



COVID-19 Guidance for School-Age Programs

Updated February 22, 2022

Introduction

The Johnson County Department of Health and Environment is providing updated guidance for mitigation of COVID-19 in school-age programs. This guidance incorporates revised guidance from the Centers for Disease Control and Prevention and the Kansas Department of Health and Environment regarding mask use considering the emerging data on the highly infectious variants of SARS-CoV-2.

The updated guidance includes a multi-layered approach with three primary evidence-based mitigation strategies: (1) promote vaccination and continued masking wherever possible; (2) exclude persons with suspected or confirmed COVID-19 infection for at least five days from symptom onset or positive test; and (3) require mask wearing among those with COVID-19 for the remainder of their 10-day isolation period.

Additional measures, such as post-exposure testing of close contacts (including enrollment of identified close contacts in a test to stay program where available), collecting and maintaining COVID-19 vaccination status among students and staff, assigned seating, cohorting, increased ventilation, hand hygiene, cough and sneeze etiquette and cleaning and disinfection should also be considered to further prevent transmission. The guidance in this document may change as additional scientific evidence becomes available and the findings dictating best practice expand.

For questions and assistance or to report positive cases - please contact the childcare hotline at 913-477-8361, Monday – Friday, 8 a.m. – 5 p.m.

Preventing COVID-19 Transmission and Disease

Vaccination

COVID-19 vaccines are safe and effective at preventing COVID-19, especially severe illness and death ([CDC, 2021](#)). Everyone five years and older should receive all recommended doses of a COVID-19 vaccine. In January 2022, the Centers for Disease Control and Prevention released updated guidance for individuals who are **up to date for COVID-19 vaccination**. Individuals will be considered up to date for vaccination as follows:

- Individuals age 12 years or older who have received all recommended doses, including boosters and additional primary doses for some immunocompromised individuals.
- Individuals age 5 – 11 years who have completed the primary series (two doses) of the Pfizer-BioNTech COVID-19 vaccine, and at least two weeks have passed since their second dose.

Therefore, anyone who has completed the first two doses of an mRNA vaccine (Pfizer or Moderna) within the last five months and anyone who received a single dose of the Johnson & Johnson/Janssen vaccine within the last two months would be considered up to date.

Vaccination among eligible staff and students will be an important mitigation strategy to reduce in-school transmission of COVID-19. SAPs should work to promote vaccination among eligible staff and students.

Masking

In their most updated guidance from January 2022, the CDC continues to recommend universal indoor masking for all teachers, staff, students, and visitors to early childhood education centers and K-12 schools, regardless of vaccination status. Consistent and correct mask use is important indoors and in crowded settings when physical distancing cannot be maintained. This is especially important in areas with substantial to high community transmission. In general, people do not need to wear masks when outdoors. CDC recommends that people who are not fully vaccinated wear a mask in crowded outdoor settings or during activities that involve sustained close contact with other people. Fully vaccinated people might choose to wear a mask in crowded outdoor settings, especially if they or someone in their household is immunocompromised.

The CDC recommends the use of the most protective mask that fits well and can be worn consistently and correctly. To ensure proper fit, CDC recommends individuals:

- Check for gaps by cupping your hands around the outside edges of the mask.
- Make sure no air is flowing from the area near your eyes or from the sides of the mask.
- If the mask has a good fit, you will feel warm air come through the front of the mask and may be able to see the mask material move in and out with each breath.

Masking in school-age programs is strongly recommended; understanding that many SAPs are in K-12 school buildings, JCDHE supports programs following the respective school district policy.

Management of Suspected/Confirmed COVID-19 Individuals and Contacts

Exclusion of Persons with Suspected or Confirmed COVID-19 Infection

Any person, including student or staff member, diagnosed with COVID-19 infection must be excluded from school-age programs and activities for the appropriate period of isolation. Per [K.S.A. 65-122](#), persons in charge have a duty to exclude individuals affected with a disease suspected of being infectious or contagious. This includes persons under investigation for COVID-19 until they are determined to be uninfected.

Individuals who exhibit one primary symptom OR two or more secondary symptoms should be tested for COVID-19. Symptomatic individuals who are either not tested or test positive for COVID-19 should remain out of school and all school-related activities for five days after their symptoms began AND 24 hours after their fever (if present) has resolved without the aid of medication AND their initial symptoms have improved AND continue to wear a mask around others for an additional five days. Individuals who are unable or unwilling to wear a mask (e.g., due to medical exemption) should remain out for 10 days after their symptoms began.

Currently or recently symptomatic students and staff members awaiting COVID-19 test results should be excluded until laboratory results are received and COVID-19 infection is ruled out.

Individuals who test negative for COVID-19 may return 24 hours after their symptoms improve AND are fever-free without the use of a fever-reducing medication. If a physician indicates the symptoms are due to a *non-infectious* diagnosis (e.g., allergies, asthma), they may return prior to symptom resolution.

Asymptomatic individuals who test positive for COVID-19 should be excluded for five days after the date their specimen was collected, followed by five additional days of wearing a mask around others.

Both asymptomatic and symptomatic individuals with COVID-19 must mask upon their return to school-age programs and should refrain from activities that make consistent and proper mask wearing impossible, activities that involve frequent or sustained close contact (e.g., certain sports) and activities that increase the risk of transmission of aerosolized respiratory particles (e.g., wind instruments, singing, shouting, etc.). Given the highly infectious nature of

COVID-19, these individuals should not be in close proximity to other people when unmasked, such as during meals, etc. A minimum distance of six feet between individuals is recommended and additional spacing should be implemented whenever feasible.

Recommendations for Persons Exposed to COVID-19

Recognizing that intensive contact tracing within schools/school-age programs is no longer feasible given the current situation, priority should be given to exclusion of infected individuals.

Exposures in Vaccinated Individuals

Per guidance from the CDC ([CDC, 2022](#)), the following individuals do not need to quarantine following an exposure to COVID-19 so long as they remain **asymptomatic** following their exposure:

- Individuals aged 12 years or older who have received all recommended doses, including boosters and additional primary doses for some immunocompromised individuals.
- Individuals aged 5 – 11 years who have completed the primary series of COVID-19 vaccines and at least two weeks have passed since their second dose.

To be exempt from quarantine exclusions, exposed staff members and students must provide documentation of vaccination that includes patient name, date of birth, vaccine manufacturer, date(s) of vaccination(s), and clinic or facility name where the vaccination was performed.

The CDC recommends that vaccinated individuals get tested at least five days after exposure, wear a well-fitting mask around others for 10 days after exposure, and monitor themselves for symptoms. Any person who develops symptoms following exposure should self-isolate, get tested and be excluded from their SAP pending test results.

Exposures in Unvaccinated, Under-vaccinated or otherwise Susceptible Individuals

The CDC recommends that susceptible close contacts of infected individuals, regardless of where the exposure occurred (i.e., within or outside the SAP or school setting), be excluded for five days, followed by an additional five days of wearing a mask. Susceptible unmasked individuals who were within six feet for [15 cumulative minutes](#) or more, or participated in a high-risk activity with a COVID-19 positive individual during their infectious period will be considered exposed.

Although intensive contact tracing is no longer feasible, JCDHE recommends that individuals known to be a close contact of a COVID-19 case wear a well-fitting mask for ten days after their exposure if they remain in school/SAP and are around others. Testing on day five following exposure is strongly encouraged. Where available, close contacts are also encouraged to participate in their district's test-to-stay program.

Appendix A: Key Terms and Concepts

<p><u>Antigen OR Rapid Diagnostic Test (RDT):</u></p>	<p>Antigen tests detect a protein on the virus. Results for most antigen tests are available onsite in 15-30 minutes. They may be useful as an initial data point, but because antigen tests may not detect lower levels of the virus, false negatives are a concern. If COVID-19 is suspected, an RDT/antigen test should be followed by a confirmatory PCR to make a final diagnosis.</p> <p>At home antigen tests are more reliable when an individual has symptoms and the test is done 24 hours after symptom onset. The manufactures directions must be followed exactly, which could include testing more than once with the home kit. If a person tests positive with any of these methods, they should isolate at home.</p>
<p><u>Contact tracing:</u></p>	<p>The Centers for Disease Control and Prevention (CDC) defines contact tracing as, “an evidence-based way to slow the spread of infectious disease. It is the process of interviewing individuals who have been infected with a disease, identifying close contacts that they may have unknowingly exposed, and providing those contacts with the information needed to monitor their own health and prevent the continued spread of the illness.” (CDC, 2021)</p>
<p><u>Close contact/exposure:</u></p>	<p>A close contact is defined as:</p> <ol style="list-style-type: none"> a. being directly exposed to infectious secretions (e.g., being coughed on); or b. being within six feet for 15 or more cumulative minutes over a 24-hour period. Additional factors like infected person/contact masking (i.e., both the infectious individual and the potential close contact have been consistently and properly masked), classroom-level mitigation measures, individual risk profiles and case symptomology may affect this determination. (CDC, 2021) <p>Either (a) or (b) is defined as close contact if it occurred during the case’s infectious period, which is defined as two days <i>before</i> their symptoms began until ten days <i>after</i> symptom onset <i>and</i> 24 hours after their fever (if present) has resolved without the aid of medication <i>and</i> initial symptoms have improved. For an asymptomatic individual who tests positive for COVID-19, their infectious period is two days before through 10 days after their specimen was collected.</p>
<p><u>Infectious period:</u></p>	<p>An individual is considered infectious (capable of spreading the virus) for two days <i>before</i> their symptoms began until ten days <i>after</i> symptom onset <i>and</i> 24 hours after their fever (if present) has resolved without the aid of medication <i>and</i> initial symptoms have improved. For an asymptomatic individual who tests positive for COVID-19, their infectious period is two days before through 10 days after their specimen was collected.</p>
<p><u>Isolation:</u></p>	<p>Isolation separates people who are infected with the virus from people who are not infected. If all household members are not fully vaccinated, individuals with confirmed or presumed COVID-19 should isolate within their household and use a separate bedroom and bathroom, if possible. Individuals should not spend time in common household areas (e.g., living room, kitchen). If face-to-face interactions must take place, the infected person and unvaccinated household members should mask. Disinfect frequently touched surfaces in the household often. (CDC, 2022)</p>

<u>Mask:</u>	<p>The CDC recommends the use of the most protective mask that fits well and can be worn consistently and correctly. To ensure proper fit, CDC recommends individuals: Check for gaps by cupping your hands around the outside edges of the mask.</p> <ul style="list-style-type: none"> • Make sure no air is flowing from the area near your eyes or from the sides of the mask. • If the mask has a good fit, you will feel warm air come through the front of the mask and may be able to see the mask material move in and out with each breath. • A well-fitted mask of at least two layers of breathable, washable fabric that fits snugly around the nose and chin with no large gaps around the sides of the face.
<u>New olfactory or taste disorder:</u>	New change/loss of taste or smell.
<u>PCR/molecular test:</u>	Polymerase chain reaction tests detect the presence of viral genetic material in specimens. These tests take longer (sometimes several days) because they must be sent to a lab for processing but are generally more sensitive than antigen tests. JCDHE currently offers free PCR tests (nasal swab version).
<u>Presumed Positive:</u>	<p>Symptomatic individuals with a known exposure to a COVID-19 positive individual within the 14 days prior to symptom onset are presumed positive. Becoming symptomatic while during quarantine period should trigger a move from quarantine to isolation.</p> <p>Individuals with a positive antigen test without a subsequent negative PCR test within 48 hours of the initial antigen test will be considered presumed positive.</p>
<u>Quarantine:</u>	Keeps someone who has been exposed to the virus away from others. Individuals in quarantine should <u>stay home</u> . An individual who must be in public to seek medical assistance should practice masking and physical distancing as much as possible. Quarantine/exclusion timelines always begin at last exposure to a person with confirmed or presumed COVID-19. (CDC, 2022)
<u>Serology:</u>	Blood test that detects antibodies one may have to the virus from an immune system response. These are NOT diagnostic tests and should not be used as such. Serology tests do not provide sufficient evidence of immunity and cannot be used to release individuals from quarantine.
<u>Susceptible:</u>	Individuals who are not up to date for COVID-19 vaccination per the most recent CDC guidelines for the vaccine received or have no history of infection in the past 90 days.
<u>Symptomatic:</u>	<p>Individuals meeting clinical criteria for COVID-19, defined as:</p> <ul style="list-style-type: none"> • Any one of the following primary symptoms: <ul style="list-style-type: none"> ○ New cough ○ Difficulty breathing ○ New olfactory or taste disorder <p>OR</p> <ul style="list-style-type: none"> • At least two of the following secondary symptoms: <ul style="list-style-type: none"> ○ Chills ○ Congestion/runny nose ○ Extreme fatigue ○ Fever ($\geq 100^{\circ}\text{F}$) ○ Headache ○ Muscle or body aches ○ Nausea/vomiting/diarrhea ○ Sore throat

<p><u>Up-to-Date for COVID-19 Vaccination</u></p>	<p>Individuals are vaccinated per the current CDC recommendations. Examples of individuals who meet this definition are as follows (CDC, 2022):</p> <ul style="list-style-type: none"> • Individuals age 12 years or older who have received all recommended doses, including boosters and additional primary doses for some immunocompromised individuals. • Individuals age 5 – 11 years who have completed the primary series (two doses) of the Pfizer-BioNTech COVID-19 vaccine and at least 2 weeks have passed since their second dose.
<p><u>Vaccine (COVID-19) Breakthrough Case:</u></p>	<p>A breakthrough case is defined as an individual who has a laboratory confirmed COVID-19 positive case greater than or equal to 14 days after completing the FDA-authorized COVID-19 vaccine series.</p>

Appendix D: References and Additional Resources

1. The ABC Science Collaborative. (June 2021) Year in review, Path forward. Retrieved 9 July 2021 from:

<https://abcsciencecollaborative.org/year-in-review-path-forward/>

2. Baden, L.R., El Sahly, H.M., Essink, B., Kotloff, K., Frey, S., Novak, R., et al. (2021.) Efficacy and safety of the mRNA-1273 SARS-CoV-2 vaccine. *The New England Journal of Medicine*, 384(5): 403 – 416.
3. Centers for Disease Control and Prevention. (December 2020.) Options to reduce quarantine for contacts of persons with SARS-CoV-2 infection using symptom monitoring and diagnostic testing. *Science Brief*. Retrieved 2 December 2020 from: https://www.cdc.gov/coronavirus/2019-ncov/science/science-briefs/scientific-brief-options-to-reduce-quarantine.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fmore%2Fscientific-brief-options-to-reduce-quarantine.html
4. Centers for Disease Control and Prevention. (Feb 2021.) Contact tracing for COVID-19. Retrieved 9 July 2020 from: <https://www.cdc.gov/coronavirus/2019-ncov/php/contact-tracing/contact-tracing-plan/contact-tracing.html>
5. Center for Disease Control and Prevention. (Feb 2021.) Isolate if you are sick. Retrieved 9 July 2021 from: <https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/isolation.html>
6. Centers for Disease Control and Prevention. (March 2021.) When to quarantine: stay home if you might have been exposed to COVID-19. Retrieved 9 July 2021 from: <https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/quarantine.html>
7. Centers for Disease Control and Prevention. (May 2021.) Operational strategy for K-12 schools through phased prevention. Retrieved 15 May 2021 from: <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/operation-strategy.html#fully-vacc>
8. Centers for Disease Control and Prevention. (May 2021.) Interim public health guidance recommendations for fully vaccinated people. Retrieved 9 June 2021 from: <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/fully-vaccinated-guidance.html>
9. Centers for Disease Control and Prevention. (May 2021.) COVID-19 vaccines work. Retrieved 9 July 2021 from: <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/effectiveness/work.html>
10. Centers for Disease Control and Prevention. (June 2021.) When you've been fully vaccinated: How to protect yourself and others. Retrieved 9 June 2021 from: https://www.cdc.gov/coronavirus/2019-ncov/vaccines/fully-vaccinated.html?ACSTrackingID=USCDC_2067-DM51719&ACSTrackingLabel=When%20You%E2%80%99ve%20Been%20Fully%20Vaccinated%20%7C%20COVID-19&deliveryName=USCDC_2067-DM51719
11. Centers for Disease Control and Prevention. (June 2021.) Johnson & Johnson's Janssen COVID-19 vaccine overview and safety. Retrieved 9 July 2021 from: <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/different-vaccines/janssen.html>

12. Centers for Disease Control and Prevention. (June 2021.) Interim guidance for antigen testing for SARS-CoV-2. Retrieved 14 July 2021 from: <https://www.cdc.gov/coronavirus/2019-ncov/lab/resources/antigen-tests-guidelines.html>
13. Centers for Disease Control and Prevention. (January 2022.) Quarantine and Isolation. Retrieved 4 January 2022 from: <https://www.cdc.gov/coronavirus/2019-ncov/your-health/quarantine-isolation.html>
14. Haas, E.J., Angulo, F.J., McLaughlin, J.M., Anis, E., Singer, S.R., Khan, F. (2021.) Impact and effectiveness of mRNA BNT162b2 vaccine against SARS-CoV-2 infections and COVID-19 cases, hospitalizations, and deaths following a nationwide vaccination campaign in Israel: an observational study using national surveillance data. *The Lancet*, 397(10287); 1819 – 1829.
15. Kansas Department of Health and Environment. (2021) Coronavirus disease 2019 (COVID-19) investigation guideline. Retrieved 5 May 2021 from: <https://www.coronavirus.kdheks.gov/DocumentCenter/View/949/COVID-19-Disease-Investigation-Guideline-PDF---5-2021?bidId=>
16. Kansas Department of Health and Environment. (2021) Travel-related quarantine guidelines: COVID-19. Retrieved 9 July 2021 from: <https://www.coronavirus.kdheks.gov/DocumentCenter/View/135/Travel-Related-Quarantine-Table-PDF---Updated-7-1-21?bidId=>
17. Kansas Department of Health and Environment. (2021) Travel and exposure related isolation/quarantine. Retrieved 9 July 2021 from: <https://www.coronavirus.kdheks.gov/175/Travel-Exposure-Related-Isolation-Quaran>
18. Kansas Office of Revisor Statutes. (2017.) KSA 65-118: Reporting to local health authority as to infectious or contagious diseases; persons reporting; immunity from liability; confidentiality of information; disclosure. Retrieved 20 August 2020 from: https://www.ksrevisor.org/statutes/chapters/ch65/065_001_0018.html
19. Kansas Office of Revisor Statutes. (2017.) KSA 65-122: Schools and child care facilities; non-admissions and exclusions; readmissions, when. Retrieved 9 July 2021 from: https://www.ksrevisor.org/statutes/chapters/ch65/065_001_0022.html
20. Pollack, F.P., Thomas, S.J., Kitchin, N., Absalon, J., Gurtman, A., Lockhart, S. et al. (2020.) Safety and efficacy of the BNT162b2 mRNA COVID-19 vaccine. *The New England Journal of Medicine*, 383(27); 2603 – 2615.
21. Tang, L., Hijano, D.R., Gaur, A.H. (2021). Asymptomatic and symptomatic SARS-CoV-2 infections after BNT162b2 vaccination in a routinely screened workforce. *Journal of the American Medical Association*, 325(24); 2500 – 2502.