to Stay testing protocols outlined in the COVID-19 School Manual .	You must participate in the Test to Play or Test to Stay testing protocols outlined in the COVID-19 School Manual .

If you've had your final doses of the vaccine: (had 2 doses of Pfizer or Moderna vaccines or 1 dose of Johnson & Johnson vaccine)	
If it has NOT been 2 weeks since you were vaccinated	If it has been at least 2 weeks since you were vaccinated
You must participate in the Test to Play or Test to Stay testing protocols outlined in the COVID-19 School Manual .	You are not required to participate in the Test to Play or Test to Stay testing protocols outlined in the COVID-19 School Manual .

Do students, teachers, or school staff still need to quarantine if they are exposed to COVID-19 after being vaccinated?

If you haven't had your final dose of the vaccine and are exposed to someone who tests positive:	
Have not been vaccinated yet	Have been partially vaccinated (had only 1 dose of a 2-dose vaccine like Pfizer or Moderna)
Quarantine and get tested for COVID-19. Students, teachers, and school staff should follow quarantine guidelines as outlined in the COVID-19 School Manual .	Quarantine and get tested for COVID-19. Students, teachers, and school staff should follow quarantine guidelines as outlined in the COVID-19 School Manual .

If you've had your final dose of the vaccine and are exposed to someone who tests positive: (had 2 doses of Pfizer or Moderna vaccines or 1 dose of Johnson & Johnson vaccine)	
If it has NOT been 2 weeks since you were vaccinated	If it has been at least 2 weeks since you were vaccinated
Quarantine and get tested for COVID-19. Students, teachers, and school staff should follow quarantine guidelines as outlined in the COVID-19 School Manual .	You don't need to quarantine. However, if you get symptoms of COVID-19 after you were exposed (which would be rare), you should isolate and talk to a doctor or healthcare provider. You may need to get tested for COVID-19.

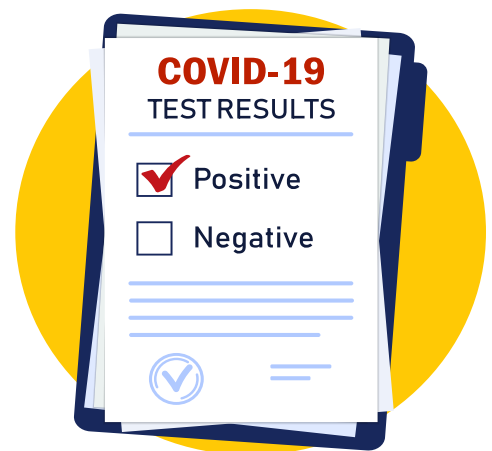
Do students, teachers, or school staff still need to get tested if they develop symptoms of COVID-19 after being vaccinated?

If you have symptoms of COVID-19 and:	
Have not been vaccinated yet	Have been partially vaccinated (had only 1 dose of a 2-dose vaccine like Pfizer or Moderna)
Isolate and get tested right away.	Isolate and get tested right away.

If you are fully vaccinated and have symptoms of COVID-19: (had 2 doses of Pfizer or Moderna vaccines or 1 dose of Johnson & Johnson vaccine)	
If it has NOT been 2 weeks since you were vaccinated	If it has been at least 2 weeks since you were vaccinated
Isolate and get tested right away.	Isolate and call your doctor or healthcare provider. It is likely that something other than COVID-19 is causing your symptoms. However, your doctor may want you to get tested for COVID-19. COVID-19 vaccines do not interfere with the accuracy of the test.

Do students, teachers, or school staff still need to isolate if they test positive for COVID-19 after being vaccinated?

Yes. You should isolate if you test positive or have symptoms of COVID-19, even if you have gotten both doses of the vaccine. The vaccines do not interfere with the accuracy of COVID-19 tests. This means if you test positive after you are vaccinated, you have COVID-19 and can spread the virus to others. This is rare but can happen. We know COVID-19 vaccines keep you from getting sick or having severe illness. However, we don't know yet if the vaccine will keep you from getting the virus altogether.



Scenario example

A teacher tests positive for COVID-19. The teacher and the students in her class were wearing face masks at the time of the exposure.



Mrs. Watkins is a 2nd grade teacher.

Mrs. Watkins tested positive for COVID-19.



She must isolate at home. She can't go to work until she is:

- Fever-free for 24 hours, and
- Her respiratory symptoms have improved for 24 hours, and
- It has been at least 10 days since she first got sick.
- She needs to isolate for at least 10 days from the day she got tested, even if she never gets symptoms of COVID-19.

The health department called to find out who she had been in close contact with, about 6 feet or 2 meters (about 2 arm lengths), for a total of 15 minutes or longer.



The people who live with Mrs. Watkins should quarantine for 10 days. They can't end quarantine until at least 10 days after the last time they were in close contact with Mrs. Watkins, even if they test negative or never get symptoms of COVID-19.

This means they should stay home and away from other people as much as possible. The health department will tell them how long to quarantine and when to get tested.

Mrs. Watkins was at school 2 days before she got sick and tested positive for COVID-19. The health department called to tell the school she tested positive.



Both Mrs. Watkins and the students in her class wore face masks at the time of the exposure. Since they were all wearing masks, the students don't need to quarantine and can stay in school as long as they don't get symptoms of COVID-19 or test positive.

The students' families don't have to quarantine UNLESS the student who was exposed tests positive.



The students who were exposed should still be extra careful and take safety precautions. There is a small chance they can still get sick with COVID-19 or expose others to the virus. For a list of safety precautions students should follow for 14 days after their exposure, go to page 18.



No one else at the school was in close contact with Mrs. Watkins. No other students, teachers, or employees need to quarantine. No one else had a close contact exposure to COVID-19. The school doesn't need to tell any other parents in the school about the exposure. Only those students, teachers, or employees who need to quarantine will be notified.



The health department will let the school know when Mrs. Watkins has finished isolation and can return to school.

Scenario example

A student tests positive for COVID-19 and was not wearing a face mask at the time of the exposure.



Pearl is an 8th grade student at a junior high school.

Pearl tested positive for COVID-19.



She must isolate at home. She can't go to school until she is:

- Fever-free for 24 hours, and
- Her respiratory symptoms have improved for 24 hours, and
- It has been at least 10 days since she first got sick.
- She needs to isolate for at least 10 days from the day she got tested, even if she never gets symptoms of COVID-19.

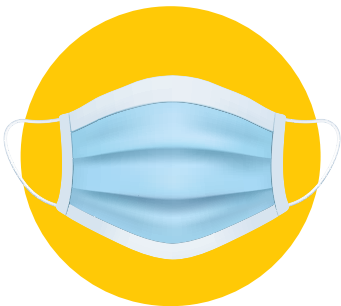
The health department called Pearl's parents to find out who she had been in close contact with, about 6 feet or 2 meters (about 2 arm lengths), for a total of 15 minutes or longer.



People who live with Pearl should quarantine for 10 days. They can't end quarantine until it has been at least 10 days since the last time they were in close contact with Pearl, even if they test negative or never get any symptoms.

This means they should stay home and away from other people as much as possible. The health department will tell them how long to quarantine and when to get tested.

Pearl was at school 2 days before she got sick and tested positive for COVID-19. The health department called to tell the school she tested positive for COVID-19.



Pearl wasn't wearing a face mask. Since she wasn't wearing a mask when she was in close contact with other people, her teachers and any students who came into close contact with her must quarantine at home.

They may return to school:

- After 10 days if they choose not to get tested.
- After 7 days if they test negative and never got symptoms of COVID-19 while they were quarantined. They must wait at least 7 days after the last time they were in close contact with Pearl (their exposure) to get tested.

The families of the teachers and students who were exposed don't have to quarantine **UNLESS** the teachers or students test positive.



The people who were exposed should still be extra careful and take safety precautions for 14 days. There is a small chance they can still get sick with COVID-19 or expose others to the virus. If at any time during the 14 days after their exposure, the students develop symptoms of COVID-19, they should isolate and get tested right away. If they do not have symptoms, they should wait 7 days after they were exposed to get tested. For a list of safety precautions they should follow for 14 days after their exposure, go to page 18.



No one else at the school was in close contact with Pearl. No other students, teachers, or employees need to quarantine. No one else had a close contact exposure to COVID-19. The school doesn't need to tell any other parents in the school about the exposure. Only those students, teachers, or employees who need to quarantine will be notified.



The health department let the school know when Pearl has finished isolation and can return to school.

Scenario example

A student lives with someone who tests positive for COVID-19.



Cole is a 5th grade student at an elementary school.



Cole's dad tests positive for COVID-19. His dad must isolate at home until he is:

- Fever-free for 24 hours, and
- His respiratory symptoms have improved for 24 hours, and
- It has been at least 10 days since he first got sick.
- He should still isolate for 10 days from the day he got tested, even if he doesn't get any symptoms of COVID-19.

His dad has to stay isolated until he's not infectious anymore. This means it has been at least 10 days since he tested positive and his symptoms are getting better.



Since he lives with someone who tested positive, Cole has to quarantine at home for at least 10 days. It can be hard to stay away from someone who is sick in your house. This means Cole may have to stay at home for more than 10 days. Every time he comes into close contact with his dad while he's infectious, his quarantine starts over. He has to quarantine for 10 days from the last time he had close contact with his dad while his dad was infectious.

The health department will tell Cole's family when they can end quarantine and when to get tested. Even if no one else in Cole's family gets sick or they all test negative for COVID-19, they all have to finish their 10-day quarantine.



They should stay home and away from other people as much as possible. They should not go to work, school, church, other family gatherings, or anywhere else until they've finished quarantine. If they need to leave their home to get medical care, they need to wear face masks.

They need to be extra careful. For a list of safety precautions Cole and his family should follow, go to page 18.



The other students in Cole's classes do not need to quarantine UNLESS Cole tests positive for COVID-19 and he was at school during his infectious period.

The school does not need to let other students, parents, teachers, or employees know that Cole is quarantined.

Scenario example

A student who already had COVID-19 in the last 90 days is exposed again.



William tested positive for COVID-19 less than 90 days ago. He went back to school after he finished isolation. A few weeks later, he was exposed to someone who tested positive. This means he was closer than 6 feet or 2 meters (about 2 arm lengths) from the person who tested positive for a total of 15 minutes or longer.



William doesn't have to quarantine because it has been less than 90 days since he tested positive. He can go to school and participate in extracurricular activities. He doesn't need to get tested for COVID-19 again for 90 days after he first tested positive, even if he's exposed again.



William should follow these guidelines for 14 days from the date of his last exposure:

- Take his temperature before school. Check for symptoms of COVID-19 every day.
- Wear a face mask at school, during extracurricular activities, and when he's around people he doesn't live with.
- If he gets sick or has symptoms of COVID-19, he should isolate for at least 10 days after he first gets symptoms and call a doctor. His doctor will decide if he should get tested for COVID-19 again. Even if he tests negative for COVID-19, William still needs to take extra precautions for 14 days.

Scenario example

A student had COVID-19 more than 90 days ago and is exposed again.



Rossina tested positive for COVID-19 more than 90 days ago. She went back to school after she finished isolation. A few weeks later, she was exposed to a student who tested positive. This means she was closer than 6 feet or 2 meters (about 2 arm lengths) from the person who tested positive for a total of 15 minutes or longer.



Rossina has been exposed to the virus and needs to quarantine again since it has been more than 90 days since she tested positive. She should follow the quarantine and testing guidelines for schools.



She doesn't need to quarantine and can go to school if:

- Rossina and the student who tested positive were both wearing face masks at the time of the exposure.
- She doesn't have symptoms of COVID-19.



If Rossina doesn't meet the criteria above, she needs to quarantine at home.

She may return to school:

- After 10 days if she chooses not to get tested.
- After 7 days if she tests negative and never gets symptoms of COVID-19 while she is quarantined. She must wait at least 7 days after she was exposed to get tested.

Rossina's family doesn't have to quarantine UNLESS she tests positive.

She should be extra careful and take safety precautions. She can still get sick with COVID-19 or expose others to the virus. For a list of safety precautions Rossina should follow while quarantined, go to page 21.

Scenario example

A student is exposed in his personal life to someone who tested positive for COVID-19.



Caesar is a 10th grade student at the high school. He goes to a family party. His cousin who was at the party tested positive for COVID-19.



The health department called his parents to tell them their family had close contact with someone who tested positive for COVID-19. This means Caesar and his family were closer than 6 feet or 2 meters (about 2 arm lengths) from his cousin, for a total of 15 minutes or longer.

The health department will tell them what to do next, how long to quarantine, and when they should get tested.



Caesar and his family should quarantine at home. They can return to school or work:

- **After 10 days if they choose not to get tested.**
- **After 7 days if they test negative for COVID-19 and they never get symptoms of COVID-19. They must wait at least 7 days after the exposure to get tested.**

This means they should stay home and away from other people as much as possible. They should not go to work, school, church, other family gatherings, or anywhere else until their quarantine is over. If they need to leave their home to get medical care, they should wear face coverings.

Caesar and his family should be extra careful. For a list of safety precautions Caesar and his family should follow, go to page 18.



The other students in Caesar's classes do not need to quarantine **UNLESS** Caesar tests positive for COVID-19 **and** he was at school during his infectious period.

The school does not need to let other students, parents, teachers, or employees know that Caesar was exposed to someone with COVID-19.

Scenario example

A school employee is exposed to someone in his personal life who tested positive for COVID-19.



Mr. Penna is the custodian at an elementary school.



The health department called Mr. Penna to tell him he was exposed to someone who tested positive for COVID-19. This means he was closer than 6 feet or 2 meters (about 2 arm lengths), for a total of 15 minutes or longer from the person who tested positive. The health department will tell him what to do next, how long to quarantine, and when to get tested.

Mr. Penna calls and lets his employer know he was exposed to COVID-19 and needs to quarantine.



Mr. Penna should quarantine at home. He can return to work:

- **After 10 days if he chooses not to get tested.**
- **After 7 days if he tests negative and never gets symptoms of COVID-19 while he was quarantined. He must wait at least 7 days after he was exposed to get tested.**

Mr. Penna's family does not need to quarantine UNLESS they were also exposed to the person who tested positive or if Mr. Penna tests positive for COVID-19.



No one at the school where Mr. Penna works came into close contact with the person who tested positive for COVID-19. No one else needs to quarantine.

The school does not need to let anyone at the school know that Mr. Penna was exposed to COVID-19.

Scenario example

A student lives with someone who is quarantined.



Gia is a 3rd grade student at an elementary school.
Her mom works at a grocery store.



The health department called Gia's mom to tell her she was exposed to someone who tested positive for COVID-19. This means she was closer than 6 feet or 2 meters (about 2 arm lengths) to the person who tested positive for a total of 15 minutes or longer. **Gia's mom should quarantine at home and get tested for COVID-19.**



Gia was not in close contact with the person who tested positive for COVID-19. She can go to school. She doesn't need to quarantine UNLESS her mom tests positive for COVID-19. Gia doesn't need to get tested for COVID-19.



Gia's school doesn't need to know her mom was exposed to someone who tested positive for COVID-19 and is quarantined because Gia was not the one who was exposed.

Scenario example

A high school provides “Test to Play” testing for students who participate in extracurricular activities.



Sam, Jake, and Kendon play on the high school football team.

Their high school provides rapid antigen testing for anyone involved in extracurricular activities. This is called “Test to Play.” Students, teachers, and staff can participate in extracurricular activities if they:

- Are tested for COVID-19 at least once every 14 days.
- Are not in isolation or quarantine.
- Don’t have any symptoms of COVID-19.



Jake tests negative for COVID-19.

Jake doesn’t have any symptoms of COVID-19 or in isolation or quarantine. He can go to school and participate in extracurricular activities, like football practice.



Sam tests positive for COVID-19. Sam must isolate at home. He can’t go to school or participate in extracurricular activities until he is:

- Fever-free for 24 hours, and
- His respiratory symptoms have improved for 24 hours, and
- It has been at least 10 days since he was tested as part of his school’s “Test to Play” testing event.



The health department called Sam’s parents to find out who he had been in close contact with, about 6 feet or 2 meters (about 2 arm lengths), for a total of 15 minutes or longer. They need to know all of his close contacts up to 2 days before he tested positive as part of “Test to Play.” Anyone in close contact with Sam should quarantine.



Sam's family should quarantine for 10 days.

This means they should stay home and away from other people as much as possible. The health department will tell them when they can end quarantine and when to get tested. His family should finish their 10-day quarantine, even if they test negative or never get sick.



People should quarantine if they were exposed to Sam up to 2 days before he tested positive.



Kendon tested negative, but was in close contact with Sam at football practice. He should follow the quarantine protocols for schools.

- Kendon doesn't need to quarantine if both he and Sam were wearing masks at the time of the exposure.
- He will need to quarantine at home if either he or Sam were not wearing masks. He can return to school after 10 days if he chooses not to get tested, or after 7 days if he tests negative and never got symptoms of COVID-19 while he was quarantined. He must wait at least 7 days after his exposure to get tested.

The players and coaches on the football team who were close contacts of Sam should be extra careful. There is a small chance they can still get sick with COVID-19 or expose others to the virus. For a list of safety precautions they should follow for 14 days after their exposure, go to page 18.



The health department will let the school know when Sam has finished isolation and can return to school and participate in extracurricular activities.

Scenario example

A school meets the school outbreak threshold.



Ms. Borski is a teacher at the high school. Angela, Rennie, and Zach are students at the school.

The number of students and staff who have tested positive at the school has reached the outbreak threshold outlined in the COVID-19 School Manual.

When the school reaches the outbreak threshold, the high school chooses to provide rapid antigen testing for all students and school staff. This is called “Test to Stay.”



Angela tests negative for COVID-19.

Angela doesn’t have any symptoms of COVID-19 or in isolation or quarantine. She can continue in-person learning at school.



Rennie doesn’t participate in the “Test to Stay” option provided by the school.

She must move to virtual or remote learning for 10 days. The school and local health department will decide when the 10-day remote learning period starts and ends.



Zach tests positive for COVID-19. Zach must isolate at home. He can’t go to school or participate in extracurricular activities until he is:

- Fever-free for 24 hours, and
- His respiratory symptoms have improved for 24 hours, and
- It has been at least 10 days since he was tested during his school’s “Test to Stay” testing event.



The health department called Zach's parents to find out who he had been in close contact with, about 6 feet or 2 meters (about 2 arm lengths), for a total of 15 minutes or longer. This means they need to know anyone he came into close contact with, up to 2 days before he was tested. **Anyone who was exposed to Zach up to 2 days before he tested positive in "Test to Stay" is exposed. They should follow the school quarantine guidance and be extra careful.** There is a small chance they can still get sick with COVID-19 or expose others to the virus. For a list of safety precautions they should follow for 14 days after their exposure, go to page 18.



Zach's family should quarantine for 10 days.

This means they should stay home and away from other people as much as possible. The health department will tell them when they can end quarantine and when to get tested. His family should finish their 10-day quarantine, even if they test negative or never get sick.

The health department will let the school know when Zach has finished isolation and can return to school.



Ms. Borski tested negative, but was in close contact at school with someone who tested positive. Ms. Borski should follow the quarantine protocols for schools.

- Ms. Borski doesn't need to quarantine if both she and the person who tested positive were wearing masks at the time of the exposure.
- Ms. Borski will need to quarantine at home if either she or the person who tested positive were not wearing masks. She may return to school after 10 days if she chooses not to get tested, or after 7 days if she tests negative and never gets symptoms of COVID-19 while she is quarantined. She must wait at least 7 days after she was exposed to get tested.

Cleaning⁵³

The guidance in this section is for regular cleaning of your school or workplace.

Clean visibly dirty and high-touch surfaces. Disinfect them after you clean. This will help prevent the spread of COVID-19 and other viral respiratory illnesses.

What is the difference between cleaning and disinfecting?



Cleaning

Cleaning uses soap (or detergent) and water to remove germs, dirt, and impurities from surfaces or objects. Cleaning doesn't usually kill germs, but it lowers their numbers and the risk of spreading infection when you remove them.



Disinfecting

Disinfecting uses chemicals to kill germs on surfaces or objects. Disinfecting doesn't clean dirty surfaces or objects. It should be done after you clean and remove germs, to kill germs and further lower the risk of spreading infection.

We don't know how long the air inside a room could be infectious after someone with COVID-19 was there. You can shorten the time it takes respiratory droplets to be out of the air, if you increase the ventilation in the area or room. When you decide how long to close off rooms or areas used by people who were sick before you start disinfecting them, think about:

- The size of the room.
- The ventilation system design. You should know where the supply and exhaust vents are. It is also important to know the flow rate (air changes per hour).

Have an after-hours cleaning and maintenance plan for your school.

- Vacuuming, sweeping, curtain cleaning, and brooms can send infected particles back into the air.
- Employees who are responsible for cleaning and maintenance tasks that are not affected by HVAC system operation are at an increased risk of close range exposure and should wear proper PPE, including an N95 mask.⁵⁴

⁵³ <https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html>

⁵⁴ <https://www.ashrae.org/technical-resources/commercial#general>

Administrators should:



- **Make a plan with staff and teachers.** Discuss obstacles to more frequent cleaning and disinfecting and ways to overcome those obstacles.



- **Train staff.** Make sure that cleaning staff, teachers, and others who use cleaners and disinfectants read and understand all instruction labels, understand safe and appropriate use, and have and are using the PPE appropriate to the product. Consider providing instructional materials and training in other languages.



- **Develop a schedule for increased, routine cleaning and disinfection.** Modify your standard procedures to accommodate more frequent cleaning and disinfection. Focus cleaning and disinfection on surfaces and objects that are touched often (doorknobs, light switches, classroom sink handles, countertops) and shared items between uses.



Cleaning and disinfection products should not be used by children or near children, and staff should make sure that there is adequate ventilation when using these products to prevent children or themselves from inhaling toxic vapors.

Cleaning tips for teachers



What should I clean?

Clean and disinfect surfaces and objects in your classroom that are touched often. Follow the recommendations in this section for the types of cleaners and disinfectants you should use on different surfaces.

Examples of some of the surfaces in your classroom that may be touched often:

- Door handles and knobs
- Desks and chairs
- Cabinets, lockers, and bookshelves
- Shared computer keyboards and mice
- Light switches
- Pencil sharpener handles
- Sinks and surrounding areas
- Counter tops
- Shared electronics such as printers
- Other shared learning materials



When should I clean?

Clean and disinfect surfaces and objects that are touched often at least daily or between use by different students. Limit the use of shared objects when possible, or clean and disinfect between use.

Times you may want to clean or disinfect:

- In the morning before students arrive
- Between classes (if students change rooms and while students are not there)
- Between use of shared surfaces or objects
- Before and after food service
- Before students return from recess or breaks
- After students leave for the day



These cleaning guidelines are for community, non-healthcare facilities such as:

- Schools
- Institutions of higher education
- Offices
- Child care centers
- Businesses
- Community centers that do, and do not, house persons overnight

Cleaning products

Cleaning staff and others should clean hands often. Employees should wash their hands with soap and water right away after they take off gloves or have contact with someone who is sick. If you do not have soap and water and your hands do not look dirty, you can use an alcohol-based hand sanitizer that contains at least 60% alcohol. If your hands look dirty, you need to wash them with soap and water.



Call the Utah Poison Control Center if you have questions about exposures to cleaning products.

- To disinfect surfaces, use products that meet EPA criteria for use against SARS-CoV-2, the virus that causes COVID-19, and are the right ones for the surface. Disinfectants are important to reduce the spread of COVID-19. Do not overuse or stockpile disinfectants or other supplies. This can cause shortages of products needed in critical situations.
- Employers must follow OSHA standards on Bloodborne Pathogens (29 CFR 1910.1030), including proper disposal of regulated waste, and PPE (29 CFR 1910.132).
- Most common EPA-registered household disinfectants can be used to fight COVID-19.
- A list of EPA-approved products for use against the virus that causes COVID-19 is available at <https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2>.
- Always follow the manufacturer's instructions for all cleaning and disinfection products for concentration, application method, and contact time, etc.
- Always read and follow the directions on the label to make sure you are safe and using the products correctly.
- Wear gloves and consider wearing eye protection in case chemicals splash.
- Make sure there is enough ventilation in the room when you are using chemicals.
- Only use the amount recommended on the label.
- If you are diluting chemicals, use water that is room temperature (unless it says something different on the label).
- Do not mix chemicals.
- Put a label on diluted cleaning solutions.
- Store and use chemicals out of the reach of children and pets.
- You should never eat, drink, breathe, or inject these products into your body or put them directly on your skin. They can cause serious harm. Do not wipe or bathe pets with these, or any other products that are not approved for animal use. You can also use diluted household bleach solutions (at least 1000ppm sodium hypochlorite, or concentration of 5%–6%) to fight COVID-19.
- Check to make sure bleach can be used on the surface before you use it.
- Follow the manufacturer's instructions to apply a bleach solution.
- Make sure it stays on the surface for at least 1 minute.
- Always make sure there is enough ventilation during and after using bleach solutions.
- Check to make sure the product is not past its expiration date.
- Never mix household bleach with ammonia or any other cleanser. This can cause fumes that could be very dangerous to breathe in.

If EPA-approved disinfectants are in short supply, you can use a bleach solution. Household bleach that is not expired will be effective against coronaviruses when it is properly diluted. Bleach solutions will be effective for disinfection up to 24 hours. You can make a bleach solution by mixing:

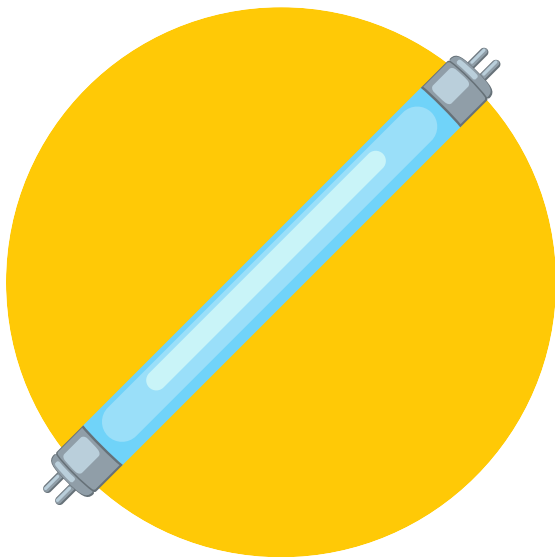
- 5 tablespoons (1/3 cup) bleach per gallon of room temperature water or
- 4 teaspoons bleach per quart of room temperature water.



Disinfectants

Some surfaces only need to be cleaned with soap and water. If surfaces aren't touched often, you can just clean them with soap and water and don't need to disinfect them. For more information about cleaning and disinfecting, visit <https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/cleaning-disinfection.html>.

- Do not apply disinfectants to items used by children, especially items they might put in their mouths. Many disinfectants can be harmful if they are swallowed.
- In a household setting, you can usually just clean toys with soap and water. For more information about cleaning and disinfecting toys and surfaces in a childcare setting, visit <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/guidance-for-childcare.html>.
- Employees or companies who have specialized training and equipment may be required to apply certain disinfectants such as fumigants and fogs.



Alternative disinfection methods:

We do not know how effective alternative disinfection methods are against COVID-19, such as ultrasonic waves, high intensity UV radiation, and LED blue light. The EPA does not routinely review these, so they cannot confirm whether they are effective against COVID-19. The CDC only recommends the use of [EPA-recommended disinfectants](#) against the virus that causes COVID-19.

- The CDC does not recommend using a sanitizing tunnel. There is no evidence they are effective to reduce the spread of COVID. The chemicals used in these tunnels can cause eye, skin, or respiratory irritation or damage.

How to clean hard surfaces

Increase how often you clean surfaces and shared objects that are touched often (such as workstations, keyboards, telephones, handrails, and doorknobs). This will reduce the risk of cross contamination. For example, clean before and after school or before and after students or staff use shared objects.

- Clean dirty surfaces with soap and water before you disinfect them.
- Always wear gloves and gowns recommended for the type of chemicals you use.
- You may need to wear extra PPE to clean and disinfect. This will depend on the product you are using and if there is enough ventilation in the place you are cleaning. Always follow the manufacturer's instructions for each product you use.
- Give employees disposable disinfecting wipes so they can wipe down surfaces that are touched often before they use them (doorknobs, keyboards, remote controls, desks, or other work tools and equipment).



How to clean soft (porous) surfaces

Move or remove as many items as you can that are touched often or have contact with many people. You may want to remove soft and porous items such as area rugs and seating. These types of items are difficult to clean and disinfect. It may be easier to store these types of items during the pandemic. There are a limited number of EPA-approved products for soft and porous materials.

When you clean soft (porous) surfaces like carpeted floor, rugs, and drapes, remove anything you can see that is dirty or might contaminate it. Vacuum before you use any type of cleaner. You can then use a cleaner meant for this type of surface.

After you clean:

- If the items can be washed in a washing machine, follow the manufacturer's instructions to wash them. Use the warmest water setting you can for the items. Dry the items all the way.
- If items can't be washed in a washing machine, clean the surface with soap and water or use products made for porous surfaces that are EPA-approved for use against the virus that causes COVID-19.
- Soft and porous materials that are not touched often should only be cleaned or laundered.



How to clean electronics

When you clean electronics like tablets, touch screens, keyboards, remote controls, and ATM machines, remove anything you can see that is dirty or might contaminate it.

- Follow the manufacturer's instructions for all cleaning and disinfection products.
- You may want to use wipeable covers for electronics.
- If you don't have the manufacturer's instructions, you may want to use alcohol based wipes or sprays that have at least 70% alcohol to disinfect touch screens. Make sure you dry surfaces very well so liquids don't pool.



Cleaning linens, clothes, or other items that go in the laundry

- Do not shake dirty laundry. You do not want to spread the virus in the air.
- Use the manufacturer's instructions when you wash items. Wash items on the warmest water setting you can use for the items. Dry them all the way. You can wash dirty laundry from someone who was sick with other people's items.
- Clean and disinfect hampers or other carts used to carry laundry. Follow the manufacturer's instructions or use the cleaning recommendations for the type of surface.

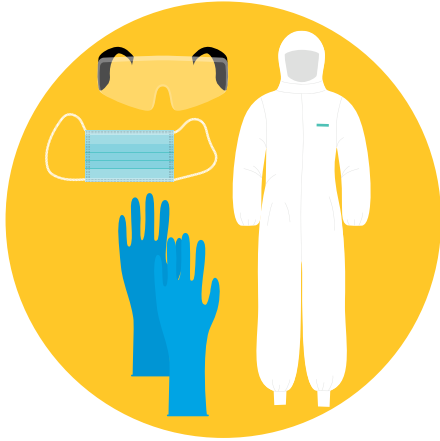
How to clean outdoor areas, like playgrounds

Do your regular cleaning on these areas. You do not need to disinfect them.

- Do not spray disinfectant on outdoor playgrounds. This is not a good use of your supplies because disinfecting outdoor equipment is not proven to reduce the risk of COVID-19.
- Clean high-touch surfaces made of plastic or metal often (grab bars, railings).
- You do not need to clean and disinfect wooden surfaces (play structures, benches, tables) or ground covers (mulch, sand).
- You should not disinfect sidewalks and roads. Spread of COVID-19 from these surfaces is very low.



Personal protective equipment (PPE) for cleaning staff



You should consider the safety of employees who perform custodial or other cleaning and disinfecting tasks. These employees are at an increased risk of being exposed to the virus and toxic effects of chemicals.

- To protect your employees, train them to use PPE and chemicals correctly.
- Cleaning employees should wear disposable gloves and gowns for all of their tasks in the cleaning process. This includes when they handle trash.
- You should have gloves and gowns that can be used with the disinfectant products you are using.
- You may need to have extra PPE, depending on the type of cleaning or disinfectant products you use. For example, you may need eye protection if there is a risk of cleaning products splashing into your eyes.
- Be careful when you take off gloves and gowns. You don't want to come into contact with any germs or spread them into the air. Wash your hands right away with soap and water for 20 seconds after you take off your gloves.
- If you don't have a gown, you can wear coveralls, an apron, or a work uniform when you clean and disinfect. If you are wearing reusable (washable) clothes, wash it after you wear it. Wash your hands after you touch dirty laundry.
- Take off your gloves after you clean a room or an area where sick people have been. Wash your hands right away after you take off your gloves.
- Tell your supervisor right away if something happens to your PPE, like a tear in your gloves or something else that could expose you to COVID-19.
- Wash your hands often for 20 seconds with soap and water. If you don't have soap and water and your hands don't look dirty, you can use an alcohol-based hand sanitizer that contains at least 60% alcohol. If your hands look dirty, you need to wash them with soap and water.
- Use good hygiene at work and home. Wash your hands often. Try not to touch your eyes, nose, or mouth with unwashed hands.



Cleaning after a positive case of COVID-19⁵⁵

You usually do not need to close your entire school for a single case of COVID-19. You should consider community spread, how much contact the person with COVID-19 had with others, and when the contact took place. These things should also be considered when you decide how long a school, or part of the school, stays closed. Administrators should work with local health officials to determine if temporarily closing the school building is necessary.

You should wait 24 hours before you clean and disinfect. This reduces the chance for other employees to be exposed to respiratory droplets.

If you can't wait 24 hours, wait as long as possible. Open outside doors and windows to increase air circulation in these areas during this waiting period.



Clean visibly dirty and high-touch surfaces. Disinfect them after you clean. This will help prevent the spread of COVID-19 and other viral respiratory illnesses.

We don't know how long the air inside a room could be infectious after someone with COVID-19 was there. You can shorten the time it takes respiratory droplets to be out of the air, if you increase the ventilation in the area or room. When you decide how long to close off rooms or areas used by people who were sick before you start disinfecting them, think about:

- The size of the room.
- The ventilation system design. You should know where the supply and exhaust vents are. It is also important to know the flow rate (air changes per hour).

Have an after-hours cleaning and maintenance plan for your business.

- Vacuuming, sweeping, curtain cleaning, and brooms can send infected particles back into the air.
- Employees who are responsible for cleaning and maintenance tasks that are not affected by HVAC system operation are at an increased risk of close range exposure and should wear proper PPE, including an N95 mask.⁵⁶



⁵⁵ <https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html>

⁵⁶ <https://www.ashrae.org/technical-resources/commercial#general>

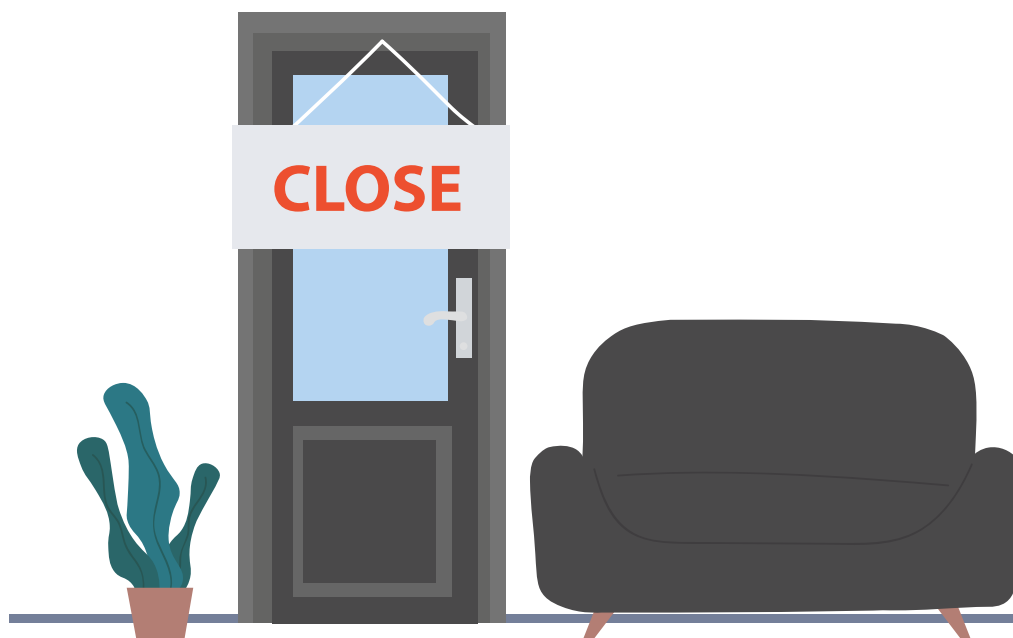


These cleaning guidelines are for community, non-healthcare facilities such as:

- Schools
- Institutions of higher education
- Offices
- Child care centers
- Businesses
- Community centers that do, and do not, house persons overnight

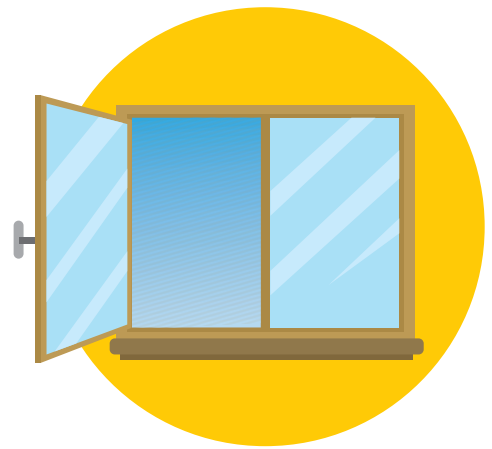
These guidelines are not meant for cleaning staff in healthcare facilities or repatriation sites, households, or for others who have specific cleaning guidance.

Number of days since the person who was sick or tested positive was at the school	What to do
Fewer than 7 days	<p>Close off all areas used for long periods of time by the person who is sick.</p> <p>Wait 24 hours before you start to clean and disinfect.</p>
7 days or more	<p>You do not need to do extra cleaning and disinfection.</p> <p>Just do your regular cleaning and disinfecting of all high-touch surfaces at the school.</p>



At a school, child care center, office, or other facility that does not house people overnight:

- Close off areas visited by the person who was sick. You do not necessarily need to shut down your school if you can close off the affected area.
- Open outside doors and windows.
- Turn off in-room, window-mounted, or on-wall recirculation HVAC temporarily, to keep from contaminating HVAC units.
- Do NOT deactivate central HVAC systems. These systems introduce outdoor air into the areas and provide better filtration.
- Turn off room fans and the central HVAC system that services the room or space temporarily, so that particles that escape when you are vacuuming do not spread throughout the facility.
- Do not vacuum a room or space that has people in it. Wait until the room or space is empty to vacuum, such as at night for common spaces, or during the day for private rooms.
- Clean soft or porous surfaces such as carpeted floors or rugs with the recommended detergents or cleaners for these surfaces.
 - After the surfaces are cleaned, disinfect with an EPA-approved disinfectant.
 - Soft and porous materials, like carpet, are not as easy to disinfect as hard surfaces. There are a limited number of EPA-approved disinfectants for these surfaces. For more information about approved disinfectants, visit <https://www.epa.gov/pesticide-registration/list-n-disinfectants-coronavirus-covid-19>.
 - If a vacuum should not be used when the surface is wet, you need to make sure to allow enough time for the surface to dry.
- Wear disposable gloves to clean and disinfect.
- People who have asthma should not be present when you clean or disinfect. This can trigger asthma attacks or exacerbations.
- Cleaning staff should clean and disinfect all areas, such as offices, bathrooms, common areas, shared electronic equipment (like tablets, touch screens, keyboards, remote controls, and ATM machines) used by the person who is sick, focusing on frequently touched surfaces.
- Areas can be reopened once they have been cleaned and disinfected.
- Workers who did not have close contact with the person who was sick can return to work after the area has been disinfected.

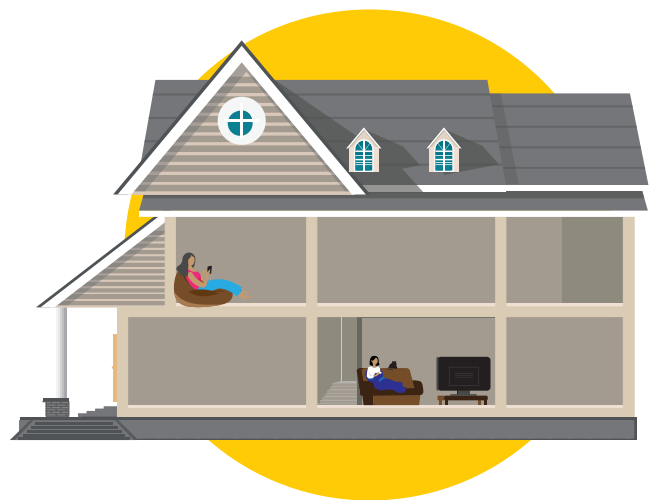


At a facility that does house people overnight:

- You should work with state and local health officials to isolate people who are sick and provide temporary housing as needed. Follow the [Interim Guidance for US Institutions of Higher Education](#).
- Close off areas visited by the person who is sick. You do not necessarily need to shut down your business if you can close off the affected area.
- Open outside doors and windows.
- Turn off in-room, window-mounted, or on-wall recirculation HVAC temporarily, to keep from contaminating HVAC units.
- Do NOT deactivate central HVAC systems. These systems introduce outdoor air into the areas and provide better filtration.
- Turn off room fans and the central HVAC system that services the room or space temporarily, so that particles that escape when you are vacuuming do not spread throughout the facility.
- Do not vacuum a room or space that has people in it. Wait to vacuum until the room or space is empty, such as at night for common spaces, or during the day for private rooms.
 - Clean soft or porous surfaces such as carpeted floors or rugs with the recommended detergents or cleaners for these surfaces.
 - After the surfaces are cleaned, disinfect with an EPA-approved disinfectant.
 - Soft and porous materials, like carpet, are not as easy to disinfect as hard surfaces. There are a limited number of EPA-approved disinfectants for these surfaces. For more information about approved disinfectants, visit <https://www.epa.gov/pesticide-registration/list-n-disinfectants-coronavirus-covid-19>.
 - If a vacuum should not be used when the surface is wet, you need to make sure to allow enough time for the surface to dry.
- Wear disposable gloves to clean and disinfect.
- People who have asthma should not be present when you clean or disinfect. This can trigger asthma attacks or exacerbations.

In areas where people who are sick are being housed in isolation, follow the [CDC Interim Guidance for Environmental Cleaning and Disinfection for U.S. Households with Suspected or Confirmed Coronavirus Disease 2019](#).

- Focus on cleaning and disinfecting common areas where staff or other people who provide services may come into contact with people who are sick.
- You should reduce how often you clean and disinfect the bedrooms and bathrooms used by people who are sick. Only clean and disinfect these spaces as-needed.
- Clean and disinfect as normal in areas people who are sick have visited or used. You do not need to do any extra cleaning and disinfection if it has been more than 7 days since the person with COVID-19 visited or used the area.
- Areas can be reopened once they have been cleaned and disinfected.
- Workers who did not have close contact with the person who was sick can return to work after the area has been disinfected.



Create a healthy learning environment.

COVID-19 is spread mainly by close contact between people. Close contact means a person was within 6 feet or 2 meters (about 2 arm lengths) for a total of 15 minutes or longer of someone who tested positive for COVID-19.

It is very hard to prevent close contact in a school setting. You won't always be able to prevent close contact. However, if you think about how people use the spaces in your school and modify them to reduce close contact as much as you can, you decrease the chance of exposures in the school. Wearing masks at all times during school will also help prevent the spread of COVID-19.

This manual provides public health recommendations that will help make schools safer, but they will not eliminate the risk of COVID-19 completely. Schools cannot stop the spread of COVID-19 alone. Communities which have a lot of COVID-19 spread will also see outbreaks in schools. It is critical for communities, families, and individuals to take necessary measures to lower the spread of COVID-19. If we all follow as many of the recommendations as we can, it will greatly reduce the risk of COVID-19 spreading in our schools.^{57,58}



57 <https://pws.byu.edu/making-sense-of-the-research-on-covid-19-and-school-reopenings>

58 <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/>

Prepare your school for in-person learning.

Custodians and maintenance employees should be the first employees back in your building after a school closure. Allow plenty of time for them to prepare the building before you allow other employees to return.

The CDC uses a list of things you can do to lower the risk to students and employees. This list is called the [hierarchy of controls](https://www.cdc.gov/niosh/topics/hierarchy/default.html).⁵⁹ They are listed from the best ways you can control and stop the spread of COVID-19, to the ways that are least effective. Use a combination of these controls to best protect your school. Some of these include engineering controls (ventilation and how you set up the spaces in your school and workspaces), policies for your school and workplace, and personal protective equipment (PPE).

Your hazard assessment will tell you what kind of COVID-19 workplace hazards you have, or may get. This will help you decide what to do to lower the risk, or what type of PPE are needed for specific job duties.



⁵⁹ <https://www.cdc.gov/niosh/topics/hierarchy/default.html>

Engineering and ventilation controls⁶⁰

You may want to improve the engineering controls using the building ventilation system. It is a good idea to work with an HVAC professional who knows the best way to improve ventilation for local environmental conditions and spread in the community.

- ✓ Increase the percentage of outdoor air to as high as 100% as possible with the HVAC system capabilities (such as using economizer modes). You will need to verify to make sure the HVAC system is compatible for both temperature and humidity, as well as indoor and outdoor air quality. If you have fewer people in the building, this increases the effective dilution ventilation per person.
- ✓ Increase total airflow supply to occupied spaces, if possible.

Make sure ventilation systems are working properly.

- ✓ Disable demand-controlled ventilation (DCV) that reduces air supply based on temperature or occupancy.
- ✓ Consider using natural ventilation (open windows if it is safe and possible to do so) to allow outdoor air to dilute the indoor air.
- ✓ Increase air filtration to as high as possible without weakening the design airflow.
- ✓ Check filters to make sure they are within service life and have been installed correctly. Inspect the filter housing racks to make sure the filter fits correctly and check for ways to minimize filter bypass.
- ✓ Consider running the HVAC system at maximum outside airflow for 2 hours before and after areas are occupied, according to the [industry standards](#).
- ✓ Keep systems running for longer hours. It is best to run them all the time if you can (24 hours a day, 7 days a week). This makes the air exchanges in the building space better.
- ✓ Generate clean-to-less-clean air movements. Re-evaluate how supply and exhaust air diffusers are positioned. Adjust the zone supply and exhaust flow rates to establish measurable pressure differentials.
- ✓ Have employees work in “clean” ventilation zones and out of higher risk areas, such as visitor reception or exercise facilities.
- ✓ Consider using a portable HEPA fan or filtration system to help clean the air, especially in higher-risk areas.
- ✓ Consider using [ultraviolet germicidal irradiation \(UVGI\)](#) as another way to get rid of potential airborne virus in the [upper room](#) air of common areas.
- ✓ Post warning signs if exhaust outlets are near pedestrian areas; consider diverting to avoid them.

Some of these recommendations are from the American Society of Heating, Refrigerating, and Air-Conditioning Engineers (ASHRAE) Guidance for Building Operations During the COVID-19 Pandemic. Learn more about ASHRAE guidelines at <https://www.ashrae.org/>.

⁶⁰ <https://www.ashrae.org/>



Protect your building water system and devices after a long shutdown:

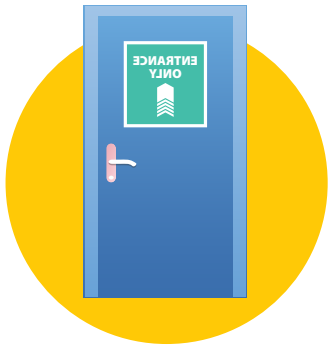
If you had to shut down your building for a long time, there are steps you need to take before you reopen. The CDC Guidance for Building Water Systems has 8 steps you should take before you reopen your business or building. Learn more at <https://www.cdc.gov/coronavirus/2019-ncov/php/building-water-system.html>.

Recommendations for specific areas and spaces:

Make sure you know where the supply and return outlet locations are for these spaces and that there won't be long time periods where people are exposed to air flow from the face of one person to another. For more information, visit

<https://www.ashrae.org/technical-resources/commercial#general>

https://aiha-assets.sfo2.digitaloceanspaces.com/AIHA/resources/Guidance-Documents/Reopening-Guidance-for-General-Office-Settings_GuidanceDocument.pdf.



Lobby:

- Pressurized lobby to outside.
- Label entrance and exit doors for one-way traffic.

Elevator and escalators:

- Ask riders to wear face coverings and minimize talking.
- Limit riders for physical distancing and face away from each other. Place decals inside the elevator to show riders where to stand, if needed.
- Consider having elevators stop at every floor in low-rise buildings.
- Turn on elevator cab (lift) ventilation fans, when possible.
- Ask people to take the stairs, if possible. This is very helpful when elevator lobbies are crowded.
- Post signs to remind people to physical distance.
- Allow elevators to run at high speed to reduce time in elevators.
- Consider installing a touchless call button.
- Consider a portable air cleaner with HEPA filter in the elevator for vulnerable riders.
- Use floor markings in elevator lobbies and near the entrance to escalators to remind people to physical distance.
- Consider leaving steps empty between passengers on escalators, if possible.
- Post signs to remind people not to touch surfaces. They should use an object (such as a pen cap) or their knuckle to push elevator buttons.
- Ask elevator and escalator riders to wash their hands and not touch their face after holding on to handrails or touching buttons.





Stairs:

- Consider one-way traffic if there are more than 2 stairs.
- Turn on fans or stairwell pressurization, if possible.
- Open windows to outside, if possible and outside conditions allow.
- Consider portable air cleaners.

Toilet:

- Consider installing an occupancy sensor, if possible.
- Add a lid to the toilet and ask people to put the lid on before they flush.



Conference room or private office:

- Keep doors open to allow air movement. If doors must be closed, consider a portable air cleaner or return fan to ceiling plenum.

Atrium:

- All air handling systems that connect to an atrium should have similar measures.
- Review impact of stack effect.

Other recommendations or areas to review:

- Keep dry bulb temperatures within the comfort ranges indicated in [ANSI/ASHRAE Standard 55-2017](#). You should try to keep them at the higher end of the dry bulb temperatures.
- Keep relative humidity between 40% and 60%, if possible. This can reduce how long the virus lives. You may need to watch for the possibility of issues with indoor condensation.
- Do not open windows if outdoor air quality is not healthy or increase ventilation without using the proper filters. For more information, visit [ANSI/ASHRAE Standards 62.1-2019](#).
- Check outside air intake often to make sure there is not a potential risk.
- Check the air intake location for any obstruction, or less than 10' above ground.
- Check the nearby exhaust for other contaminants.

Find risks in your school.

You should give students, teachers, and employees a safe and healthy learning environment and workplace. You should find out where and how people might be exposed to COVID-19 in the school. You can find out if there are risks for students, teachers, and employees to be exposed to COVID-19 by doing a thorough COVID-19 hazard assessment of your school.

You may want to hold a training for teachers and employees so they understand your school's plan to reopen for in-person learning and what will be involved in the hazard assessment of your school. It is very important every employee understands what the school is doing and what they can do to keep the school safe.



Ideas to consider for this training:

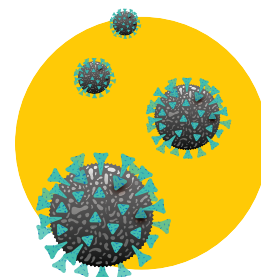
- Hold all meetings, trainings, and professional development virtually.
- Your employees know their jobs best. Consider having all employees complete a hazard assessment of their workspaces and work processes. Identifying and modifying spaces or processes used in your school that increase the chance a student, teacher, or employee may be exposed to COVID-19 is a critical part of your school's COVID-19 response.
- Make sure everyone understands what poses a threat and why. Work together to come up with ways you can decrease the risk of COVID-19. Provide this training in plain language, if you can. Employees may have limited knowledge about COVID-19 and how it spreads and limited knowledge about eliminating workplace hazards. If you have employees whose preferred language is not English, you may want to provide this and other trainings in other languages.



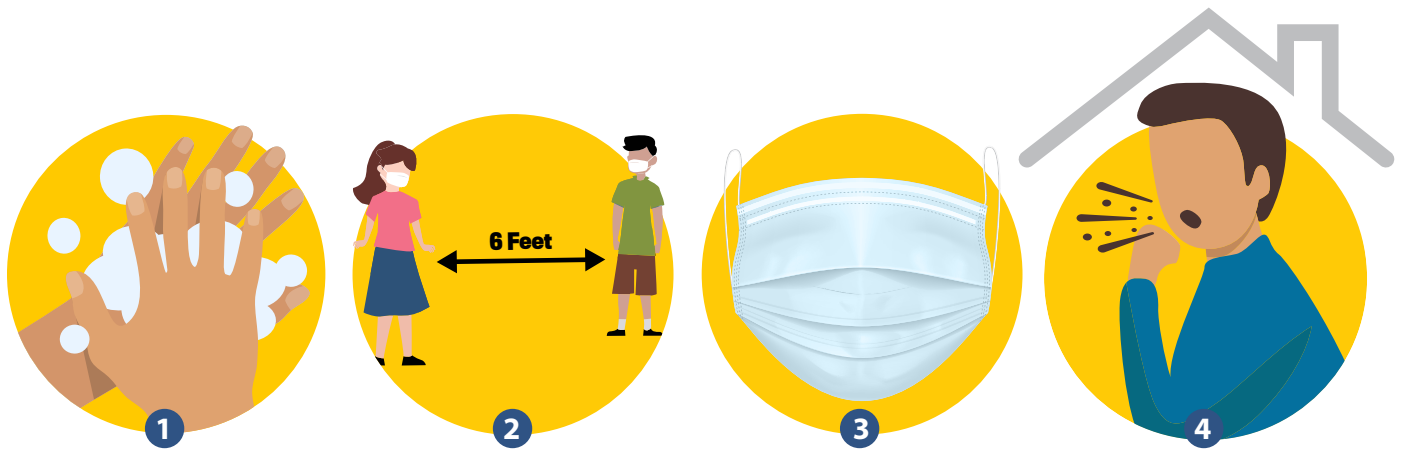
What is a COVID-19 hazard?⁶¹

A COVID-19 hazard is something in the physical environment (workplace hazard) or in the way we do things (work process hazard) that increases our chances of being exposed to COVID-19. The best way to reduce exposure is to eliminate the hazard, if you can. However, many times it may be too costly to fix the problem. Even if you can't eliminate the hazard completely, there are usually things you can do to reduce the risk. You can often reduce the risk of exposure with very simple modifications.

The Utah Department of Health (UDOH) has 4 main health behaviors that reduce your risk of exposure to COVID-19. These 4 simple health behaviors reduce the risk of exposure in EVERY workplace, work process, situation, or scenario you may find yourself in. Keep these behaviors in mind as you respond to risks in your school or workplace.



⁶¹ <https://www.cdc.gov/coronavirus/2019-ncov/community/guidance-business-response.html>



The 4 health behaviors you should practice in your school:

1 Wash your hands for 20 seconds with soap and water

- After you blow your nose, cough, or sneeze.
- After you use the restroom.
- Before you make or eat food.
- After you touch animals or pets.
- Before and after you care for another person who needs help, such as a child.
- Before and after school or work.
- Before and after you take breaks at work.
- After you put on, touch, or take off a face mask.

If you do not have soap and water, you can use an alcohol-based hand sanitizer with at least 60% alcohol. Children younger than 6 years old should be supervised when they use hand sanitizer

2 Physical distance. COVID-19 is mainly spread by close contact. Stay at least 6 feet or 2 meters (about 2 arm lengths) from people who do not live in your home as much as possible. We know this isn't easy in a school setting. If you can't stay 6 feet away from other people, stay as far away as you can. Any distance between you and other people can help.

3 Wear a face mask. Face masks are effective at reducing the spread of COVID-19, especially when both people who may come into close contact are wearing a face mask.

It is important to remember that even when you wear a face mask, you still need to physical distance. Sometimes when people hear this, it makes them wonder if face masks are actually an effective way to reduce the chances of getting COVID-19. Face masks are very effective.⁶² If you wear a mask AND physical distance, the chance of being exposed to COVID-19 is much lower.

4 Stay home if you are sick. Students, teachers, and employees should not go to school or work if they are sick. They should stay home until they are feeling better.

⁶² <https://pws.byu.edu/covid-19-and-masks>

You can begin your hazard assessment as soon as custodial and maintenance staff say the school is prepared for employees to return.

Remember, COVID-19 is spread mainly through close contact. Close contact means a person was within 6 feet or 2 meters (about 2 arm lengths) for a total of 15 minutes or longer of someone who tested positive for COVID-19. It spreads through respiratory droplets from person-to-person.

The good thing about doing a hazard assessment in a school, is that schools function on routine. With few exceptions, when, by whom, and how the spaces in the school are used, is planned out in advance. The work processes teachers and students use also function on routine. Almost everyone who attends or works in a school does the same thing, with the same people, in the same place, at the same time every day. It may seem overwhelming before you get started, but doing a hazard assessment in a school will be easier than doing one for the workplaces and work processes of other employees who do not work in the school.



Creating a hazard assessment for your school:

- Make a schedule for the week. Each day should be broken into 15 minute increments.
 - Administrators should create a schedule that starts at the time the first teacher or employee usually arrives at the school and ends when the last employee usually leaves.
 - Teachers and employees should create a schedule that starts when they arrive at the school or workplace and ends when they leave.
- Make a list of the spaces in the school used by students, teachers, and employees.
 - Administrators should also make a list of shared spaces, or common areas of the school. This may include the front office, cafeteria, pick-up and drop off zones, playgrounds or areas used for recess, hallways, bathrooms, breakrooms, and other shared spaces.
 - Teachers should make a list of the spaces in the school they or their students use during the day. This may include the classroom, the playground, the cafeteria, teacher workrooms, the library, and any other shared spaces teachers or students use.
 - All employees should make a list of the spaces in the school or the workplace they use throughout the day. This may include offices, other worksites, transportation vehicles, other vendor locations the employee visits as part of his or her job duties, and any other spaces the employee uses during the workday.



Assess the risk in each space.

Once you have a list of the spaces students, teachers, and employees use throughout the day, it is important to think about how the setup of the spaces or the way people use them may increase the risk of exposure to COVID-19.

Use your schedule to write down the spaces you use at different times during the day. Administrators should create a separate hazard assessment for each shared space. Use these questions to assess possible threats to the health of students, teachers, and employees **for each space in the school or workplace at each time of the day.**

- ☒ Who uses the space?
- ☒ Do students, teachers, employees, or outside visitors use the space at the same time?
- ☒ Do students from different grades or classrooms use the space at the same time?
- ☒ How many students, teachers, or employees are in the space at one time?
- ☒ What is the space being used for?
- ☒ Are the people using this space able to physical distance?
- ☒ Are the people in this space in close contact for 15 minutes or longer when they are using the space?
- ☒ How long are the people using the space in close contact?
- ☒ Will the people using the space wear masks when they are in close contact with other people?
- ☒ Are people in the space exercising or physically playing, eating, drinking, or doing other activities where respiratory droplets from their eyes, nose, mouth, or body could get on someone else?
- ☒ Is the space cleaned after each use?
- ☒ Are people able to wash their hands with soap and water right before and after they use the space?
- ☒ Where do the people using this space go next?

Sample hazard assessment of student drop off and pick-up.

Who uses the drop off and pick-up areas?

Teachers, students, parents or visitors, and employees.

Do students, teachers, employees, or outside visitors use the space at the same time?

Yes.

Do students from different grades or classrooms use the space at the same time?

Yes.

How many students, teachers, or employees are in the space at one time?

Many. Every student who comes to school, any teachers on morning duty, any visitors to the school.

What is the space being used for?

Student drop off and pick-up.

Are the people using this space able to physical distance?

Yes. There is enough space people could physical distance. However, students, teachers, and employees rarely physical distance in drop off and pick up areas.

Are the people in this space in close contact for 15 minutes or longer when they are using the space?

No. However, students often rush through the entrance doors at the same time.

How long are the people using the space in close contact?

Briefly.

Will the people using the space wear masks when they are in close contact with other people?

No. Students, teachers, and employees will be required to wear masks when they enter the school.

Are people in the space exercising or physically playing, eating, drinking, or doing other activities where respiratory droplets from their eyes, nose, mouth, or body could get on someone else?

Yes. Students often run to the entrance doors from their cars. Students often eat as they are entering the school. Many students are finishing breakfast as they enter the building.

Is the space cleaned after each use?

No. Most of the drop off and pick up area is outdoors.

Are people able to wash their hands with soap and water right before and after they use the space?

We do not know if students wash their hands right before they come to school. Students are able to wash their hands once they get to school. However, students rarely wash their hands right after they enter the school. This includes students who are eating as they enter the building.

Where do the people using this space go next?

When students get to school, they go outside on the playground, to the cafeteria to eat breakfast, to the office, to the library, or to their classroom.

What are the hazards in the sample assessment of drop off and pick up areas?

How can drop off and pick up areas be modified to reduce the chance a student, teacher, or employee will be exposed to COVID-19?

Hazard: Many people who do not live in the same home come to, and enter, the school at the same time.

Everyone in the drop off and pick-up areas and who enters the school is exposed to different people in their personal lives. This many different, possible exposures being in the same place or entering the school at the same time, increases the risk of exposure in the school.

Ideas to reduce the number of people who do not live in the same home entering the school at the same time:

- Have different drop off and pick up times for each grade level.
- In areas of higher community spread, have a designated drop off and pick up time and area for each class. Consider having classroom teachers meet students outside at the designated time and location outside the school and take students directly to the classroom or to the playground, if time and scheduling permits. This way, when students are at school, they are only in close contact with the other students in their class.
 - This recommendation would be challenging for students who need to eat breakfast at school. It would also be challenging for parents who need to drop their children off earlier because of work schedules. If you consider using this approach, you will need to plan to accommodate situations such as these.

Hazard: Drop off and pick up areas have the potential for close contact exposures.

People are social by nature, especially students. Social interaction usually involves close contact between people. Plan for areas of the school where students, teachers, or employees naturally are in close contact and interact with their friends, neighbors, or colleagues. You should try to control movement in these areas and limit close contact as much as possible.





Ideas to reduce the potential for a close contact exposure in drop off and pick up areas:

- Students, teachers, and employees should put on their face covering before they exit their vehicle and enter the school. No one should enter the school without wearing a face covering or mask.
- Place markers at least 6 feet apart for teachers or employees who oversee drop off and pick up areas to stand. It is a good idea to also place another marker 6 feet from where the teacher or employee will stand. It is common for students or parents to take the opportunity to talk to a teacher in drop off and pick-up areas. People are more likely to practice health behaviors when they are easy to do. Having a spot marked off by the teacher will remind students and parents to physical distance and keep teachers and employees safe.
- Create a student drop off and pick-up process that promotes physical distancing. Place markers 6 feet apart at the entrance and exits of the school. Students should not get closer than 6 feet to the person in front of them as they enter or exit the school. Place markers where students should be dropped off and picked up. After they exit their vehicle, students should stand on their marker and wait until the person in front of them has moved to the next spot.
- Place markers 6 feet apart where students who ride the bus will enter and exit the school. Bus drivers should place markers in the bus 6 feet apart for students to stand when they enter or exit the bus. Students should stay seated until the row in front of them has moved to the next marker. Students, teachers, and employees should put on their face covering or mask before they enter the bus and should wear it any time they are on the bus.

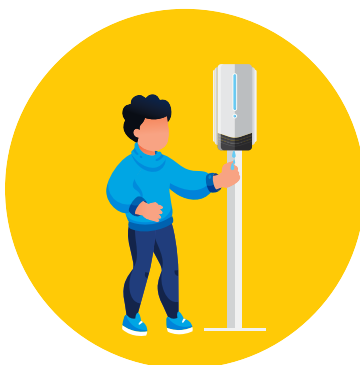


Hazard: Even if you improve hygiene practices after students get inside the school or are in the classroom, there are many opportunities for students, teachers, and employees to spread germs beforehand.

People are more likely to practice health behaviors when they are easy to do. Plan to make good hygiene practices before entering the school easier.

Ideas to promote good hygiene practices in drop off and pick up areas:

- Students should eat or drink only in designated areas. Students should not exit their vehicle while eating.
- Ask parents to have students wash their hands before they leave home or use hand sanitizer before they exit their vehicle.
- Consider having automatic hand sanitizer stations at entrances and exits. You may consider posting a video on your school's website of hygiene practices people should use before they enter the school.
- Consider having teachers or employees who oversee drop off and pick up areas provide students with hand sanitizer before they enter the school, or have a designated employee at entrance and exits to provide students with hand sanitizer.
- Clean high-touch surfaces more often, such as door knobs and handles.



Ideas to prevent close contact exposures, reduce hazards in the school or workplace, and make your learning environment healthier.⁶³

To reduce the chance of exposure at the beginning of the year, you may want to provide information to families to help them understand your policies, procedures, and give them strategies to keep their families and the school safe.

Sometimes health information is hard to understand, especially for people who have lower literacy levels. Many people have an easier time understanding information from videos or other formats. Consider different ways you can provide information to families, including translating materials into other languages depending on the needs of your school community.

Attendance policies for students

The easiest way to protect students, teachers, and employees from COVID-19 is to ask any person who is sick to stay home and not come to school. Students may be afraid to miss school if they are sick, for fear of having their grades or citizenship grades lowered. Students may also be worried about falling behind in their classwork or they may not have the resources or support at home to do their schoolwork. Students may also not realize that even mild symptoms can mean they have COVID-19 and can spread the virus to others. It is important to review your school attendance policies.

- Consider a non-punitive attendance policy which allows students to stay home without the absence hurting their grades when they are sick, under isolation, or asked to quarantine.
- Make sure students know about the attendance policy so they aren't afraid to stay home if they are sick.



⁶³ <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/cloth-face-cover.html>

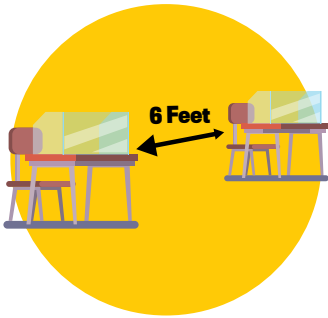
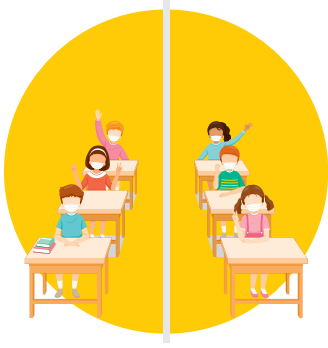


Cafeterias:

- Record seating and attendance to support contact tracing.
- Keep the same students together in cohorts. Assign cohorts to the cafeteria by times or areas.
- Decrease lunch times. Have separate times for lunch recess.
- Place floor markers and lines to show the flow in lunch lines and areas.
- Consider staggering lunch hours to reduce the number of students in the cafeteria at one time.
- Use outdoor eating areas as much as possible.
- Have students wash their hands before they eat. If soap and water are not available, use an alcohol based hand sanitizer that is at least 60% alcohol.
- Increase how often you clean and disinfect high-touch areas.
- Consider having sack or boxed lunches students can eat in classrooms or outside. Have a plan for how lunches will be distributed. Prepare and distribute sack or box lunches for students to eat in classrooms or outside.
- Use paper cups and personal bottles instead of water fountains.
- Avoid any self-serve food or drink options, such as hot and cold food bars, salad or condiment bars, and drink stations.
- Consider having students eat lunch in the classroom. Reserve the cafeteria for students with food allergies. This will help students stay safe and avoid exposure to students they normally would not have been close to.
- If your school uses the cafeteria, space students 6 feet apart. Stagger students so they are not sitting face-to-face on each side of the table.
- Schools should clean and disinfect food line areas, tables, and chairs between uses.
- Schools should encourage students and employees not to share food or utensils and use disposable food service items (utensils, trays) as much as possible. If use of disposable items is not possible, make sure employees wear gloves when they touch any food service items and equipment that can't be thrown away. Wash items you can't throw away with dish soap and hot water or in a dishwasher.
- Employees should wash their hands for 20 seconds with soap and water after they remove their gloves or after they touch used food service items.
- Use touchless payment methods if possible. If touchless payment is not possible, provide hand sanitizer to students and employees to use after they touch money, cards, or keypads.

If you offer food at events:

- Consider having pre-packaged boxes or bags for each person at the event, instead of a buffet or family-style meal.
- Provide tissues and no-touch trash cans.



Classrooms:

- Keep the same students together as much as possible when they are at school, such as a cohort of students.
- It is very hard to prevent close contact in a classroom setting. You won't always be able to prevent close contact, especially between young students. However, if you think about how students use the spaces in your classroom and modify them to reduce close contact as much as you can, you decrease the chance of exposures in the school.
- Assign seats to students and small groups to support contact tracing.
- Develop and provide educator training for how they can implement strategies to identify and mitigate risk in a classroom setting.
- Keep the same students and teachers or staff with each group or class as much as you can.
- Try to keep as much space between desks as you can.
- Identify and use large spaces (auditoriums, gyms, and outdoors) to maximize physical distancing.
- Move nonessential furniture and equipment out of classrooms to increase the space students have to physical distance.
- Seat students facing forward.
- Consider using other ways to separate students, such as plexiglass barriers, if possible.
- Place floor markers or post signs so students know how to move around the classroom without coming into close contact with other people.
- You may need to consider changing the way you group students when they work together. Even in the classroom, it is important to keep students in the same small groups as much as possible. Everyone is exposed to different people in their personal lives. Every time you can reduce the possible exposures a student may have, you should.
- You may need to allow more time for transitions so students can maintain physical distancing.
- Provide explicit instruction and give students ideas about how to physical distance when they play and learn. Students are more likely to practice physical distancing at recess and when they play with other children in their personal lives if you teach them how they can stay safe and have fun at the same time.
- Try to get students to use water fountains as little as possible. Provide disposable cups or other ways for students to stay hydrated.
- Prop open doors so people do not have to touch them.
- Clean high-touch surfaces often, especially after transition periods.



What is a cohort, and how does it work?⁶⁴

One strategy administrators can consider is cohorting (or forming “pods”). Cohorting keeps groups of students, and sometimes teachers or employees, together throughout the school day to minimize exposure for students, teachers, and employees across the school environment.

Students and staff in a cohort only have potential close contact exposures with others in the same cohort. This practice may help prevent the spread of COVID-19.

- Decreases opportunities for exposure to COVID-19.
- Helps make contact tracing more efficient.
- Only a single cohort may need to be quarantined or isolated, instead of many students throughout the school.
- Cohorting can be used in a traditional school model where all students attend school in-person, full-time, or as part of a hybrid school model (students attend in-person school on an alternating schedule).
- Different strategies may be needed for elementary, middle, and high schools. Cohorting is commonly used in many elementary schools, where students have the same teacher and classmates all day and all year.
- How schools implement this in secondary schools looks different across schools. Some schools choose to keep cohorts in one classroom, and have teachers move between classrooms. Other schools may assign students to specific days or weeks for in-person instruction.



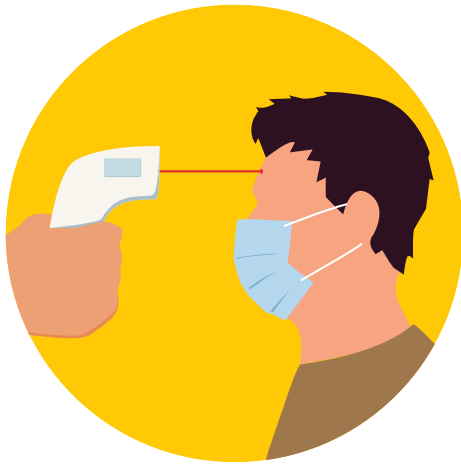
What is an alternating (hybrid) schedule?⁶⁵

Students attend school in-person part of the time and attend virtually part of the time.

From what we know right now, alternating schedules can help reduce contact between students, teachers, and employees. However, while alternating schedules may reduce the spread of COVID-19, there may be additional costs for lesson planning, childcare costs for parents, and other potential costs. More research is needed on the layered impact of alternating schedules with other COVID-19 mitigation strategies (such as physical distancing, cloth face coverings, proper hygiene, and cohorting) as well as the impact of alternating schedules on students’ learning and well-being.

⁶⁴ <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/prepare-safe-return.html#cohorting>

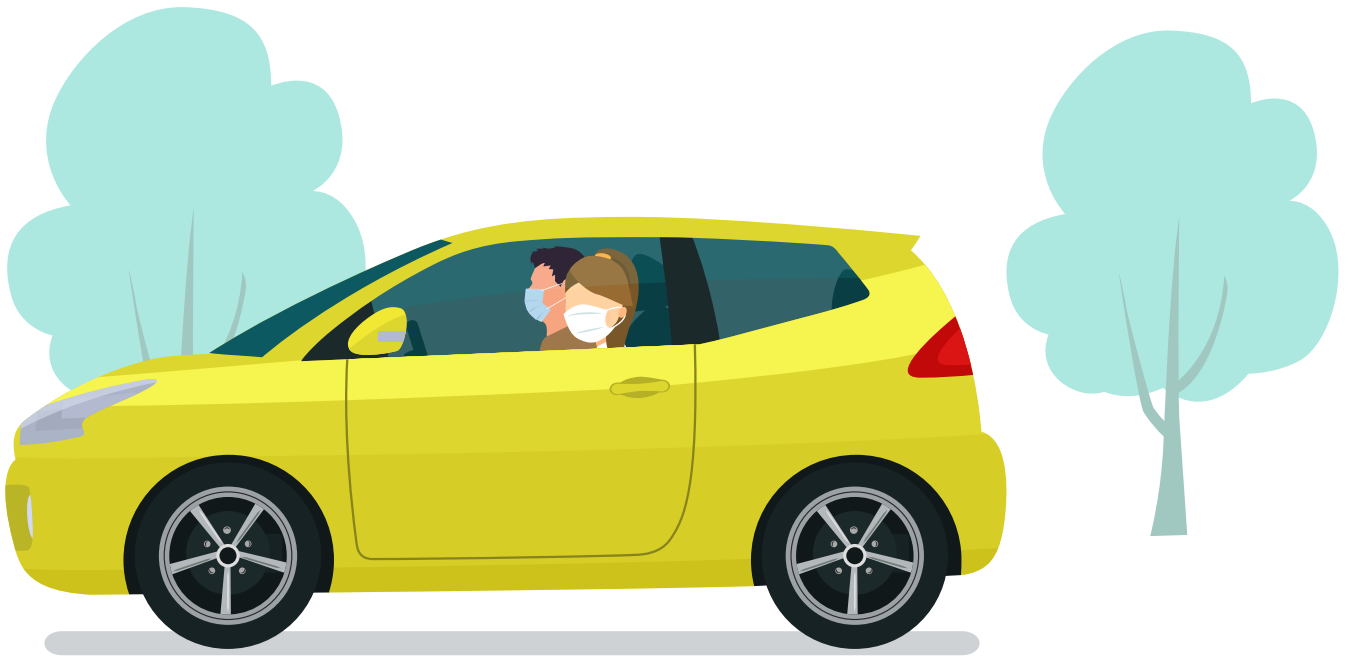
⁶⁵ <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/reopening-schools-faqs.html>



Driver education

Behind-the-wheel instruction has challenges to preventing the spread of COVID-19 because students and instructors are in close proximity to each other while inside a vehicle.

- Check instructors for symptoms of COVID-19 before each shift. This may include temperature checks.
- Students should be screened for symptoms of COVID-19 before they enter the vehicle. This may include temperature checks.
- Anyone with symptoms should be sent home and isolate.
- Students and instructors should wear a face covering while they are in the vehicle. It is not recommended that face covering exemptions be allowed for students or instructors while in a driver's education vehicle.
- Do not touch or share paperwork. Send documents electronically to parents and students.
- Leave enough time in between appointments for an instructor to disinfect all surfaces in the vehicle.
- Limit the number of people in the vehicle.



Drop off and pick up:

- Create drop off and pick up procedures that promote physical distancing and hygiene practices. Let parents know what to do when they drop off and pick up students and how to keep their families healthy and the school safe.
 - Place markers 6 feet apart at the entrance and exits of the school.
 - Students should not get closer than 6 feet to the person in front of them as they enter or exit the school.
 - Place markers where students should be dropped off and picked up. After they exit their vehicle, students should stand on their marker and wait until the person in front of them has moved to the next spot.
- Place markers 6 feet apart where students who ride the bus will enter and exit the school.
 - Bus drivers may want to place markers in the bus 6 feet apart for students to stand when they enter or exit the bus.
 - Students should stay seated until the row in front of them has moved to the next marker.
 - Students, teachers, and employees should put on their face mask before they enter the bus and should wear it any time they are on the bus.
- Place markers at least 6 feet apart for teachers or employees who oversee drop off and pick up areas to stand.
 - It is a good idea to also place another marker 6 feet from where the teacher or employee will stand.
 - It is common for students or parents to take the opportunity to talk to a teacher in drop off and pick-up areas.
 - People are more likely to practice health behaviors when they are easy to do. Having a spot marked off by the teacher will remind students and parents to physical distance and keep teachers and employees safe.
- Consider having different drop off and pick up times for each grade level.
- In areas of higher community spread, have a designated drop off and pick up time and area for each class. Consider having classroom teachers meet students outside at the designated time and location outside the school and take students directly to the classroom or to the playground, if time and scheduling permits. This way, when students are at school, they are only in close contact with the other students in their class.
 - This recommendation would be challenging for students who need to eat breakfast at school.
 - It would also be challenging for parents who need to drop their children off earlier because of work schedules. If you consider using this approach, you will need to plan to accommodate situations such as these.
- Have a designated location on the playground for teachers to meet their class when the bell rings in the morning. This will help prevent students from being in close contact with students from other classes when they go back into the building. If you do not have automatic hand sanitizer stations at entrance and exits, consider having teachers provide students with hand sanitizer before they go back into the school.
- For secondary students, consider having students' 1st period teachers meet them at a designated location outside the school. If you do not have automatic hand sanitizer stations at entrance and exits, consider having teachers provide students with hand sanitizer before they go back into the school.



Face masks:

- Ask students, teachers, and employees to put on their face mask before they exit their vehicle and enter the school. No one should enter the school without wearing a face mask.
- All visitors and non-regular staff should wear a face mask.
- You may want to include face masks on school supply lists and provide face masks as needed to students, teachers, employees, or visitors who do not have them.
- Consider clear face masks for teachers and staff who interact with students who are deaf or hard of hearing, students learning to read, students with disabilities, and those who rely on lip reading as a part of learning, such as students who are English Language Learners.
- Make sure students, teachers, and employees know how to use face masks correctly. face masks should be worn over the nose and mouth, and fit securely around the face. You may consider having teachers include this instruction as they teach classroom procedures.
- Wash your hands before you put on a face mask.
- Encourage students, teachers, and employees to try not to touch their faces when they wear a face mask. If they touch their face, they should wash their hands or use hand sanitizer right away.
- Teachers and employees should wash or sanitize their hands before and after they help students put on or adjust a face mask. Consider having a designated employee for this task.
- Do not wear face masks if they are wet. A wet face mask may make it hard to breathe.
- Students, teachers, and employees should never share face masks.
- Write students' names or initials on face masks to keep them from wearing someone else's.
- Students may need you to label their face masks to show them the top, bottom, front, and back.
- Store student face masks separately.
- Wash face masks every day, or if they look dirty.
- Have extra face masks for students, teachers, and employees in case a back-up is needed during the day.



Does everyone need to wear a face mask?

There is clear scientific evidence that wearing a face covering prevents the spread of COVID-19.⁶⁶

The CDC recommends all people 2 years of age and older wear a cloth face covering in public settings and when around people who don't live in your household, especially when it is hard to physical distance.⁶⁷

While cloth face coverings are strongly encouraged to reduce the spread of COVID-19, it may not be possible in every situation or for some people to wear a face covering. In some situations, a cloth face covering could make a physical or mental condition worse or be a safety concern. Consider adaptations and alternatives whenever possible to help someone wear a face covering or to reduce the risk of COVID-19 spread if it is not possible for someone to wear one.



⁶⁶ <https://pws.byu.edu/covid-19-and-masks>

⁶⁷ <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cloth-face-cover-guidance.html>



Examples of times people may need adaptations and alternatives to cloth face coverings:⁶⁸

People who rely on lipreading to communicate may not be able to wear a cloth face covering (such as someone who is deaf or hard of hearing, or someone who cares for or interacts with a person who is hearing impaired).

- Consider using a clear face covering.
- If a clear face covering isn't available, consider whether you can:
 - Use written communication, or
 - Use closed captioning, or
 - Decrease background noise to make it possible to communicate if you are wearing a cloth face covering that blocks your lips.
- Consider using a plexiglass barrier.
- If you choose to wear a face shield, make sure it wraps around your face and goes below your chin. When you are not communicating, you should put your cloth face covering back on.



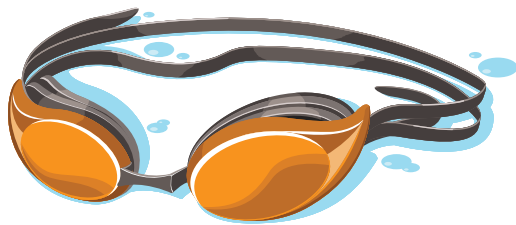
It may be hard for some people with intellectual and developmental disabilities, mental health conditions, or other sensory sensitivities to wear a cloth face covering. They should talk to their doctor or healthcare provider for advice about wearing a cloth face mask.



It may be hard for young children (preschool or early elementary aged children) to wear a face mask correctly, especially for a long time.

- Make sure face masks fit correctly. Face masks should be the right size and fit.
- Teach children how important it is to wear a face mask, and remind them often.
- Double check to make sure young children are wearing their face masks correctly during times when it is hard to stay 6 feet from others.

Students, teachers, and employees should not wear face masks during activities that may cause the face mask to get wet, like swimming. A wet face mask may make it hard to breathe. **For activities like swimming, it is very important to physical distance from others when you are in the water.**



⁶⁸ <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cloth-face-cover-guidance.html#feasibility-adaptations>

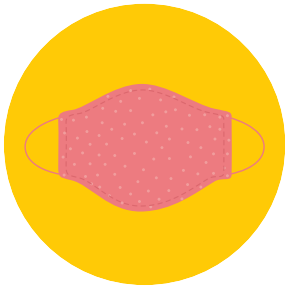


Students may not be able to wear a face mask during high intensity activities, like running, if it makes it hard for them to breathe.

- Consider doing the activity in a location with more ventilation and air exchange (for example, outdoors versus indoors) and where they can physical distance from others.

Some students, teachers, or employees may have classes or work in areas where face masks may increase the risk of heat-related illness or cause safety hazards (for example, straps could get caught in machinery).

- In these situations, students, teachers, and employees should talk to an occupational safety and health professional to find the right face mask for their setting.



Cloth face coverings

Cloth face coverings are an important safety precaution, and are most important when you can't physical distance. If cloth face coverings can't be used, make sure to take other safety precautions to reduce the risk of COVID-19 spread (such as physical distance, wash hands often, clean and disinfect high-touch surfaces). **Remember, even when you wear a cloth face covering, you still need to physical distance.**



Face shields

It is not known if face shields provide any benefit to protect others from the spray of respiratory particles. The CDC does not recommend use of face shields instead of a cloth face covering, or for normal everyday activities. If you choose to wear a face shield, you should also wear a face covering or mask.

- If you wear a face shield without a cloth face covering, make sure it wraps around your face and goes below your chin.
- Only wear a disposable face shield one time.
- Clean and disinfect reusable face shields after each use.
- DO NOT use a plastic face shield for a newborn or infant.



Surgical masks

Cloth face coverings are not surgical masks or respirators. Right now, surgical masks and respirators are critical supplies that should be reserved for healthcare workers and other medical first responders.



What are some strategies I can use to help students wear a face mask in school?

Try to always be positive when you talk about ways to prevent the spread of COVID-19 and wearing face masks. This is a scary time for students. Students are likely to practice health behaviors to help others. Try to frame prevention as something positive we can do to reduce everyone's risk, without letting students be scared.

- Consider asking parents, caregivers, and guardians to practice wearing face masks with students at home before the first day of school. If they show students how to use face masks correctly and help them get used to wearing one before they have to in school, students may be more comfortable using one on the first day.
- Make sure there is someone to help students put on and adjust face masks if students need help. Teachers and employees should wash or sanitize their hands before and after they help students with face masks. Teachers and employees should ALWAYS wear a face mask when they are in close contact with students.
- Post signs in classrooms and in the hall to remind students how to wear a face mask correctly. You may want to use pictures of popular influencers or characters your students are interested in to promote or model how to use a face mask.
- Remind students about face masks during daily announcements, in the school newspaper, and any other medium students are likely to engage with. Make sure communication is written in plain language and available in different languages.
- You may want to include how to correctly use, take off, and wash a face mask in back-to-school materials.



Elementary school

- Play games or do fun activities to teach students how to wear a face mask.
- Use some art materials or other creative ways to help students understand how face masks help reduce the spread of COVID-19.
- Read or share stories so students know what changes to expect at school.



Middle and high school

- Show short videos or use short lessons (less than 2 minutes) to teach students how to wear a face mask. You may want to use videos with celebrities, musicians, athletes or other influencers popular among these age groups.
- Show students how to wear a face mask correctly.
- Have the class come up with a class project about how your class can help reduce the spread of COVID-19 in your community.
- Use science lessons to show students how respiratory droplets spread infectious disease.
- Create a schoolwide competition to see which class can create the best health communication strategy about how important it is to wear a face mask and use prevention strategies to middle and high school students.



Students with special healthcare needs

- Ask parents, caregivers, and guardians to practice wearing face masks at home before students return to school.
- Read or share stories so students know what changes to expect at school.
- You may want to have students with sensory concerns or tactile sensitivities try face masks made of different materials, prints, and textures. Allow students to choose the most comfortable face mask.

Hygiene practices and symptom checking

Right now, the CDC does not recommend screening all students for symptoms at school. There is some evidence that relying on temperature or fever checks alone is an insufficient method of preventing the spread of the disease.⁶⁹ There are many illnesses with symptoms like COVID-19, especially in children. Students with chronic health conditions like asthma or allergies may have a cough without being infectious. Researchers have not found a single symptom or set of symptoms, that are only seen in children diagnosed with COVID-19.⁷⁰ Post signs on the entrances of the school to remind people who have symptoms of COVID-19 to not enter the building.



Fever

(temperature of 100.4°F or 38°C or higher or feeling feverish)



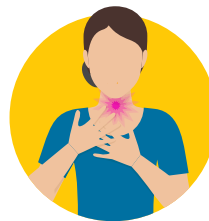
Cough



Shortness of breath



Decrease in sense of smell or taste



Sore throat



Muscle aches and pains

Parents should check their child for symptoms of COVID-19 every day before school. Students, teachers, and employees who are sick should not go to school. This is a good idea for any illness, not just during the COVID-19 pandemic.

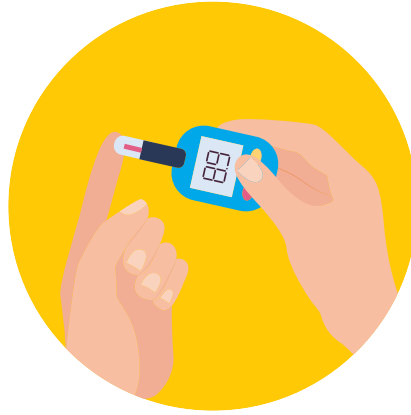
It is important to have school policies that encourage and support students, teachers, and employees to stay home when they are sick. This will help keep schools open for in-person learning.

⁶⁹ Lambert NJ, Survivor Corps, El-Azab S, Yu L, Esperanca A. Fever Scans Offer False Sense of Security for Stopping the Spread of COVID-19. Indiana University School of Medicine [October, 2020].

⁷⁰ <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/symptom-sc>

What to do if a student gets sick at school

Some students may get sick when they are at school. Schools should isolate students who get symptoms of COVID-19 from other students, teachers, and employees. Work with your school nurse to designate the areas you will need to respond appropriately to students who are sick while at school.

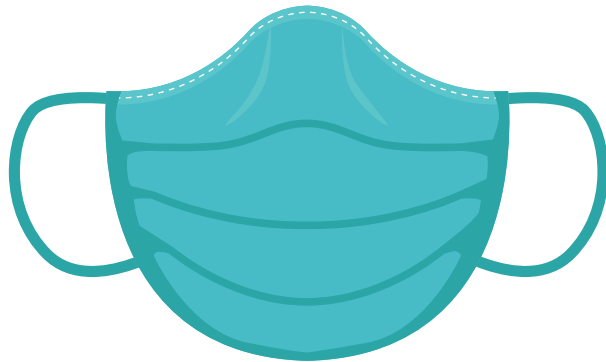


Consider having 3 separate areas for students if possible.

- Sick area (for students who get sick or hurt at school, but do not have symptoms of COVID-19).
- Well student area (for students with scheduled medical needs, such as students who receive insulin or medication at school).
- Isolation area (for students who have symptoms of COVID-19. This should be separate from other students).

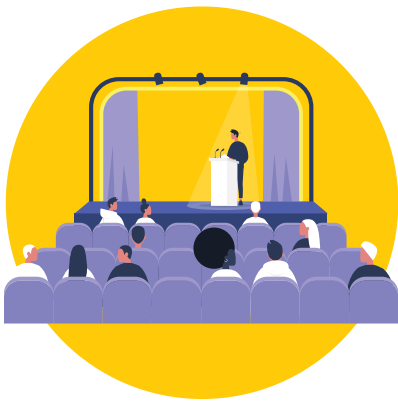
Separate students who have symptoms of COVID-19 from other students, teachers, or employees to an isolation area:

- The student should stay in a separate room (like a sick room in the office) and away from other students.
- Call the student's parents and ask them to come pick up their child from school right away.
- Any rooms the student was in should be cleaned using the cleaning guidelines starting on page 75.
- Schools will decide which PPE (such as a mask or gloves) employees who help or interact with students who get sick at school need (such as paraprofessionals, teacher aides, school health staff). Employees who come into close contact with sick students should wear the PPE recommended by their school.



Other hygiene strategies

- Provide education to students and families about hygiene practices.
- Students, teachers, and employees should wash their hands often for 20 seconds with soap and water. If soap and water are not available, use an alcohol-based hand sanitizer that is at least 60% alcohol.
 - If students' hands look dirty, they need to wash them with soap and water. Washing your hands is best, but if students' hands do not look dirty and they do not have soap and water, they can use hand sanitizer. Children younger than 6 years old should be supervised by an adult when they use hand sanitizer.
- Provide tissues and no-touch trash cans in the classroom.
- Students should eat or drink only in designated areas. Students should not exit their vehicle while eating.
- Ask parents to have students wash their hands before they leave home or use hand sanitizer before they exit their vehicle.
- Consider having automatic hand sanitizer stations at entrances and exits. You may consider posting a video on your school's website of hygiene practices people should use before they enter the school.
- Consider having teachers or employees who oversee drop off and pick up areas provide students with hand sanitizer before they enter the school, or have a designated employee at entrance and exits to provide students with hand sanitizer.
- Clean high-touch surfaces more often, such as door knobs and handles



Large group gatherings (such as assemblies and performances):

- Record attendance and seating location for large gatherings to support contact tracing.
- At special events, consider screening adults who will be direct participants and will have direct contact with students for symptoms of COVID-19. You should also take temperatures if possible.
- Make sure group gatherings are organized with health and safety principles and requirements in place. You should consult with the local health department on how to hold the event safely if needed.
- You may want to consider limiting or canceling nonessential assemblies, recitals, dances, and other school gatherings or reschedule them as virtual gatherings. Gatherings that are held outside, where students and others who attend can practice physical distancing, are also an option to reduce the risk of exposure.
- Broadcast assemblies to classrooms or hold multiple sessions of the assembly, with smaller group sizes.
- Try to avoid in-person meetings as much as possible. Consider having virtual meetings and gatherings.



Recess and playground:

- Have assigned, staggered times for each class for recess, playground, and outdoor spaces. It is best if the same students can stay together all day, including on the playground.
- Teach children how to physical distance when they play. Students are more likely to practice physical distancing at recess and when they play with other children in their personal lives, if teachers provide explicit instruction about how to physical distance when they play and provide them with ideas of how they can stay safe and have fun at the same time.
- Students are not required to use face masks at recess.⁷¹ It is less likely students will be exposed outside, especially if they are practicing physical distancing when they play or participate in activities. However, there is still a risk of students being exposed if they have a close contact exposure when they are outside. This is why it is important for students to stay with the same students as much as possible.
- Have a designated location on the playground for teachers to meet their class when the bell rings after lunch and recess. This will help prevent students from being in close contact with students from other classes when they go back into the building. If you do not have automatic hand sanitizer stations at entrance and exits, consider having teachers provide students with hand sanitizer before they go back into the school.
- Make sure recess and playgrounds are managed with health and safety principles and requirements in place. Work with the local health department if needed.

⁷¹ <https://coronavirus.utah.gov/special-orders/>



Restrooms:

- Try to have the same groups of students use the same bathroom as much as possible. If students are grouped by the same hallway, floor, or grade level, designate a restroom for each cohort.
 - Tell younger students what to do in the case of a bathroom emergency. Younger students may think they can only use their designated restroom, even in an emergency.
- You may want to consider asking secondary students to use the restroom during class periods and reduce the number of students going to the restroom at one time.
- It may be effective in elementary classrooms to build in additional, scheduled times for restroom visits to reduce the number of students going to the restroom at once.
- Use strategies to minimize the number of individuals in a restroom, such as:
 - Increase barriers between stalls/urinals.
 - Block off every-other stall.
- Place floor markers to remind students to physical distance when waiting to use restrooms.
- Post signs to remind people to practice proper hand hygiene.
- Create a schedule for cleaning high-touch areas often (faucets, paper towel dispensers, door handles, etc.).
- Make sure employees who provide support in restrooms, including custodians, have the necessary PPE (gloves, masks).
- Provide training for proper cleaning protocols for COVID-19.
- Set a schedule to monitor to make sure soap is always available.

School courses that may increase the risk of exposure:

- School administrators should identify courses that would put students and teachers at an increased risk of exposure. Work with the local health department to make a plan to reduce the risk for these classes.
- Choir is an inherently high-risk of exposure because people are more likely to be exposed to someone else's respiratory droplets. Consider using several strategies, such as:
 - Hold choir courses or practice in outdoor spaces.
 - Students should be spaced 6 feet apart.
 - Limit the amount of time students are face-to-face.
 - Use barriers in between students.
 - Increase the airflow and ventilation.
- You may want to consider limiting or canceling nonessential assemblies, recitals, dances, and other school gatherings or reschedule them as virtual gatherings. Gatherings that are held outside, where students and others who attend can practice physical distancing, are also an option to reduce the risk of exposure.
- Build in time to clean and sanitize between classes or when students use the area.



Special education, related services, or school counseling (school psychologist, speech language pathologist, etc.):

- Make accommodations for circumstances where a student or parent will be in close contact with someone else like a school counselor or speech language specialist.
- Provide plexiglass, face shields, or auxiliary aids for one-on-one close contact to provide students with disabilities equal access to information.
- Allow accommodations for students who are exempt from wearing a face mask as described in the State Public Health Order available at <https://coronavirus-download.utah.gov/Governor/UPHO-2020-10-State-Public-Health-Order-Masks-in-Schools.pdf>.



Transitions:

- Keep the same students together as much as possible when they are at school.
- Post signs or use floor markers to show people which door they should use to enter or exit. This will reduce the chance people will have face-to-face contact if they are trying to use a door, but are going opposite directions.
- Post signs to remind people to physical distance.
- Let people enter and exit through all doors. This will help reduce the number of students who gather in groups while they wait to get into the building.
- Develop a plan for how you will maintain physical distancing during safety drills (fire, lockdown, earthquake).

Transportation:

- Assign seats on the bus to support contact tracing.
- Place markers in the bus 6 feet apart for students to stand when they enter or exit the bus.
- Students should stay seated until the row in front of them has moved to the next marker.
- Students, teachers, and employees should put on their face mask before they enter the bus and should wear it any time they are on the bus.
- Consider seating children one student per row, facing forward and skip rows between students, if possible. Students who live in the same home can sit together if they need to.
- Clean and disinfect seats and other high-touch surfaces often.
- Try to physical distance as much as you can on the bus. If students can't stay 6 feet apart on the bus, try to keep them as far apart as possible.
- Make a plan to keep drivers safe, such as installing plexiglass around the driver.
- Consider staggered pick up and drop off times for students who ride the bus.
- Have clean, spare face masks for students who forget theirs.
- Open bus windows to increase circulation of outdoor air. Make sure windows do not open far enough to be a safety hazard.



Visitors, volunteers, and non-regular employees:

- Limit nonessential visitors and volunteers to schools, campuses, and programs. Your school should determine essential versus nonessential.
- Check visitors and non-regular staff for symptoms of COVID-19. If someone is sick, he or she should not enter the school.
- All visitors and non-regular staff should wear a face covering or mask when inside the building.
- Consider protocols for visitors, including sign-in and sign-out, locations being visited, screening, calling front office before entering, etc.



Considerations for schools as employers

Sick leave

The easiest way to protect your school is to ask sick employees to stay home. Many employees are scared to take time off if they are sick for fear of losing their job or income while they get better. Employees may also be scared to tell their employer if someone in their home has tested positive for COVID-19 or if they have come in close contact with someone who has tested positive.

Most people who test positive for COVID-19 will have symptoms of the disease. However, COVID-19 may also be spread by people who have very mild symptoms or no symptoms at all. This means a person can have the virus and not even know it. **This is why it is very important during the pandemic for employers to have sick leave policies that make employees feel safe to take time off if they are sick or should be quarantined.**

You should not ask employees who are sick for a COVID-19 test result, a doctor's note, or a note from the health department to prove they are ill, qualify for sick leave, or to come back to work. This places a burden on the healthcare and public health systems. You do not need a doctor's note from the employee to get the tax credits.

The [Families First Coronavirus Response Act \(FFCRA\)](#) requires certain employers to give employees emergency paid sick leave or expanded family and medical leave for reasons related to COVID-19. Private employers with fewer than 500 employees get tax credits for the cost to give employees paid leave for reasons related to COVID-19. Keep in mind this emergency leave is in addition to any paid sick leave your company already offers. You can't reduce the benefits in the policy you have because of the law.

You may want to create a form or template for employees to fill out if they need to isolate or quarantine for COVID-19. This form should include all of the information you will need to get the FFCRA tax credits for your business.



Symptoms of COVID-19



Fever

(temperature of 100.4°F or 38°C or higher or feeling feverish)



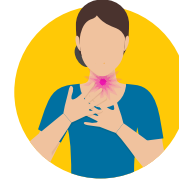
Cough



Shortness of breath



Decrease in sense of smell or taste



Sore throat



Muscle aches and pains

Generally, the [FFCRA](#) says employees of covered employers are eligible for:

Reason for paid sick leave	Covered hours of paid sick leave	Covered rate of pay	Documentation needed for FFCRA tax credit
The employee is unable to work because the employee is quarantined or isolated due to COVID-19.	Up to 80 hours	Employee's regular rate of pay	<p>A statement from the employee that says he or she has symptoms of COVID-19 and will get medical treatment.</p> <p>The statement should include:</p> <ul style="list-style-type: none"> • Employee's full name • Date of birth • Social security or work residency number • Rate of pay
<p>The employee is unable to work because he or she has to care for someone who is quarantined for COVID-19.</p> <p>Or</p> <p>The employee has to care for a child (under 18 years of age) whose school or childcare provider is closed or unavailable for reasons related to COVID-19.</p>	Up to 80 hours of paid sick leave	Two-thirds (2/3) the employee's regular rate of pay	<p>A statement from the employee that says he or she is unable to work because he or she must provide care for someone who is quarantined.</p> <p>The statement must include:</p> <ul style="list-style-type: none"> • Employee's full name • Employee's date of birth • Employee's social security number or work residency number • Full name of the person the employee is taking care of • The date of birth of the person the employee is taking care of • The employee's relationship to the person he or she is taking care of • Name of the government entity or healthcare provider that required the quarantine.
An employee, who has been employed for at least 30 calendar days, is unable to work because he or she has to care for a child whose school or childcare provider is closed or unavailable for reasons related to COVID-19.	Up to an additional 10 weeks of paid expanded family and medical leave	Two-thirds (2/3) the employee's regular rate of pay	<p>A statement from the employee that says he or she is unable to work because he or she must provide care for children whose school or childcare center is closed due to COVID-19 related reasons.</p> <p>The statement must say that no other person will be providing care for the period the employee is receiving EFMLEA.</p> <p>If the child is over the age of 14, the employee must also state there are special circumstances requiring the employee to provide care.</p> <p>The statement must include:</p> <ul style="list-style-type: none"> • Employee's full name • Employee's date of birth • Employee's social security number or work residency number • Full name of the children the employee is taking care of • The dates of birth of the children the employee is taking care of • The employee's relationship to the children he or she is taking care of • The name of the school, care center, or childcare provider that is unavailable for COVID-19 reasons.

If you offer sick leave

During the pandemic, make sure you have sick leave policies in place to protect all of your employees. If someone comes to work sick, he or she could spread illness to other employees. Make employees stay home when they are sick to prevent the spread of COVID-19 to others.

- Review your sick leave and human resource policies. It is a good idea to add in a section about sick leave for reasons related to COVID-19.
 - It is important to make sure employees understand sick leave policies so they don't come to work sick.
 - Your policies should give employees the leave they need to quarantine or isolate.
 - Sick leave policies should let employees stay home to care for a sick family member or take care of children if school or childcare is closed.
 - During the pandemic, you may want to give advances on future sick leave and allow employees to donate sick leave to each other.
-

If you do not offer sick leave to some or all of your employees

If you do not offer sick leave to some or all of your employees, you may want to make a non-punitive “emergency sick leave” policy. This means your policy should not punish employees for taking leave for reasons related to COVID-19.

If you use other companies for contract or temporary employees, talk to them about how important it is for sick employees to stay home. You may want to ask them to use non-punitive leave policies.

A good example of a non-punitive emergency sick leave policy

An employer does not offer sick leave, but employees earn a certain amount of paid time off each pay period. The amount of paid time off is based on the hours they work each pay period. An employee tests positive for COVID-19 and must isolate at home. The employer lets the employee keep earning paid time off while the employee is on isolation, even though the employee is not working. **A policy like this makes it more likely employees will stay home when they are sick, and not spread the virus to other employees.**



Plan for teachers and employees to be sick.

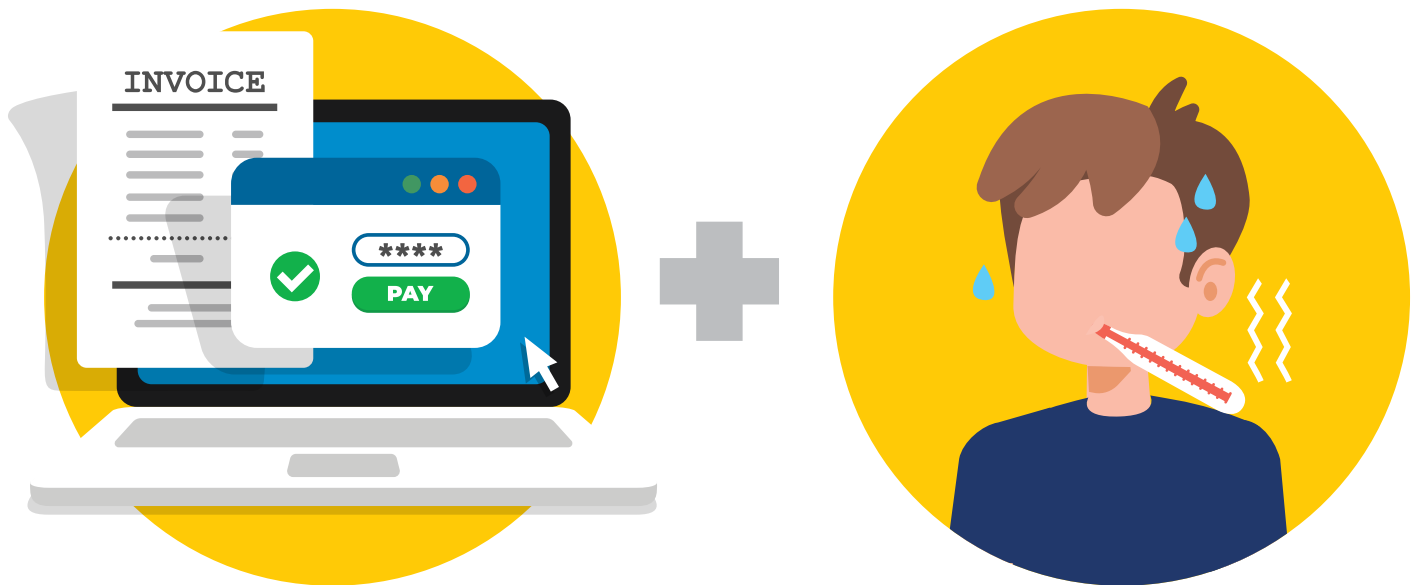
If many teachers and employees get sick at one time, this can make it hard to keep your school open.

- Have a process or system for teachers and employees to report if they are sick. You can use this same process to let teachers and employees know about exposures to COVID-19 or transition to remote or hybrid learning.
- Cross-train employees to do essential functions. You need your workplace to operate even if key employees are absent.
- Plan to track and respond to absenteeism in the workplace. If many teachers and employees get sick, you may need to change your plan to make sure your school stays open.
- Plan for how you will operate if many teachers and employees are sick at one time or have sick family members to care for at home.



If an employee tests positive for COVID-19, do I have to keep the employee on the payroll?

The [Families First Coronavirus Response Act](#) requires certain employers to give employees paid sick leave or expanded family and medical leave for reasons related to COVID-19. Private employers with fewer than 500 employees get tax credits for the cost to give employees paid leave for reasons related to COVID-19.










Travel

Travel increases the chance you may get infected or spread COVID-19. Staying home is the best way to protect yourself and others from COVID-19. Try to limit non-essential travel during the COVID-19 pandemic as much as you can. For up-to-date travel recommendations, visit the CDC website at <https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html>.

Right now, there are no COVID-19 travel restrictions in Utah. This means students, teachers, or employees who travel outside the state of Utah do not need to quarantine when they get back. However, there may be mandatory quarantines in other cities or states across the U.S. Before traveling, visit the state website of the area you are traveling to for more information.

The CDC recommends you avoid all nonessential travel to certain areas of the world where COVID-19 is widespread. There may also be restrictions entering the U.S. if you travel to these areas. These travel health alerts can be found at <https://www.cdc.gov/coronavirus/2019-ncov/travelers/map-and-travel-notice.html>.

Consider these questions before you travel:

-  **Is COVID-19 spreading where you are going?** You can get infected when you travel.
-  **Is COVID-19 spreading in your community?** Even if you don't have symptoms, you can spread COVID-19 to others while traveling.
-  **Will you, or people you travel with, be within 6 feet or 2 meters of other people during or after your trip?** COVID-19 is mainly spread by close contact with someone who is sick. If you are within 6 feet or 2 meters (about 2 arm lengths) of other people you are more likely to get the virus.
-  **Are you or people you are traveling with at high-risk of getting very sick from COVID-19?** Older adults and people of any age who have a serious underlying medical condition are at higher risk for severe illness from COVID-19.
-  **Do you live with someone who is at high-risk of getting very sick from COVID-19?** If you get infected while you travel you can spread COVID-19 to loved ones when you return, even if you don't have symptoms.
-  **Does the state or local government where you live or at your destination require you to stay home for 14 days after traveling?** Some state and local governments may require people who have recently traveled to stay home for 14 days.
-  **If you get sick with COVID-19, will you have to miss work or school?** People with COVID-19 disease need to isolate at home until the health department says they will no longer spread the virus to other people.

Help your students, teachers, and employees.

This is a stressful time for everyone. Students, teachers, and employees may not always feel comfortable telling someone they need help. Talk to your students, teachers, and employees about stress related to COVID-19 and ways to cope with that stress.

Employee concerns

You may want to have a hotline or another way employees can voice any concerns anonymously.

Worksite wellness resources for teachers, employees, students, and families

The Utah Department of Health and your local health department have many other resources for your school to help you keep students, their families, teachers, and employees healthy. If you are interested in other ways we can help, such as bringing health screenings right to your worksite at no cost to you, contact the Utah Department of Health or your local health department.

Resources

Help connect employees to employee assistance program (EAP) resources and community resources if they need help.

Employees can call 2-1-1 or visit <https://211utah.org/> for a list of resources.

Your students, teachers, and employees may need extra help from a professional. You can help them by making sure they know where to find resources.

To help students, teachers, and employees understand the signs of stress, ways to feel better, and find mental health resources, visit <https://coronavirus.utah.gov/Mental-health/>.

- Emotional health relief hotline: 1-833-442-2211. Caregivers are available 7 days a week.
- The National Suicide Prevention Lifeline provides 24/7, free and confidential support for people in distress.
- The Disaster Distress Helpline provides crisis counseling to people affected by the COVID-19 pandemic.
- The SafeUT app is a free youth crisis text and tip line.



Helpful resources

Schools and the education sector are not just places of learning for students, but also places of employment. Your school's plan should address the health and safety of students, teachers, and employees. Make sure your school's COVID-19 reopening plan follows public health guidance, as well as state and federal labor laws. These resources may be helpful to you as you write your school reopening plan.

Utah State Board of Education School Reopening Planning Handbook

<https://www.schools.utah.gov/file/5997f53e-85ca-4186-83fe-932385ea760a>

Utah State Board of Education Planning Requirements and Recommendations for K-12 School Reopening Addendum to Utah Leads Together Color-coded Guidelines

<https://www.schools.utah.gov/file/a5eba09a-42b8-45c0-b8fa-9adeea879fcd>

Utah State Board of Education Resource Hub for Educators

www.schools.utah.gov/coronavirus

Utah COVID-19 Transmission Index

The COVID-19 Transmission Index is a balanced approach intended to protect individuals, communities, and businesses. There are three levels in the transmission index: high, moderate, and low. Each level has certain requirements for individuals and businesses to follow in order to reduce transmission of COVID-19. You can see what level your county is at <https://coronavirus.utah.gov/utah-health-guidance-levels/>.

Utah High School Activities Association

<https://uhsaa.org/> (Protocols for [winter](#) and [spring](#) sports and activities)

Utah Guidelines for School Re-entry COVID-19 Response Plan from the Utah School Nurses Association

<https://www.utahschoolnurses.org/resources>

CDC school guidance

<https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/index.html>

Student privacy

The U.S. Department of Education website answers questions about how to protect student privacy and federal privacy laws such as FERPA apply to COVID-19.

<https://studentprivacy.ed.gov/>

Leavitt Partners "Understanding the Coronavirus & Situational Characteristics: A Framework for Individuals and Businesses for Mitigating Risk"

This framework has guidelines to help reduce the spread of COVID-19.

<https://leavittpartners.com/whitepaper/understanding-the-coronavirus-situational-characteristics-a-framework-for-individuals-and-businesses-for-mitigating-risk/>

Anti-discrimination laws and COVID-19

The U.S. Equal Employment Opportunity Commission website answers questions about how COVID-19 impacts anti-discrimination laws. <https://www.eeoc.gov/coronavirus>

Wage and hour issues, FLSA, FMLA, OSHA, unemployment

The U.S. Department of Labor website answers questions about how COVID-19 impacts:

- Wage and hour issues
- Fair Labor Standards Act (FLSA)
- Family Medical Leave Act (FMLA)
- Occupational Safety and Health Administration requirements (OSHA)
- Unemployment compensation
- Families First Coronavirus Response Act (FFCRA) <https://www.dol.gov/coronavirus>
 - Answers to common questions about the FFCRA. This resource is for both employers and employees. <https://www.dol.gov/agencies/whd/pandemic/ffcra-questions>
 - This is a tool to help employees find out if they may qualify for paid sick leave if they need to be on isolation or quarantine for COVID-19. <https://www.dol.gov/agencies/whd/ffcra/benefits-eligibility-webtool>