

COVID-19 Response Guidance for Schools, Child Care, Early Learning and Day Camps

Summary of Changes (New document as of 8/15/2022)

- Removed the testing requirement for cases returning to school
- Updated the household exposure protocol
- Updated outbreak definition
- Changed high transmission guidance to reflect hospitalization trends in place of case trends
- Removed the “sibling rule”

Requirements and Guidance to Mitigate COVID-19 Transmission in K-12 Schools, Child Care, Early Learning, Youth Development, and Day Camp Programs (wa.gov)

Symptomatic Persons: When someone develops COVID-like symptoms

Follow the DOH Symptomatic Person Flowchart: *COVID-19 Symptom and Exposure Flowchart for Schools and Child Care*

Students with COVID-like symptoms are **required to** be sent home (or other isolation space) and wear a mask while waiting to be picked up in an isolation room (a room that is away from the general population). They should be tested for COVID-19.

- If **positive or unable to test** → follow COVID-19 case guidelines (*isolate for at least 5 full days*).
- If negative, they can return once fever-free for 24 hours (*without fever-reducing medication*) and symptoms have significantly improved.

Positive COVID-19 Cases: When someone tests positive for COVID-19

If someone tests positive for COVID-19, they are **required to** isolate for 5 days and may return on day 6 (regardless of vaccination status), provided that the case can meet the following criteria:

- No symptoms are present, or symptoms are resolving; AND
- They have been fever-free for the past 24 hours without the use of fever reducing medications

Day 0 is the symptom onset date, regardless of when they tested positive. If asymptomatic, day 0 is the test date.

A test to return is recommended and schools can make it a requirement. If the return test is positive, then students are **required to** continue to isolate for a full 10 days. Students who do not test to return or test negative upon return are recommended to wear a well-fitting mask for the first 5 days of their return.

(cont'd)

Household exposures: When someone is exposed to COVID-19 in the home (or reports another high-risk exposure)

When a staff member or student is exposed to a COVID-19 case in their household (living in the same house or in frequent contact), the exposed staff or student may attend class if they meet the **required** criteria:

- Test negative on the baseline test and once a week until 15 days (or two weeks) after the most recent case’s symptom onset (if asymptomatic, use test date).
 - It is recommended they take a COVID-19 test every 1-2 days. This more frequent testing can be made a requirement by SRHD if there are concerns of increased hospitalizations.
- No symptoms are present AND
- The person is monitored for symptoms through day 14

Staff and students who have recovered from a confirmed COVID-19 infection in the past 90 days do not need to test to stay. If they develop symptoms, follow the “Symptomatic Persons” protocol.

Classroom or school-related exposures: When 1-2 cases are identified in a classroom or team

Schools and childcares are required to send notification of exposure letters to all staff and students in the positive case’s classroom, teams, and other extracurricular groups. A letter template is available: see [Class Notification of Case Letter](#) (additional languages available on [SRHD’s COVID School Information website](#)). A dashboard available for parents may replace the notification letter.

COVID-19 Outbreak Response: When an outbreak is identified in a cohort

When COVID-19 is identified in a classroom or a high-contact sports team, additional mitigation measures and cooperation with SRHD is **required**. SRHD recommends Test to Stay while masking. If this combined strategy is not feasible, then schools, child care facilities, and camps may choose any combination of the options described in the table below or leave the decision up to parents.

<i>Response Strategy</i>	<i>Description</i>	<i>Pros and Cons</i>
<i>Targeted Test to Stay</i>	Students who were in close contact (within 6 ft for a cumulative of 15+ minutes) of the positive cases attend class while testing for COVID-19 throughout a 10-day period. ¹	<p>Pros: Able to monitor transmission in close contacts. Conserves testing supplies. Allows students to continue in-person learning.</p> <p>Cons: If seating charts are not used and adhered to, it can be difficult to identify close contacts. Contact tracing can be labor intensive. People can still attend class while they may be infectious.</p>

¹ For more detailed Test to Stay guidance please see [K-12 TestingInSchoolsGuidance.pdf \(srhd.org\)](#). Staff and students who have recovered from a confirmed COVID-19 infection in the past 90 days do not need to test to stay unless they develop symptoms.

<i>Cohort-Based Test to Stay</i>	All students and staff within the cohort experiencing an outbreak attend class while testing for COVID-19 throughout a 10-day period. ¹	<p>Pros: Able to monitor transmission through the whole classroom. Does not require contact tracing. Allows students to continue in-person learning.</p> <p>Cons: Requires an adequate supply of COVID-19 tests and staffing to track test results. People can still attend class while they may be infectious.</p>
<i>Mask</i>	Students and staff within the cohort experiencing an outbreak attend class while wearing a well-fitted mask for 10 days.	<p>Pros: Prevents COVID-19 transmission: people wearing a cloth or surgical mask have a 56-66% lower odds of testing positive compared to people who do not mask.² Allows students to continue in-person learning.</p> <p>Cons: Can be difficult to enforce, particularly in athletics and secondary school classrooms. As a standalone measure, it does not monitor COVID-19 transmission within the cohort.</p>
<i>Quarantine</i>	Students and staff within the cohort experiencing an outbreak quarantine at home for 5 days and may return with a negative test and masking through day 10.	<p>Pros: Safest method to prevent COVID-19 transmission within a classroom.</p> <p>Cons: Students must switch to remote learning.</p>

Outbreak Definition

A COVID-19 outbreak in a K-12 or childcare setting is defined as:

- 3 cases within a specified core group meeting criteria for a probable or confirmed COVID-19 case

OR

- 10% cases within a specified core group meeting criteria for a probable or confirmed COVID-19 case

Epidemiological linkages between cases do not need to be determined.

Please report school and childcare outbreaks through this link: [Facility Outbreak Notification Survey](#)

Additional Guidance

SRHD **recommends** additional mitigation measures to prevent the spread of COVID-19. Additional precautions can include but are not limited to:

- Screening testing upon return from school breaks
- Screening or surveillance testing of high-risk groups
- Masking when within 6 ft of distance of others
- Increase spacing at lunch or meals by offering more lunch periods, having lunches in classrooms as appropriate or offering outdoor seating options for lunches.

² <https://www.cdc.gov/mmwr/volumes/71/wr/mm7106e1.htm>

- Offer pre-event testing for events that are challenging to reschedule such as homecoming, games, proms or other extracurricular events
- Follow DOH guidance on *Ventilation and Air Quality for Reducing Transmission of Airborne Illnesses*

SRHD requires:

- **New Variant Guidance:** Since new COVID-19 variants cause milder forms of illness and testing is not as well-tracked, we are particularly concerned about variants that would result in an increase in hospitalizations. Since hospitalization increases are typically observed weeks after case increases, SRHD will be monitoring hospitalization trends in the western part of the state. Historically, Spokane County's COVID-19 transmission trends have mirrored trends observed in the western part of the state with about a two-week delay. If there is a new variant identified in Washington state AND the western counties experience a sharp increase in hospitalizations, SRHD will adopt additional requirements to slow the spread of the new variants in school and childcare settings. These requirements will be in place for 2-4 weeks and will include:
 - Increased frequency of required tests for those who were exposed to COVID-19 in their household
 - Increased frequency of required tests for outbreak testing
 - Masking in cohorts experiencing outbreaks

Child Care Specific Guidance

Reporting

All cases must be reported to the childcare's licensor and to Spokane Regional Health District. Please report to SRHD using this encrypted and secure webform: <https://forms.office.com/r/82EXF4g5Xb>.

Spokane Regional Health District assures nondiscrimination in accordance with Title VI of the Civil Rights Act of 1964 and the Americans with Disabilities Act. To file a complaint or to request more information, reasonable accommodations, or language translations, contact 509.324.1501 or visit srhd.org.