
**San Mateo County Coalition
for Safe Schools and Communities**

Pandemic Recovery Framework

April 12, 2022

*The Framework Will Continue to Be Updated as
New Information Becomes Available*



**Coalition for
Safe Schools &
Communities**



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About the Pandemic Recovery Framework

The **Pandemic Recovery Framework** was developed in consultation with San Mateo County Health and reflects California Department of Public Health (CDPH) guidance.

As conditions and public health orders change, the content and guidance in this framework will continue to be updated as well. For technical assistance and support, please contact the San Mateo County Office of Education COVID-19 Response Team at info@smcoe.org or 650-802-5515.

The California Department of Public Health's (CDPH) **current guidance** for schools aligns closely with the Centers for Disease Control and Prevention (CDC) **guidance**. This framework, which applies to both public and private schools, incorporates San Mateo County Health, CDPH, CDC, and **Cal/OSHA** guidance as well as local communication protocols.

Schools and districts must prepare a safety plan for 2021-22 school year and can utilize this framework in developing their plan. These plans should incorporate the layers of safety recommended by CDPH and other health agencies as addressed in this framework. In addition, schools and districts must include alternative measures (or a Plan B) for use if conditions or public health guidance change. Given the continuing evolution of the COVID-19 virus, it is paramount that schools and districts remain aware of community conditions and stay nimble so they can pivot as conditions change.

Schools and districts must post their plan on their website and share a link to the plan with the San Mateo County Office of Education for posting on its website. Assistance is available from the San Mateo County Office of Education and San Mateo County Health in developing safety plans.

Updates Since December 6, 2021

Updated to reflect **CDPH** and **Cal/OSHA** isolation and quarantine guidance (1/6/22), **CDPH school guidance, group-tracing** (1/12/22), **CDPH COVID-19 and Improving Indoor Air Quality in Schools** (2/10/22), **CDPH guidance for the use of face masks** (2/28/22), **CDPH local considerations for maintaining or establishing universal indoor masking requirements in K-12 schools, 2021-22 School Year** (3/7/22), **CDPH COVID-19 Public Health Guidance for K-12 Schools in California** (3/9/22), **CDPH Group Tracing Approach to Students Exposed to COVID-19 in a K-12 setting** (3/9/22), updates to reflect **Cal/OSHA guidance** regarding testing and quarantine of employees who have recovered from COVID-19 in the last 90 days, new **K-12 CDPH Guidance** (4/6/22), **CDPH Events Playbook** (4/1/22), and **Guidance for Local Health Jurisdictions on Isolation and Quarantine of the General Public**.

Vaccination

Vaccination is an important strategy to protect students, staff, and community members.

- See [CDC recommendations](#) about how to promote vaccine access and uptake for schools.
- Additional California-specific vaccine access information is available on the [Safe Schools Hub](#) and [Vaccinate All 58 – Let’s Get to Immunity](#).
- [San Mateo County Health](#) provides vaccination information on its website.

Vaccination Verification

Verification of vaccination status can inform important school practices around testing, contact tracing, quarantine, and isolation. The following verification requirements are from a [State Public Health order](#).

All schools and districts must verify the vaccination status of all workers. “Workers” refers to all paid and unpaid adults serving in the school settings. They include, but are not limited to, certificated and classified staff, analogous staff working in private school settings, and volunteers who are on-site at a school campus supporting school functions.

According to [CDPH](#), only the following modes may be used as proof of vaccination:

- COVID-19 Vaccination Record Card (issued by the Department of Health and Human Services Centers for Disease Control & Prevention or WHO Yellow Card), which includes name of person vaccinated, type of vaccine provided, and date last dose administered; *or*
- a photo of a Vaccination Record Card as a separate document; *or*
- a photo of the client’s Vaccination Record Card stored on a phone or electronic device; *or*
- documentation of COVID-19 vaccination from a health care provider; *or*
- **digital record** that includes a QR code that when scanned by a SMART Health Card reader displays to the reader client name, date of birth, vaccine dates, and vaccine type; *or*
- documentation of vaccination from other contracted employers who follow these vaccination records guidelines and standards.

Schools must have a plan in place for tracking verified worker vaccination status. Records of vaccination verification must be made available, upon request, to the local health jurisdiction for purposes of case investigation.

Workers who are not fully vaccinated, or for whom vaccination status is unknown or documentation is not provided, must be considered unvaccinated.

Schools should use the same standard protocols that are used to collect and secure other immunization or health status information from students.

The protocol to collect, secure, use, and further disclose this information should comply with relevant statutory and regulatory requirements, including Family Educational Rights and Privacy Act (FERPA) statutory and regulatory requirements.

Schools should recognize that a worker who cannot get vaccinated due to a disability (covered by the Americans with Disabilities Act), has a disability that affects their ability to have a full immune response to vaccination, or has a sincerely held religious belief or practice (covered by Title VII of the Civil Rights Act of 1964), may be entitled to a reasonable accommodation that does not pose an undue hardship on the operation of the employer's business. Schools must be in full compliance with the CDPH order regarding vaccination verification of staff by October 15, 2021.

Masks

Masks remain one of the most effective and simplest safety mitigation layers to prevent transmission of COVID-19 infections. To best protect students and staff against COVID-19, CDPH currently strongly recommends continuing to mask indoors in school settings. CDPH will continue to assess conditions on an ongoing basis to determine when and how to update masking guidance.

Recommendations for Masks

CDPH provides the following recommendations on the types of masks to wear and how to wear them:

- An effective mask has both **good fit** and **good filtration**.
- Double masking is an effective way to improve fit and filtration. A close-fitting cloth mask can be worn on top of a surgical/disposable mask to improve the seal of the mask to the face.
- Layering more than two masks is not recommended as this could be difficult to breathe through.

- It is not recommended to wear two medical masks, or to wear a medical mask on top of a KN95, KF94, or N95.

More information about masks can be [found here](#), including masks for students.

Most Effective	More Effective	Effective	Least Effective
<ul style="list-style-type: none"> • N95 (also best for wildfire smoke) 	<ul style="list-style-type: none"> • KF94 • KN95 • Double Mask • Fitted Surgical Mask 	<ul style="list-style-type: none"> • Surgical Mask 	<ul style="list-style-type: none"> • Fabric mask with three or more cloth layers

Masks Indoors

- CDPH strongly recommends that all persons (e.g., students and staff) wear masks in K-12 indoor settings, with consideration of exemptions per CDPH masks guidance.
- CDPH will continue to assess conditions on an ongoing basis to determine when and how to update masking guidance.
- Local health jurisdictions and entities may continue to implement additional requirements that go beyond the statewide [guidance](#).
- When making the determination of whether a local universal indoor masking requirement should be maintained or established in K-12 school settings, CDPH provides the following [guidance](#).
- No person can be prevented from wearing a mask as a condition of participation in an activity or entry into a school, unless wearing a mask would pose a safety hazard (e.g., watersports).
- CDPH strongly recommends that all persons (e.g., students and staff) wear masks in K-12 indoor settings, with consideration of exemptions per [CDPH face mask guidance](#).
- Persons exempted from wearing a face covering due to a medical condition are strongly recommended to wear a non-restrictive alternative, such as a face shield with a drape on the bottom edge, as long as their condition permits it.
- Schools must develop and implement local protocols to provide a mask to students who inadvertently fail to bring a face covering to school and desire to use one.

- Public schools should be aware of the requirements in AB 130 (Chapter 44 of the Statutes of 2021) to offer independent study programs for the 2021–22 school year.
- In situations where use of masks is challenging due to pedagogical or developmental reasons (e.g., communicating or assisting young children or those with special needs), a face shield with a drape (per [CDPH guidelines](#)) may be considered instead of a mask while in the classroom.
- See current [CDPH K–12 guidance](#) for information on use of masks during extracurricular activities.

Masks Outdoors

- Masks are optional outdoors for all in TK–12 school settings.

Masks on Buses

- All passengers and drivers, regardless of vaccination status, are strongly recommended to wear a mask on school buses and other forms of student transportation except when exempt from [CDPH face mask guidance](#).
- Masks should be provided to those students on school buses who need them.
- [According to the CDC](#), at their discretion, school systems and early childhood education programs may choose to require that people wear masks on buses or vans.

Physical Distancing

- The CDPH recommends focusing on other mitigation strategies instead of implementing minimum physical distancing requirements for routine classroom instruction. See [CDPH’s March 9 update](#) for mask guidance during extracurricular activities.
- Schools that are able may want to include physical distancing as a layer of protection; however, it should not impact the school’s ability to have all students and teachers on campus for full in-person learning and instruction.
- While eating (especially indoors), maximize physical distance as much as possible. Using additional spaces outside of the cafeteria for mealtime

seating such as the gymnasium can help facilitate distancing. Arrange for eating outdoors as much as feasible.

- Cal/OSHA has eliminated physical distancing requirements except where an employer determines there is a hazard and for certain employees during **major outbreaks**. Employers must implement physical distancing and barriers during a major outbreak (20 or more cases in an exposed group of employees).

Gatherings

All event operators and attendees should use **the information about the conditions in their local community** (from their local health departments) or the CDC's **community level indicator** as guides for event planning.

For any event, operators should remember:

- That outdoors is lower risk.
- Events where attendees are vaccinated or tested negative for COVID-19 prior to entry are always safest.
- Train all vendors and staff working the event on protective measures and protocols.
- Encourage all persons (staff and attendees) to monitor their own health and stay home if sick or have symptoms.

School dances, large assemblies, and other school-based crowded events have the potential to cause substantial spread of COVID-19 within and beyond the school community. Therefore, schools are encouraged to:

- Host such events outdoors whenever possible.
- Separate the event into smaller cohorts (by grade, for example) whenever possible.
- Promote vaccines for all eligible attendees.
- Consider pre-entry testing for all unvaccinated attendees at or just prior to the event.
- Plan in advance how to identify close contacts if it is later discovered that someone with COVID-19 attended the event. Encourage pre-registration with **CA Notify** and maintaining a log of all attendees (even those arriving pre-event) at the door/entrance to the event.

- Consider requiring the use of masks at outdoor, school-based, large, crowded events.
- If food or drinks are to be served, serve them outdoors whenever possible and/or place them away from other areas to clearly designate spaces where masks must be worn.

After an Event or Gathering

- To further protect yourself and loved ones, be sure to self-monitor for symptoms for 10 days after participating in celebrations, activities, or travel.
- Pay special attention from days 3-7 following activities, as this is when people are most likely to develop symptoms.
- If you learn you have been in close contact with someone who tests positive, get tested and, if not fully vaccinated, stay home to quarantine.
- If you are not feeling well or test positive, stay home regardless of vaccination status.

Ventilation

Quality HVAC system design, operation, and maintenance are critical for providing clean and healthy Indoor Air Quality (IAQ) in schools. In addition to improving occupant health and performance, regular HVAC maintenance saves energy.

- Consider the use of an assessment tool to monitor ventilation systems.
- Explore the use of state and federal funding for ventilation upgrades.

See [CDPH](#) and [EPA guidance](#) for tips on improving indoor air quality at schools.

See [Ventilation FAQs: Smoke Days and COVID-19](#) for information about how to address poor air quality while still observing COVID-19 safety standards.

The UC Berkeley Center for Cities and Schools has compiled a [useful list of resources](#) concerning ventilation and school reopening.

When Outdoor Air Quality is Good

Bringing fresh outdoor air into a building helps keep virus particles from concentrating inside. This can be done by opening multiple doors and windows, using child-safe fans to increase the effectiveness of open windows, and making changes to the HVAC or air filtration systems.

For indoor spaces, ventilation should be optimized. Recommendations include:

- Wearing a well-fitting multi-layer mask reduces airborne transmission risk by more than half, independent of the rate of ventilation or air filtration in the classroom.
- Ventilation system should provide at least the code-required minimum ventilation rate.
- Ventilation system filters should be MERV-rated at MERV 13 or better. They should also be properly installed (i.e., no gaps that would allow air to bypass the filter) and properly maintained (i.e., replaced as often as recommended).
- In-room (portable) air cleaners used to reduce the risk of long-range airborne transmission should provide high-efficiency filtration and a sufficient “clean air delivery rate” (CADR) (i.e., at least 2/3 of the floor area). Multiple devices per classroom may be necessary for sufficient total air cleaning.
- Open or crack windows in buses and other forms of transportation, if doing so does not pose a safety risk.
- Use exhaust fans in restrooms and kitchens.

When Outdoor Air Quality is Poor

- If outside air quality is poor, doors and windows should be shut.
- Schools holding classes outside should be relocated inside.
- If the HVAC filter was upgraded (HEPA or MERV-13 or higher is recommended), set the central system’s circulating fan to operate continuously (set to “ON” rather than “AUTO”). HVAC, air conditioning wall units, and fans without upgraded filters should be turned off. See this [Ventilation FAQ](#) for more details.
- Use a portable air cleaner in one or more rooms. Portable air cleaners work best when run continuously with doors and windows closed.
- When air quality improves, even temporarily, “air out” buildings to reduce indoor air pollution.
- Damp mop, dust, and clean with a high efficiency particulate air [HEPA] filter-equipped vacuum.

- Schools may consider dismissing students until air quality improves and proper ventilation on indoor classrooms/common areas can resume.
- For resources and guidance on air quality, visit the San Mateo County Office of Education's [Air Quality Resources webpage](#).

Stay Home When Sick and Get Tested

The CDPH notes that getting tested for COVID-19 when symptoms are consistent with COVID-19 will help with rapid contact tracing and prevent possible spread at schools. CDPH recommends the following:

- Advise staff members and students with symptoms of COVID-19 infection not to return for in-person instruction until they have met these criteria:
 - At least 24 hours have passed since resolution of fever without the use of fever-reducing medications; *and*
 - Other symptoms have improved; *and*
 - They have a negative COVID-19 test, **OR** a healthcare provider has provided documentation that the symptoms are typical of their underlying chronic condition (e.g., allergies or asthma) **OR** a healthcare provider has confirmed an alternative named diagnosis (e.g., Streptococcal pharyngitis, Coxsackie virus), **OR** at least 10 days have passed since symptom onset.

Follow the [CDC's guidelines](#) for Staying Home when Sick and Getting Tested:

- Students, teachers, and staff who have **symptoms** of infectious illness, such as influenza (flu) or COVID-19, should stay home and be referred to their healthcare provider for testing and care.
- Remind parents and guardians to keep children home if they are showing signs and symptoms of COVID-19 and get them tested.
- Schools should allow flexible, non-punitive, and supportive paid sick leave policies and practices that encourage sick workers to stay home without fear of retaliation, loss of pay, or loss of employment level, and provide excused absences for students who are sick.
- Employers should ensure that workers are aware of and understand these policies.

Common Symptoms of COVID-19 (CDPH)

- Headache
- Fever or chills
- Cough
- Shortness of breath or difficulty breathing
- Fatigue (tiredness)
- Muscle or body aches
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea

When Students or Staff Are Sick at School

When a student or staff member is sick while on campus, school staff must escort the person to the school's isolation room and provide a COVID-19 test, if available. If not, the student or staff member should leave campus and seek a test from their healthcare provider or a community testing site.

If the student or staff member tests positive for COVID-19, they should be directed to contact their healthcare provider for follow up response and monitoring.

If the student or staff member tests negative for COVID-19, they may return to school following the school's health policies, which is usually 24 hours after a fever subsides without the use of medication and symptoms have improved.

Hand Hygiene

- Teach and reinforce washing hands with soap and water for at least 20 seconds, avoiding contact with one's eyes, nose, and mouth, and covering coughs and sneezes among students and staff.
- Promote hand washing throughout the day, especially before and after eating, after using the toilet, and after handling garbage, or removing gloves.
- Ensure adequate supplies to support healthy hygiene behaviors, including soap, tissues, no-touch trash cans, masks, and hand sanitizers with at least 60 percent ethyl alcohol for staff and children who can safely use hand sanitizer.

- Hand sanitizers should be stored up, away, and out of sight of young children and should be used only with adult supervision for children under 6 years of age.
- Cal/OSHA states that the COVID-19 prevention plan must allow for adequate time for handwashing and cleaning frequently touched surfaces and objects.

Cleaning

- In general, cleaning once a day is usually enough to sufficiently remove potential viruses that may be on surfaces.
- Disinfecting (using disinfectants on the [U.S. Environmental Protection Agency COVID-19 list](#)) removes any remaining germs on surfaces, which further reduces any risk of spreading infection.
- For more information on cleaning a facility regularly, when to clean more frequently or disinfect, cleaning a facility when someone is sick, safe storage of cleaning and disinfecting products, and considerations for protecting workers who clean facilities, see [Cleaning and Disinfecting Your Facility](#).
- If a facility has had a sick person with COVID-19 within the last 24 hours, clean AND disinfect the spaces occupied by that person during that time.

Food and Meals

- Arrange for eating outdoors as much as feasible.
- Maximize physical distance as much as possible while eating (especially indoors). Using additional spaces outside of the cafeteria for mealtime seating such as the gymnasium can help facilitate distancing.
- Clean frequently touched surfaces. Surfaces that come in contact with food should be washed, rinsed, and sanitized before and after meals.
- Given the very low risk of transmission from surfaces and shared objects, there is no need to limit food service approaches to single use items and packaged meals.

Training

- Schools should provide training for staff, parents, and students on the school's safety plan.
- According to Cal/OSHA, employers must provide effective training and instruction to employees on how COVID-19 is spread, infection prevention techniques, and information regarding COVID-19-related benefits that affected employees may be entitled to under applicable federal, state, or local laws.

Plans

Schools and districts must post their COVID-19 safety plans on their website and share a link with the [San Mateo County Office of Education](#), which will post links to all school plans on its website.

- The plan should communicate the safety measures in place for 2021-22.
- Plan should include a section on how the school or district would adjust its safety layers if conditions worsen or a new health order or guidance is released that impacts school operations.
- Plans should also be disseminated to families in advance of the start of the school year.
- Plans should include or align with the written [COVID-19 Prevention Program](#) (CPP) required by Cal/OSHA and address: identifying and evaluating employee exposures to COVID-19 health hazards, implementing effective policies and procedures to correct unsafe and unhealthy conditions, and allowing adequate time for handwashing and cleaning frequently touched surfaces and objects.

Each local educational agency receiving Elementary and Secondary School Emergency Relief (ARP ESSER) funds is required to adopt a [Safe Return to In-Person Instruction and Continuity of Services Plan](#) and review it at least every six months for possible revisions. The plan must describe how the local educational agency will maintain the health and safety of students, educators, and other staff.

Visitors

Vaccination Verification and Testing Requirements for Volunteers

According to [CDPH](#), volunteers who are onsite at a school campus supporting school functions are considered workers and, therefore, schools must verify their vaccination status. Those who are not fully vaccinated must participate in the school's testing program. Please see the sections on [vaccination verification](#) requirements and [screening testing](#) in this framework.

CDPH also offers the following recommendations for visitors to campus:

- Schools should develop rules for visitors and family engagement activities, including masking.
- Schools should limit nonessential visitors, volunteers, and activities involving external groups or organizations with people who are not fully vaccinated.
- Schools should not limit access for direct service providers but can ensure compliance with school visitor policies.
- Anyone, including visitors, who have symptoms of infectious illness, such as flu or COVID-19, should stay home and seek testing and care.
- According to Cal/OSHA, employers shall implement measures to communicate to non-employees the masks requirements on their premises.

Schools may request that visitors provide proof of vaccination status before entering campus. If visitors are not vaccinated or refuse or are unable to provide this information, they must follow all school policies related to unvaccinated individuals.

Extracurricular and Athletic Activities

The requirements and recommendations of the CDPH's [updated guidance](#) apply to all extracurricular activities that are operated or supervised by schools, and all activities that occur on a school site, whether or not they occur during school hours, including, but not limited to, sports, band, chorus, and clubs.

Activities may be performed outdoors without masks.

Indoor mask use remains a critical layer in protecting against COVID-19 infection and transmission, including during sports, music, and related activities. Accordingly:

- Masks are strongly recommended indoors at all times for teachers, referees, officials, coaches, and other support staff.
- Masks are strongly recommended for all spectators and observers.
- Masks are strongly recommended indoors at all times when participants are not actively practicing, conditioning, competing, or performing. Masks are also strongly recommended indoors while on the sidelines, in team meetings, and within locker rooms and weight rooms.
- When actively practicing, conditioning, performing, or competing in indoor sports, masks are strongly recommended by participants even during heavy exertion, as practicable. If masks are not worn due to heavy exertion, it is strongly recommended that individuals undergo screening testing at least once weekly unless they had COVID-19 in the past 90 days. An FDA-approved antigen test, PCR test, or pooled PCR test is acceptable for evaluation of an individual's COVID-19 status.
- Individuals using instruments indoors that cannot be played with a mask (e.g., wind instruments) are strongly recommended to use bell coverings AND maintain a minimum of 3 feet of physical distancing between participants. If masks are not worn and bell covers are not used, it is strongly recommended that individuals undergo screening testing at least once weekly unless they had COVID-19 in the past 90 days. An FDA-approved antigen test, PCR test, or pooled PCR test is acceptable for evaluation of an individual's COVID-19 status.

CDPH provides the following recommendations to mitigate sports-related transmission of COVID-19:

- vaccinate all eligible student athletes, coaches, and parent/adult volunteers;
- develop screening testing programs;
- hold team meetings outdoors;
- minimize team meals and other activities not related to practice or play;
- strongly recommend masks be worn during shared transportation (i.e., carpooling to and from activities);
- avoid sharing water bottles; and
- train in pods (e.g., separate teams into varsity/junior varsity, offense/defense, different track & field events, etc.).

Travel

Follow this guidance concerning travel:

- Everyone should follow the same steps concerning travel: get vaccinated, avoid travel when sick, wear a mask when using public transportation or with others outside the household, and avoid large gatherings.
- Schools should not exclude students who have traveled; however, they may want to increase their testing cadence of staff and students during and after peak holiday times.

CDC Recommendations for Domestic Travel

The following provides an overview of [CDC guidance](#) concerning domestic travel:

- Delay travel until you are up to date with your COVID-19 vaccines.
- Check your destination's COVID-19 situation before traveling. State, local, and territorial governments may have travel restrictions in place.
- Do not travel if you have been exposed to COVID-19, you are sick, if you test positive for COVID-19, or you are waiting for results of a COVID-19 test.
- If you are *not* fully vaccinated, get tested with a viral test 1-3 days before your trip.
- Wearing a mask over your nose and mouth is required in indoor areas of public transportation (including airplanes), and indoors in U.S. transportation hubs (including airports).
- In areas with high numbers of COVID-19 cases, wear a mask in crowded outdoor settings and for activities with close contact with others who are not fully vaccinated like an outdoor festival or sporting event.
- Wash your hands often or use hand sanitizer (with at least 60% alcohol).
- Self-monitor for COVID-19 symptoms; isolate and get tested if you develop symptoms.
- If not fully vaccinated, get tested with a viral test 3-5 days after returning from travel *and*
- Stay home and self-quarantine for five days after travel.

CDC Recommendations for International Travel

- Visit the [CDC website](#) for information on international travel, including recommendations and requirements.

Childcare

Childcare settings and providers remain subject to [separate CDPH guidance](#).

Screening Testing

According to the August 11, 2021, [health order](#), schools and districts must adhere to the following testing requirements, which apply to workers and volunteers in schools:

- Asymptomatic workers who are not fully vaccinated are required to undergo diagnostic screening testing.
- Workers may be tested with either antigen or molecular tests to satisfy this requirement.
- Workers who are not fully vaccinated must be tested at least once weekly with either PCR testing or antigen testing. Any PCR (molecular) or antigen test used must either have Emergency Use Authorization by the FDA or be operating per the Laboratory Developed Test requirements by the U.S. Centers for Medicare and Medicaid Services.
- Workers who are not fully vaccinated must also observe all other infection control requirements, and are not exempted from the testing requirement even if they have a medical contraindication to vaccination, since they are still potentially able to spread the illness.
- Previous history of COVID-19 from which the individual recovered more than 90 days earlier, or a previous positive antibody test for COVID-19, does not waive this requirement for testing.

Definitions

Fully vaccinated: two weeks after completion of a two-dose mRNA vaccine or one dose of Janssen vaccine.

Close Contact: Someone sharing the same indoor airspace for a cumulative total of 15 minutes or more over a 24-hour period during an infected person's infectious period.

High-Risk Contact: Someone who may experience severe illness if they become infected with COVID-19 or for whom the transmission potential is high.

Universal pre-entry testing can be used along with any of the Testing Options to test all individuals who are not vaccinated prior to starting school.

The CDC also provides additional suggestions for screening testing:

- More frequent testing may be needed for students, teachers, staff, and adult volunteers who are not fully vaccinated and engaged in school athletics and other extracurricular activities.
- Testing at least once per week is recommended for high-risk sports and extracurricular activities (those that cannot be done outdoors or with masks) at all community transmission levels. In areas of substantial-to-high community transmission levels, testing twice per week is recommended for participation in these activities.
- Screening testing may be most valuable in areas with substantial or high community transmission levels, in areas with low vaccination coverage, and in schools where other prevention strategies are not implemented.
- More frequent testing can increase effectiveness, but the feasibility of increased testing in schools needs to be considered.
- Both school leaders and public health officials should assure the testing plan has key elements in place, including:
 - Protocols for screening testing frequency based on community transmission rates, vaccination levels, and prevention strategies implemented at the school.

- Protocols for providing or referring to diagnostic testing for students, teachers, and staff who come to school with symptoms and for students, teachers, and staff who are not fully vaccinated following exposure to someone with COVID-19.
- Physical space to conduct testing safely and privately.
- Ability to maintain confidentiality of results and protect student, teacher, and staff privacy.
- Ways to obtain parental consent for minor students and assent/ consent for students themselves.
- A mechanism to report all testing results, to the extent allowable by or consistent with applicable federal, state, or local laws and regulations, including privacy laws such as FERPA, as required by the state or local health department.
- Roles and responsibilities for contact tracing for each party, including identification of close contacts.
- If these elements are not in place, schools may consider referring students, teachers, and staff to community-based testing sites.

Staff Exposures and Response Testing

CDPH updated [its recommendations](#) for asymptomatic exposed individuals on April 6, 2022.

- Exposed asymptomatic persons, regardless of vaccination status, should test within 3-5 days after last exposure and should wear a well-fitting mask around others for a total of 10 days.
- If test result is positive, follow isolation recommendations.
- If symptoms develop, test and stay home. Remain in isolation while waiting for testing results. If no test, continue isolation for 10 days. If cannot isolate, wear a well-fitting mask for 10 days.
- Consider continuing self-isolation and retesting in 1-2 days if testing negative with an antigen test, particularly if tested during the first 1-2 days of symptoms.

Diagnostic Testing

- An antigen test, nucleic acid amplification test (NAAT), or LAMP test are acceptable, however, it is recommended that persons use an antigen test for ending isolation.
- Exposed persons who were infected with SARS-CoV-2 within 90 days prior to their current exposure should also use an antigen test.
- Use of over-the-counter tests is also acceptable to end isolation.

Masking

- During the days following isolation or exposure when masks are worn, all persons should optimize mask fit and filtration, ideally through use of a surgical mask or respirator (see [Get the Most out of Masking](#) for more information).

Symptom Self-monitoring

- Symptom self-monitoring should include checking temperature twice a day and watching for fever, cough, shortness of breath, or any other [symptoms that can be attributed to COVID-19](#) for 10 days following last date of exposure, even if self-quarantine is completed earlier.

Students Exposed to COVID-19

On April 6, the individual-based tracing option (Modified Quarantine) was retired from the guidance.

- Schools may consider permitting asymptomatic exposed students, regardless of their COVID-19 vaccination status or location of exposure, to continue to take part in all aspects of K-12 schooling, including sports and extracurricular activities, unless they develop symptoms or test positive for COVID-19.
- It is strongly recommended that exposed students wear a well-fitting mask indoors around others for at least 10 days following the date of last exposure, if not already doing so.
- Exposed students, regardless of COVID-19 vaccination status, should get tested within 3-5 days after last exposure, unless they had COVID-19 within the last 90 days.

- Exposed students who had COVID-19 within the last 90 days do not need to get tested but should monitor for symptoms. If symptoms develop, they should isolate and get tested with an antigen test.
- If the exposed student has symptoms, they should stay home, get tested, and follow recommendations for staying home when sick guidance.
- If the exposed student tests positive for COVID-19, follow the guidance for isolation.

Testing of Those Who Previously Had COVID-19

People who have tested positive for COVID-19 within the past three months and recovered do not need to get tested following an exposure as long as they do not develop new symptoms.

Group Tracing

Recommendations for All Students Exposed to Someone with COVID-19 in a K-12 School

Schools should notify students who spent more than a cumulative total of 15 minutes (within a 24-hour time period) in a shared indoor airspace (e.g., classroom) with someone with COVID-19 during their period of infectiousness.

- Notification should occur to “groups” of exposed students (e.g., classmates, teammates, cohorts, etc.) rather than contact tracing to identify individual “close contacts” (e.g., those within 6 feet).
- Notifications should be provided to all individuals considered exposed, including those who are vaccinated and/or recently infected.
 - For example, if a student in tenth grade is diagnosed with COVID-19, the school should notify groups with whom that student interacted as per the criteria above, such as those in the same classes, sports team, and/or other extracurricular cohorts.
- A [sample notification letter is available here](#) for school edit and use.
- Exposed students, regardless of COVID-19 vaccination status, should get tested for COVID-19 with at least one diagnostic test obtained within 3-5 days after last exposure, unless they had COVID-19 within the last 90 days.

- Exposed students who had COVID-19 within the last 90 days should monitor for symptoms. If symptoms develop, they should isolate and get tested with an antigen test.
 - In the event of wide-scale and/or repeated exposures, broader (e.g., grade-wide or campus-wide) once weekly testing for COVID-19 may be considered until such time that exposure events become less frequent.
 - Any FDA-approved antigen diagnostic test, PCR diagnostic test, or pooled PCR test is acceptable for evaluation of an individual's COVID-19 status. For individuals who have been recently infected (within the past 90 days), antigen testing is strongly recommended as PCR results may remain persistently positive and not be indicative of a new active infection. Repeat antigen testing and/or confirmatory molecular testing should be considered in individuals who receive a negative result with an antigen test but have symptoms specific for COVID-19 (such as loss of taste and smell).
- Exposed students may continue to take part in all aspects of K-12 schooling, including sports and extracurricular activities, unless they develop symptoms or test positive for COVID-19. They should test, report positive test results to the school, and follow other components of this guidance, including wearing face-coverings is strongly recommended.
 - Exposed students who develop symptoms should see [Section 4 of the K-12 Guidance](#).
 - Exposed students who receive a positive test result should follow the [CDPH isolation recommendations](#).

Asymptomatic Employees Who are Exposed to Someone with COVID-19 (No Quarantine)

ASYMPTOMATIC PERSONS WHO ARE EXPOSED TO SOMEONE WITH COVID-19 (NO QUARANTINE)	RECOMMENDED ACTIONS
<p>Everyone, regardless of vaccination status.</p> <p>Persons infected within the prior 90 days do not need to be tested, quarantined, or excluded from work unless symptoms develop.</p>	<ul style="list-style-type: none"> • Test within 3-5 days after last exposure. • Per CDPH masking guidance, close contacts should wear a well-fitting mask around others for a total of 10 days, especially in indoor settings and when near those at higher risk for severe COVID-19 disease (see masking section below for additional information). • Strongly encouraged to get vaccinated or boosted. • If symptoms develop, test and stay home (see earlier section on symptomatic persons), <i>and</i> • If test result is positive, follow isolation recommendations in the Isolation table.

Isolation

Everyone who is infected with COVID-19, regardless of vaccination status, previous infection or lack of symptoms, follow the recommendations listed in Table 1 (isolation) of the [CDPH Guidance Isolation and Quarantine](#) for the general public.

VACCINATION STATUS	REQUIREMENTS
<p>Everyone, regardless of vaccination status, previous infection, or lack of symptoms.</p>	<ul style="list-style-type: none"> • Stay home for at least 5 days after start of symptoms (or after date of first positive test if no symptoms). • Isolation can end after day 5 if symptoms are not present or are resolving and a diagnostic specimen* collected on Day 5 or later tests negative. • If unable to test, choosing not to test, or testing positive on Day 5 (or later), isolation can end after Day 10 if fever-free for 24 hours without the use of fever-reducing medications. • If fever is present, isolation should be continued until 24 hours after fever resolves. • If symptoms, other than fever, are not resolving, continue to isolate until symptoms are resolving or until after Day 10. • Per CDPH masking guidance, infected persons should wear a well-fitting mask around others for a total of 10 days, especially in indoor settings. <p style="text-align: right;"><i>*Antigen test preferred.</i></p>

How to Count Five Days for Isolation

<p>If you develop symptoms after testing positive</p>	<p>Your 5-day isolation period should start over. Day 0 is your first day of symptoms. Follow the recommendations above for ending isolation for people who had COVID-19 and had symptoms.</p>
<p>If you had COVID-19 and had symptoms</p>	<p>Isolate for at least 5 days. To calculate your 5-day isolation period, day 0 is your first day of symptoms. Day 1 is the first full day after your symptoms developed. You can leave isolation after 5 full days.</p>
<p>If you test positive for COVID-19 and never develop symptoms</p>	<p>Isolate for at least 5 days. Day 0 is the day of your positive viral test (based on the date you were tested) and day 1 is the first full day after the specimen was collected for your positive test. You can leave isolation after 5 full days.</p>

Source: [CDC](#)

Case Reporting

A school in San Mateo County with one or more confirmed cases of COVID-19 in their school community must complete the following steps as soon as possible:

- The School/District COVID-19 Point Person must report all COVID-19 cases and clusters of undiagnosed respiratory illness to SMC Health as soon as practicable (within 24 hours) using SPOT, California’s case reporting system. SMC Health staff will access information submitted through SPOT and will be in touch with the school or district COVID contact regarding the submission, as necessary. Use the [SPOT intake form](#) to begin the process for using SPOT.
- Schools or districts with questions about how to respond to a case or to use SPOT should contact SMC Health at COVID19_SchoolTeam@smcgov.org or 650-573-2346.
- The District COVID-19 Point Person collects data from all schools and reports for all new cases (a line list) via SPOT.
- Schools should notify – to the extent allowable by applicable privacy laws – teachers, staff, and families of students who were close contacts as soon as possible (within the same day if possible) after they are notified that someone in the school has tested positive.

Additionally, per Cal/OSHA guidance, employers must:

- Contact the local health department immediately but no longer than 48 hours after learning of three or more COVID-19 cases to obtain guidance on preventing the further spread of COVID-19 within their workplace.
- Maintain accurate records and track all COVID-19 cases, while ensuring medical information remains confidential. These records must be made available to employees, authorized employee representatives, or as otherwise required by law, with personal identifying information removed.
- Report a COVID-19-related serious illness or death immediately to the nearest Cal/OSHA enforcement district office.
- [Per Cal/OSHA](#) and the district or school’s CPP, provide written notice within one day of learning of a case to people at the worksite who may have been exposed to COVID-19. This notice must be provided to all employees (and their authorized representative), independent contractors and other

employers at the worksite during the high-risk exposure period. Sample templates are in [the Appendix](#).

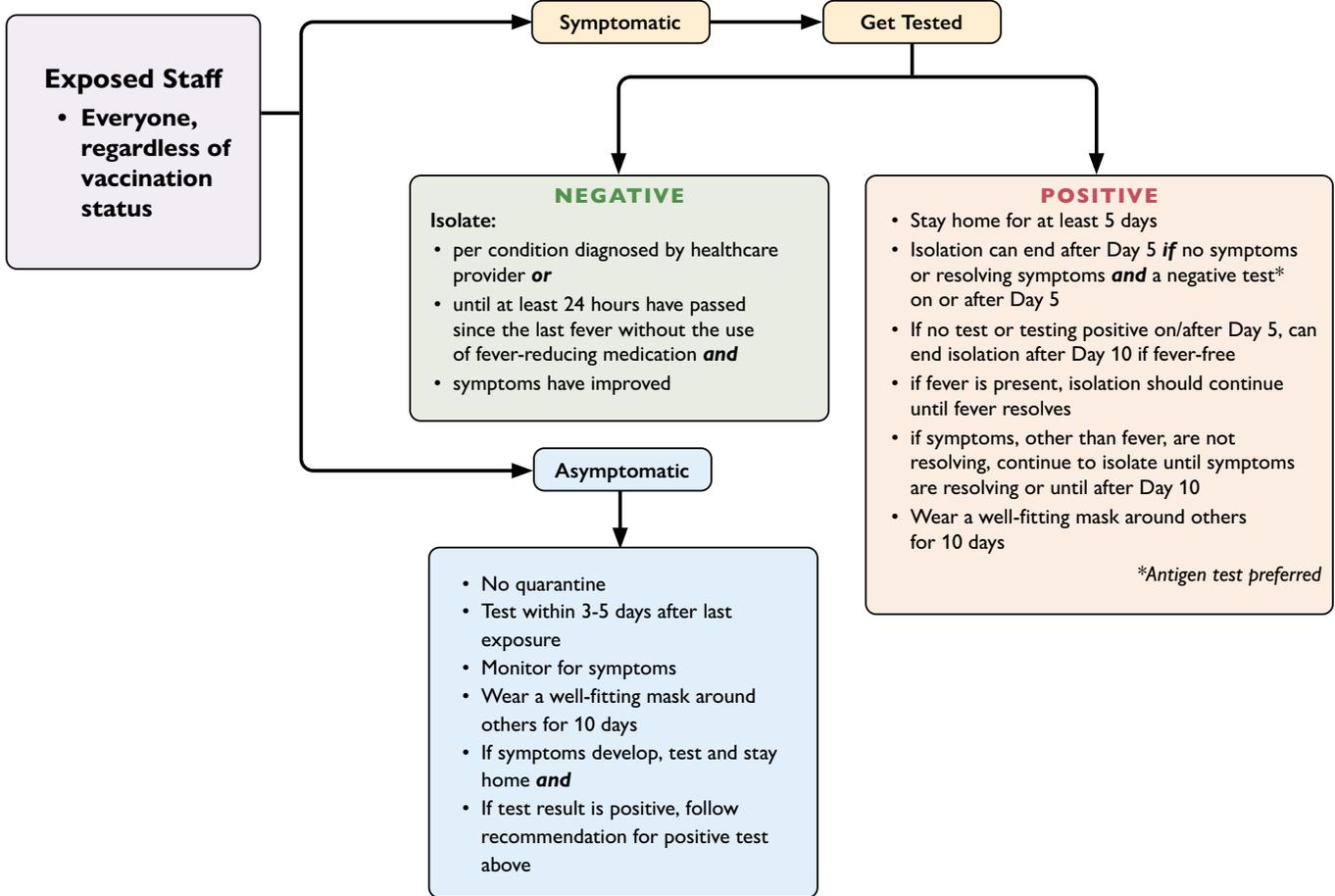
Outbreaks

Cal/OSHA provides the following guidance for employers in the case of an outbreak:

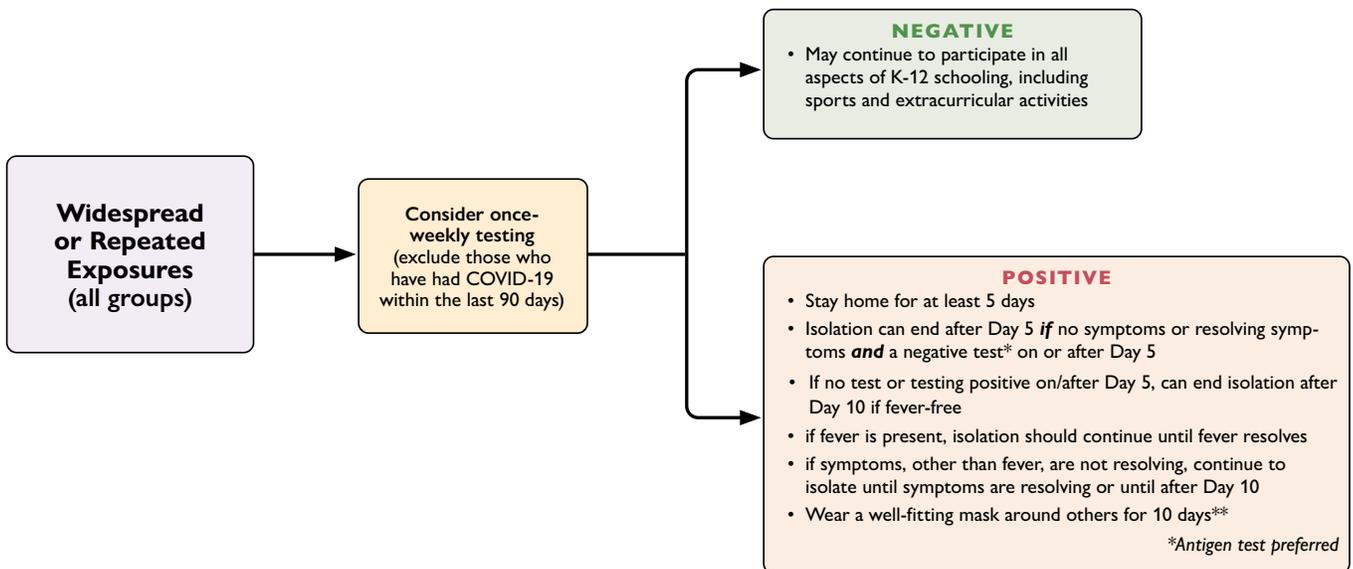
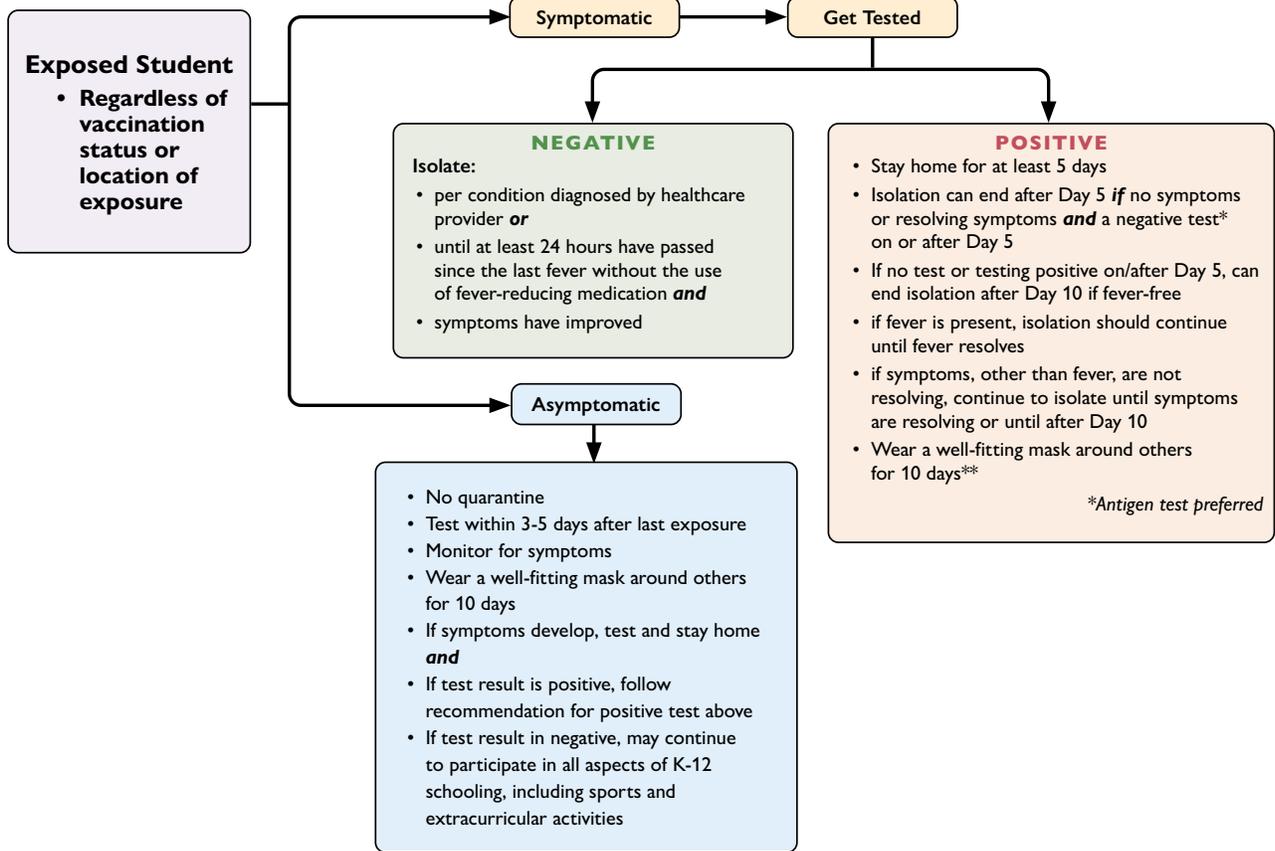
- Provide written notice of workplace outbreaks (three or more cases in an exposed workgroup in a 14-day period) and major outbreaks (20 or more cases within a 30-day period).
- During any outbreak, masks are required regardless of employee vaccination status both indoors and outdoors when employees are less than six feet from another person.
- During major outbreaks, six-foot physical distancing is required where feasible, both indoors and outdoors.

COVID-19 School Staff Exposure (CDPH)

Note: Quarantine and testing is not required for asymptomatic employees who have recovered from COVID-19 in the last 90 days.



COVID-19 Student Exposure (CDPH)



**Strongly recommended

Appendix

- Self-Certification of COVID-19 Vaccination Status
- Vaccination Consent Form
- California Department of Public Health Testing Resources
- Updated Testing Guidance from the California Department of Public Health

Communication Templates

- Additional Resources for Schools
- Case in School
- Group Contact Tracing
- Exposed Students
- Cal/OSHA Sample Notice of Potential COVID-19 Exposure to Employees
- Cal/OSHA Sample Notice of Potential COVID-19 Exposure to Union Representatives
- Cal/OSHA Sample Notice of Potential COVID-19 Exposure to Contractors