New Jersey Department of Health
COVID-19 Public Health Recommendations for Local Health Departments for K-12 Schools

<mark>Updated</mark> **November 19, 2020**

NJDOH will implement a statewide approach for school reopening with a regional/local focus. The reopening of schools requires a broad community commitment to reduce the risk of exposure to the virus that causes COVID-19. Such commitment involves social distancing, wearing masks, cleaning and disinfection and meticulous hygiene practices such as frequent handwashing. Some amount of community mitigation will also be necessary until a vaccine or therapeutic drug becomes widely available.

As schools resume operations, they should consider how best to structure educational services to minimize risk to staff and students in line with the New Jersey Department of Education (NJDOE)'s "The Road Back: Restart and Recovery Plan for Education" guidelines and Executive Order 175. The CDC's School and Child Care Programs page provides various resources and recommendations for school operations and is meant to supplement, **not replace,** any state or local health and safety laws, rules, and regulations with which schools must comply.

This guidance document outlines NJDOH COVID-19 public health recommendations for school settings and is intended for use by local health departments (LHDs). This guidance is based on what is currently known about the transmission and severity of COVID-19 and is subject to change as additional information is known. Please check the NJDOH, NJDOE and CDC websites frequently for updates.

Communication

Local health departments should maintain close communication with school officials in their community to provide information and share resources on COVID-19 transmission, prevention, and control measures and to establish procedures for LHD notification and response to COVID-19 illness in school settings. LHDs should identify a designated point of contact within each school that will be responsible for coordinating COVID-19 response with local public health authorities.

Regional COVID-19 Risk Levels

Understanding that COVID-19 may impact certain areas of the state differently, NJDOH will be providing information on COVID-19 transmission at the regional level, characterizing risk as low (green), moderate (yellow), high (orange), and very high (red). This information will be posted online every week on the NJDOH CDS COVID-19 website and sent out via New Jersey Local Information Network and Communications System (NJLINCS) to public health and healthcare partners.

To sign up to receive health alert messages, contact your local health department or request a new account at **https://www.njlincs.net/default.aspx**

The COVID-19 Regional Risk Matrix provides data and public health recommendations for local health departments and schools to consider based on the level of COVID-19 transmission in their region. The matrix is for the LHDs in collaboration with the local school districts and the Communicable Disease Service. Regional risk levels are just one tool that local health departments and schools can use when assessing COVID-19 risk. Local health departments have additional knowledge of COVID-19 in their jurisdictions that can inform local planning and response actions. **Implementation of these public health recommendations should be guided by what is feasible, practical, acceptable, and tailored to the needs of each community.**

The COVID-19 Regional Risk Matrix provides public health recommendations regarding the type of instruction (in-person, hybrid, remote), response to ill staff or students, exclusion criteria, and activities that involve interaction with multiple cohorts.

Regions:

- Northwest: Morris, Passaic, Sussex, Warren
- Northeast: Bergen, Essex, Hudson
- Central West: Hunterdon, Mercer, Somerset
- Central East: Middlesex, Monmouth, Ocean, Union
- Southwest: Burlington, Camden, Gloucester, Salem
- Southeast: Atlantic, Cape May, Cumberland

LHDs should use the COVID-19 Regional Risk Matrix when providing guidance for schools on actions they should take based on the level of COVID-19 risk in their region.

COVID-19 Regional Risk Matrix
For use by LHDs when providing guidance to school districts

Low Risk	Moderate Risk	High Risk	Very High Risk
Evaluate alternatives to in-person learning to ensure continuity of work or educational services. In response to a COVID-19 case among staff or students, follow COVID-19 exclusion criteria; work with local health department to identify and exclude close contacts following CDC guidance; refer to guidance on cleaning and disinfection. In response to ill students and staff, follow NJDOH School Exclusion List * If ill person had potential exposure in past 14 days, follow COVID-19 exclusion criteria; wait at least 24 hours and clean/disinfect areas where ill person spent time. Permit limited activities involving interaction with multiple cohorts, ensuring adherence to precautions.	Consider a mixture of remote and/or hybrid learning approaches, and/or fully remote learning. In response to a COVID-19 case among staff or students, follow COVID-19 exclusion criteria; work with local health department to identify and exclude close contacts following CDC guidance; refer to guidance on cleaning and disinfection. In response to ill students and staff with COVID-19 compatible symptoms, follow COVID-19 exclusion criteria; wait at least 24 hours and clean/disinfect areas where ill person spent time. Minimize activities that involve interaction with multiple cohorts.	Consider implementing fully remote learning. ***If schools remain open for in-person learning:*** In response to staff or student who is a COVID-19 case or who has COVID-19 compatible symptoms (not yet tested), follow COVID-19 exclusion criteria; work with local health department to identify and exclude close contacts according to CDC guidance; refer to guidance on cleaning and disinfection. * Decisions on when ill person's close contacts can return to school are dependent on the ill person's medical evaluation and COVID-19 test results. Restrict activities that involve interaction with multiple cohorts.	Implement fully remote learning

RISK LEVELS GREEN, YELLOW, AND ORANGE (*IF OPEN FOR IN-PERSON LEARNING*):

- Require staff and students to stay home when sick or if they have been in close contact with someone with COVID-19 within the past 14 days. If someone in their household is being tested for COVID-19 due to illness, students/staff should also stay home until the test result is received. Parents/guardians, students and staff should notify school administrators of illness and known exposure.
- Have a policy for daily symptom screening for students and staff; have plans for students and staff to report symptoms that develop during the day.
- In conjunction with local health department, identify COVID-19 rapid testing resources (viral testing) for when staff and students develop COVID-19 compatible symptoms.
- Clean and disinfect frequently touched surfaces at least daily.
- Ensure adequate hand hygiene supplies are readily available.
- Implement physical distancing measures (e.g., reducing occupancy (staggered schedules, use of alternate
- spaces), installation of partitions/physical barriers, cancelling large gatherings/events, maintaining defined cohorts).
- Implement source control through wearing masks.

ALL RISK LEVELS

- Keep abreast of NJDOE and NJDOH COVID-19 guidance and surveillance indicators.
- Exchange after-hours contact information with your local health department.

Stay Home When Sick or if Exposed to COVID-19

Educate staff, students, and their families about when they should stay home and when they should return to school. Students and staff should stay home if they have:

- Tested positive (viral test) for COVID-19
- COVID-19 compatible symptoms
- Potential exposure to COVID-19:
    - Close contact with a person with COVID-19 in the past 14 days.
    - Travelled to an area with high levels of COVID-19 transmission in the past 14 days:
        - NJ travel advisory list: https://covid19.nj.gov/faqs/nj-information/travel-information/which-states-are-on-the-travel-advisory-list-are-there-travel-restrictions-to-or-from-new-jersey
        - International travel advisory: https://www.cdc.gov/coronavirus/2019-ncov/travelers/after-travel-precautions.html

Siblings of a student who has symptoms and meets COVID-19 Exclusion Criteria should be excluded from school until the symptomatic individual receives a negative test result. If the symptomatic individual tests positive, the sibling will need to self-quarantine.

Students and staff can consult with local public health authorities and refer to CDC guidance on when it is appropriate to return to work or school:

- If they have been sick with COVID-19
- If they have recently had a close contact with a person with COVID-19

Maintain Social & Physical Distancing and Small-Group Cohorting

The more people a student or staff member interacts with, and the longer that interaction, the higher the risk of COVID-19 spread.

The risk of COVID-19 transmission is lower when:

- There are small, in-person classes, activities, and events.
- Students remain at least 6 feet apart and do not share objects (e.g., hybrid virtual and in-person class structures, or staggered/rotated scheduling to accommodate smaller class sizes).
- Groups of students stay together and are with the same teacher throughout the school day and groups do not intermingle.

The risk of COVID-19 transmission is higher when:

- There are full sized, in-person classes, activities, and events.
- Students are not spaced apart, share classroom materials or supplies, and intermingle between classes and activities.

Refer to New Jersey Department of Education (NJDOE)'s "The Road Back: Restart and Recovery Plan for Education" for guidance / requirements on social and physical distancing and on small-group cohorting.

School Sports:

The more people a child or coach interacts with, the closer the physical interaction, the more sharing of equipment there is by multiple players, and the longer that interaction, the higher the risk of COVID-19 spread. Therefore, risk of COVID-19 spread can be different, depending on the type of activity.

Under Executive Order 149, high school sports under the jurisdiction of the NJSIAA may resume only in accordance with reopening protocols issued by NJSIAA. Additional guidance for youth sports can be found at:

- NJDOH Guidance on Sports Activities
- CDC Considerations for Youth Sports

Such activities are also currently subject to the limitations outlined in Executive Order 168.

Choir and Music:

Due to potential increased risk of droplet transmission, physical distancing should be prioritized for wind instruments and singing. If it's safe and weather permits, consider moving class outdoors where air circulation is better than indoors and maintain at least 6 feet distance between students.

When students are not playing an instrument that requires the use of their mouths, they should wear a mask in music class (unless class is outdoors, and distance can be maintained).

The National Association for Music Education has developed Fall 2020 Guidance for Music Education for PreK-12 schools for music instruction for students of all ages and grade levels during the COVID-19 pandemic

Limit Use of Shared Supplies and Equipment

- Ensure adequate supplies (i.e. art supplies, equipment) to minimize sharing of high-touch materials or limit use of supplies and equipment by one group of students at a time and clean and disinfect between use.
- Avoid sharing electronic devices, toys, books, games or other learning aids. If items must be shared, clean and disinfect between uses.
- Discontinue use of shared items that cannot be cleaned and disinfected.

Hand Hygiene and Respiratory Etiquette

- Teach and reinforce handwashing with soap and water for at least 20 seconds and increase monitoring of students and staff.
  - If soap and water are not readily available, hand sanitizer that contains at least 60% alcohol can be used (for staff and older children who can safely use hand sanitizer).

- Encourage students and staff to cover coughs and sneezes with a tissue if not wearing a mask.
  - Used tissues should be thrown in the trash and hand hygiene as outlined above should be performed immediately.
- Have adequate supplies including soap, hand sanitizer with at least 60 percent alcohol (for staff and older children who can safely use hand sanitizer), paper towels, tissues, and no-touch trash cans.
- Hand hygiene should take place:
  - Upon arrival at school.
  - Before and after meals and snacks.
  - After going to the bathroom.
  - Before leaving for the day.
  - After blowing nose, sneezing or coughing into tissue.
  - When hands are visibly soiled.
- Assist/observe young children to ensure proper handwashing.

Masks

Wearing masks is an important step to help slow the spread of COVID-19 when combined with everyday preventive actions and social distancing in public settings. CDC suggests that all school reopening plans address adherence to behaviors that prevent the spread of COVID-19. Information on the use of masks in schools is outlined in Guidance for K-12 School Administrators on the Use of Masks in Schools and Additional Considerations for the Use of Masks Among K12 Students. Masks must be worn by staff, students, and visitors in all situations except as delineated in Executive Order 175. This includes prior to boarding the school bus, while on the bus and until they are completely off the bus.

The following principles apply to the use of masks in schools:

- Schools should teach students how to correctly wear a mask and reinforce their use.
- Masks are not a substitute for social distancing. Information should be provided to staff and students on proper use, removal, and washing of masks.
  - Masks should be washed after every day of use and/or before being used again, or if visibly soiled or damp/wet.
  - Disposable face masks should be changed daily or when visibly soiled, damp or damaged.
  - Students and schools should have additional disposable or cloth masks available for students, teachers, and staff in case a back-up mask is needed (e.g. mask is soiled or lost during the day).
- Appropriate and consistent use of masks may be challenging for some students, teachers, and staff, including:
  - Students, teachers, and staff with severe asthma or other breathing difficulties.
  - Students, teachers, and staff with special educational or healthcare needs, including intellectual and developmental disabilities, mental health conditions, and sensory concerns or tactile sensitivity.

- For staff who are unable to wear a mask for health reasons such as those outlined above, schools may consider assigning other duties or locations to limit interaction or allow teleworking.

For more information on masks in schools, please see NJDOE's School Reopening Frequently Asked Questions under the Face Coverings section as well as updated Road Back guidance.

Clear masks:

Clear masks that cover the nose and wrap securely around the face may be considered in certain circumstances, if they do not cause breathing difficulties or overheating for the wearer. Clear masks are not face shields. CDC does **not** recommend use of face shields for normal everyday activities or as a substitute for masks because of a lack of evidence of their effectiveness for source control.

Teachers and staff who may consider using clear masks include:

- Those who interact with students or staff who are deaf or hard of hearing, per the Individuals with Disabilities Education Act.
- Teachers of young students learning to read.
- Teachers of students in English as a Second Language classes.
- Teachers of students with disabilities.

Cleaning and Disinfection

Schools should follow standard procedures for routine cleaning and disinfecting with an EPA-registered product for use against SARS-CoV-2. This means **at least daily** disinfecting surfaces and objects that are touched often, such as desks, countertops, doorknobs, computer keyboards, hands-on learning items, faucet handles, phones and toys. Information on cleaning and disinfecting your facility can be found at https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html. Increasing the frequency of cleaning when there is an increase in respiratory or other seasonal illnesses is always a recommended prevention and control measure.

Cleaning and disinfecting after:

- **Notification of a case of COVID-19:**
  - As long as routine cleaning and disinfecting have been done regularly (at least daily), additional cleaning measures are not necessary unless the COVID-19 case is in school on the day school officials are notified of the positive test. Depending on when the person with COVID-19 was last on site, it may be difficult to know what areas they were in and what objects or surfaces they may have touched after they became sick.
  - If routine cleaning and disinfection have not been performed at least daily, or if the COVID-19 case is in school the day school officials are notified, close off areas used by the COVID-19 case (e.g. offices, bathrooms, classrooms, and common areas), open outside doors and windows to increase air circulation in the area and wait 24 hours after the COVID-19 case was last in school before cleaning and disinfection. If it has been

more than 7 days since the COVID-19 case was at school, additional cleaning and disinfection is not necessary.

- Cleaning staff should clean and disinfect all areas used by the ill person such as offices, classrooms, bathrooms, common areas, and shared electronic equipment (like tablets, touch screens, keyboards, remote controls), focusing especially on frequently touched surfaces.
- Once area has been appropriately disinfected, it can be opened for use.

- **An individual becomes ill with COVID symptoms and meets COVID-19 exclusion criteria while in school (refer to COVID-19 Regional Risk Matrix):**
  - Immediately close off areas used by the person who is sick with COVID-19 symptoms (e.g. offices, bathrooms, classrooms, and common areas), open outside doors and windows to increase air circulation in the area and wait 24 hours before cleaning and disinfection.
  - Cleaning staff should clean and disinfect all areas used by the ill person such as offices, classrooms, bathrooms, common areas, and shared electronic equipment (like tablets, touch screens, keyboards, remote controls), focusing especially on frequently touched surfaces.
    - Once area has been appropriately disinfected, it can be opened for use.

Symptom Screening

Although CDC **does not** recommend universal symptom screening (screening all students grades K-12) be conducted by schools, **NJDOH does recommend that schools have a policy for daily symptom screening for students and staff**. CDC has outlined considerations for schools who plan to implement on site screenings. On site screening upon arrival should include symptoms listed below. Schools should follow DOE recommendations on children who are found symptomatic upon screening. See Appendix 1 for a sample parental screening tool.

Parents/caregivers should be strongly encouraged to monitor their children for signs of illness every day as they are the front line for assessing illness in their children. Students who are sick should **not** attend school in-person. Schools are encouraged to strictly enforce exclusion criteria for both students and staff.

Schools should consider:

- Providing parent education about the importance of monitoring symptoms and staying home while ill through school or district messaging.
- Having a plan to screen students if not screened by parents prior to arrival.
- Using existing outreach systems to provide reminders to staff and families to check for symptoms before leaving for school.

Schools should provide clear and accessible directions to parents/caregivers and students for reporting symptoms and reasons for absences.

Schools should implement a plan to screen teachers and staff before or upon arrival at school. Schools should follow CDC's Interim Guidance for Businesses and Employers Responding to Coronavirus Disease 2019 for information on symptom screening for teachers and staff.

Preparing for Illness

Schools should ensure that procedures are in place to identify and respond to when a student or staff member becomes ill with COVID-19 symptoms.

- Closely monitor daily reports of staff and student attendance/absence and identify when persons are out with COVID-19 symptoms.
- Establish procedures for safely transporting anyone who is sick to their home or to a healthcare facility. If a school calls an ambulance or transports someone to a hospital, alert them beforehand that the person may have COVID-19.
- Designate an area or room away from others to isolate individuals who become ill with COVID-19 symptoms while at school.
    - Consider an area separate from the nurse's office so the nurse's office can be used for routine visits such as medication administration, injuries, and non COVID-19 related visits.
    - Ensure there is enough space for multiple people placed at least 6 feet apart.
    - Ensure that hygiene supplies are available, including additional cloth masks, facial tissues, and alcohol-based hand sanitizer.
    - School nurses should use Standard and Transmission-Based Precautions based on the care and tasks required.
    - Staff assigned to supervise students waiting to be picked up do not need to be healthcare personnel but should follow social distancing guidelines.

COVID-19 Symptoms

While some children and infants have been sick with COVID-19, adults make up most of the known cases to date. Early research suggests that fewer children than adults with COVID-19 get a fever, cough, or shortness of breath. Few children with COVID-19 have had to be hospitalized. However, severe illness has been reported in children, most often in infants less than one year of age.

Some children have developed multisystem inflammatory syndrome (**MIS-C**). Currently, information about this syndrome is limited.

According to the CDC, children do not seem to be at higher risk for getting COVID-19. However, some people, including children with special health care needs, may be at higher risk. Those at increased risk include:

- Older adults
- People who have serious chronic medical conditions like:
    - Cancer
    - Chronic kidney disease
    - COPD

- o   Immunocompromised state from solid organ transplant
- o   Obesity (body mass index of 30 or higher)
- o   Serious heart conditions, such as heart failure, coronary artery disease, or cardiomyopathies
- o   Sickle cell disease
- o   Type 2 diabetes

Signs and symptoms of COVID-19 in children may be similar to those of common viral respiratory infections or other childhood illnesses. The overlap between COVID-19 symptoms and other common illnesses means that many people with symptoms of COVID-19 may actually be ill with something else. This is even more likely in young children, who typically have multiple viral illnesses each year. Individuals with COVID-19 have had a wide range of symptoms reported – ranging from mild to severe illness. There is not a single symptom that is uniquely predictive of a COVID-19 diagnosis so if suspected, a viral test is the only way to confirm that someone has a current COVID-19 infection. Symptoms may appear 2-14 days after exposure to the virus and include the following:

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

Symptom Based Exclusion for Individuals with COVID-19 Compatible Symptoms:

Parents should not send students to school when sick. School staff should have plans to isolate students with overt symptoms of any infectious disease that develop during the school day. For school settings, NJDOH recommends that students with the following symptoms be promptly isolated from others and excluded from school:

- At least **two** of the following symptoms: fever (measure or subjective), chills, rigors (shivers), myalgia (muscle aches), headache, sore throat, nausea or vomiting, diarrhea, fatigue, congestion or runny nose; **OR**
- At least **one** of the following symptoms: cough, shortness of breath, difficulty breathing, new olfactory disorder, new taste disorder.

When Illness Occurs Within the School Setting

Children and staff with COVID-19 symptoms should be placed away from others and asked to wear a mask until they can be sent home. Per state policy, all students' (age 2 and older) noses and mouths should be covered with a mask. If a mask is not tolerated by the ill student or staff member due to their illness, other staff should be sure to adhere to the universal mask policy and follow social distancing guidelines (6 ft. away).

- Ask ill student (or parent) and staff whether they have had potential exposure to COVID-19 in the past 14 days:
    - Close contact with a person with COVID-19.
    - Travel to an area with a high level of COVID-19 transmission
        - NJ travel advisory list: https://covid19.nj.gov/faqs/nj-information/travel-information/which-states-are-on-the-travel-advisory-list-are-there-travel-restrictions-to-or-from-new-jersey
        - International travel advisory: https://www.cdc.gov/coronavirus/2019-ncov/travelers/after-travel-precautions.html
- Individuals should be sent home and referred to a healthcare provider. Persons with COVID-19 symptoms should undergo COVID-19 testing.
    - If COVID-19 risk is low (or COVID-19 Regional Risk Matrix, green), ill individuals without potential exposure to COVID-19 should follow the NJDOH School Exclusion List. No public health notification is needed UNLESS there is an unusual increase in the number of persons who are ill (over normal levels), which might indicate an outbreak.
    - If ill students have potential COVID-19 exposure OR if COVID-19 risk is moderate or high (COVID-19 Regional Risk Matrix, yellow or orange), they should be excluded according to the COVID-19 Exclusion Criteria.
- Schools should notify LHDs when students or staff:
    - Are ill and have potential COVID-19 exposure;
    - Are ill when COVID-19 risk level is high (orange); OR
    - When they see an increase in the number of persons with compatible symptoms.
- Schools should be prepared to provide the following information when consulting with the LHD:
    - Contact information for the ill persons;
    - The date the ill person developed symptoms, tested positive for COVID-19 (if known), and was last in the building;
    - Types of interactions (close contacts, length of contact) the person may have had with other persons in the building or in other locations;
    - Names, addresses, and telephone numbers for ill person's close contacts in the school;
    - Any other information to assist with the determination of next steps.
- Immediately close off areas (e.g. offices, bathrooms, classrooms, and common areas), used by the person who is sick with COVID-19 compatible symptoms, open outside doors and windows to increase air circulation in the area and wait 24 hours before you clean or disinfect. Clean and disinfect all areas used by the person who is sick as outlined in cleaning and disinfection section, including isolation area. Once area has been appropriately disinfected, it can be opened for use.

When Someone Tests Positive for COVID-19

Schools should ensure that parents and staff notify school authorities if students or staff test positive for COVID-19. Schools should notify the LHD and provide the following information, where available:

- Contact information for the person(s) who tested positive for COVID-19;
- The date the COVID-19 positive person developed symptoms (if applicable), tested positive for COVID-19 (if known), and was last in the building;
- Types of interactions (close contacts, length of contact) the person may have had with other persons in the building or in other locations;
- Names, addresses, and telephone numbers for positive person's close contacts in the school;
- Any other information to assist with the determination of next steps.

As long as routine cleaning and disinfecting have been done regularly (at least daily), additional cleaning measures are not necessary unless the COVID-19 case is in school on the day school officials are notified of the positive test. Notify the school community as per school protocol.

COVID-19 Illness and Test Result Scenarios

COVID-19 exclusion criteria: Ill individuals with COVID-19 compatible symptoms or individuals who tested positive for COVID-19 should stay home until at least 10 days have passed since symptom onset and at least 24 hours have passed after resolution of fever without fever reducing medications and improvement in symptoms. Persons who test positive for COVID-19, but who are asymptomatic should stay home for 10 days from the positive test result.

LHDs should use the COVID-19 Exclusion Table when providing guidance for school exclusion based on the level of COVID-19 risk in their region.

COVID-19 Exclusion Table: *Exclusion criteria for staff, students and close contacts*

	Low Risk	Moderate Risk	High Risk	Very High Risk
COVID-19 positive (viral test), symptomatic or asymptomatic	Exclude according to COVID-19 exclusion criteria Work with local health department to identify and exclude close contacts for 14 days from last exposure	Exclude according to COVID-19 exclusion criteria Work with local health department to identify and exclude close contacts for 14 days from last exposure	Exclude according to COVID-19 exclusion criteria Work with local health department to identify and exclude close contacts for 14 days from last exposure	Not Applicable (remote learning)
COVID-19 symptoms but not tested for COVID-19	If no potential exposure to COVID-19 in the last 14 days, individual can follow NJDOH School Exclusion List If person has potential exposure to COVID-19 in the last 14 days, exclude according to COVID-19 exclusion criteria	Exclude according to COVID-19 exclusion criteria	Exclude according to COVID-19 exclusion criteria Work with local health department to identify and exclude close contacts for 14 days from last exposure, or until symptomatic individual tests negative for COVID-19	
COVID-19 symptoms and negative COVID-19 test (viral test)	Exclude individual through 24 hours after their fever has ended without the use of fever reducing medications and other symptoms improve	Exclude individual through 24 hours after their fever has ended without the use of fever reducing medications and other symptoms improve	Exclude individual through 24 hours after their fever has ended without the use of fever reducing medications and other symptoms improve	
Close contact Of staff or student with COVID-19 *or to someone who has COVID-19 compatible symptoms (high risk level only) **	Close contacts of a COVID-19 case should be excluded through 14 days from date of last contact	Close contacts of a COVID-19 case should be excluded through 14 days from date of last contact	Close contacts of a COVID-19 case should be excluded through 14 days from date of last contact Close contacts of an individual with **COVID-19 compatible symptoms** should be excluded through 14 days from date of last contact, or until ill individual tests negative for COVID-19	

*Note: Siblings of a student who has symptoms and meets COVID-19 Exclusion Criteria should be excluded from school until the symptomatic individual receives a negative test result. If the symptomatic individual tests positive, the sibling will need to self-quarantine.

Outbreaks

While schools must report single cases to their local health department, LHDs should work with schools to determine if there is an outbreak. An outbreak in school settings is defined as two or more laboratory-confirmed (by RT-PCR or antigen) COVID-19 cases among students or staff with onsets within a 14-day period, who are epidemiologically linked[1], do not share a household, and were not identified as close contacts of each other in another setting during standard case investigation or contact tracing.

Contact Tracing and Notification

Contact tracing is a strategy used to determine the source of an infection and how it is spreading. Finding people who are close contacts to a person who has tested positive for COVID-19, and therefore at higher risk of becoming infected themselves, can help prevent further spread of the virus.

Close contact is defined as being within 6 feet of someone with suspected or known COVID-19 for 15 or more minutes during a 24-hour period. In some school situations, it may be difficult to determine whether individuals have met this criterion and an entire cohort, classroom, or other group may need to be considered exposed, particularly if people have spent time together indoors.

In conjunction with the LHD, school staff should help identify close contacts of positive COVID-19 cases in the school.

- As with any other communicable disease outbreak, schools will assist in identifying the close contacts within the school and communicating this information back to the LHD.
- With guidance from the LHD, schools will be responsible for notifying parents and staff of the close contact exposure and exclusion requirements while maintaining confidentiality. For sample notification letters see Appendix 2.
- The LHD contact tracing team will notify and interview the close contacts identified by the school and reinforce the exclusion requirements.

A contact tracing team from the local health department or the NJDOH calls anyone who has tested positive for COVID-19 or is identified as a close contact of a case. They ask the person who tested positive for COVID-19 questions about their activities within a certain timeframe to help identify where they may have been exposed, and anyone else they may have had close contact with while infectious. Those contacts might include family members, caregivers, co-workers or healthcare providers. Close contacts of a known COVID-19 case are asked about symptoms, referred to resources for testing, and given recommendations to isolate at home (if symptomatic) or if asymptomatic, to stay home and monitor their health for 14 days from the last exposure/close contact.

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[1] Health departments should verify to the best extent possible that cases were present in the same setting during the same time period (e.g., same classroom, school event, school-based extracurricular activity, school transportation) within 14 days prior to onset date (if symptomatic) or specimen collection date for the first specimen that tested positive (if asymptomatic or onset date is unknown) and that there is no other more likely source of exposure (e.g., household or close contact to a confirmed case outside of educational setting).

Closure

The COVID-19 Regional Risk Matrix is one tool that can inform the decision-making process for school districts when considering when remote learning might be indicated. Local circumstances should be considered when making decisions impacting specific school districts and schools. Many factors would need to be considered when deciding to close schools such as whether all close contacts of cases can be identified and excluded from school, and the distribution of cases within the school. **Closure is a local decision that should be made by school administrators in consultation with local public health. While it is not possible to account for every scenario that schools may encounter over the course of the school year, the following scenarios may help inform the decision for when schools should temporarily close.**

SCENARIO	CLOSURE
1 case in the school	School remains open*; students and staff in close contact with positive case are excluded from school for 14 days.
2 or more cases in the same classroom (outbreak limited to one cohort)	School remains open*; students and staff in close contact with positive case are excluded from school for 14 days. Recommendations for whether the entire classroom would be considered exposed will be based on public health investigation.
2 or more cases within 14 days, but are linked to an exposure outside the school setting (e.g. in same household, exposed at the same event outside of school)	School remains open*; students and staff in close contact with positive cases are excluded from school for 14 days.
2 or more cases within 14 days, linked together by some activity in school, but who are in different classrooms (outbreak involving multiple cohorts)	Recommendations for whether school closure is indicated will be based on investigation by local health department.
A significant community outbreak is occurring or has recently occurred (e.g., large event or large local employer) and is impacting multiple staff, students, and families served by the school community	Consider closing school for 14 days, based on investigation by local health department.
2 or more cases are identified within 14 days that occur across multiple classrooms, are not linked to exposures outside the school setting, and a clear connection between cases cannot be easily identified (outbreak involving multiple cohorts)	Consider closing school for 14 days, based on investigation by local health department.
Very high risk of community transmission (refer to COVID-19 Regional Risk Level Matrix)	Close school until COVID-19 transmission decreases.

* Note: A temporary closure may also be considered for a period of 2-5 days if a student or staff member attended school while potentially infectious, before being confirmed as having COVID-19. This short-term dismissal allows time for local health officials to gain a better understanding of the COVID-19 situation impacting the school and perform contact tracing.

Period of closure: After switching to remote learning due to high levels of viral transmission in the school or local geographic community, districts or schools should wait a minimum of 14 days before bringing any students back for in-person learning. This timeframe is sufficient so that most people in the

school community who will develop symptoms as a result of a school exposure could be identified and self-isolate, as appropriate.

Testing

Universal SARS-CoV-2 testing of all students and staff in school settings has not been systematically studied. It is not known if testing in school settings provides any additional reduction in person-to-person transmission of the virus beyond what would be expected with implementation of other preventive measures (e.g., social distancing, wearing cloth face coverings, hand washing, enhanced cleaning and disinfecting). **Therefore, CDC does not recommend universal testing of all asymptomatic students and staff, and NJDOH concurs with this recommendation.**

NJDOH recommends that schools work with their local health departments to identify rapid viral testing options in their community for the testing of symptomatic individuals. Having access to rapid COVID-19 testing for ill students and staff can reduce unnecessary exclusion of ill persons and their contacts and minimize unnecessary disruptions of the educational process.

COVID-19 Resources

CDC
School and Childcare Programs
CDC Activities and Initiatives Supporting the COVID-19 Response and the President's Plan for Opening America Up Again
Preparing K-12 School Administrators for a Safe Return to School in Fall 2020
Interim Considerations for K-12 School Administrators for SARS-CoV-2 Testing
Screening K-12 Students for Symptoms of COVID-19: Limitations and Considerations
Guidance for K-12 School Administrators on the Use of Cloth Face Coverings in Schools
Considerations for Youth Sports
CDC Cleaning and Disinfecting Your Facility
CDC Information on Cleaning School Buses
Multisystem Inflammatory Syndrome (MIS-C)
School Decision-Making Tool for Parents, Caregivers, and Guardians

NJDOH
NJDOH COVID Information for Schools
Maintaining Healthy Indoor Air Quality in Public School Buildings
NJDOH General Guidelines for the Prevention and Control of Outbreaks in School Settings
New Jersey COVID-19 Information Hub

OTHER RESOURCES
COVID-19 Planning Considerations: Guidance for School Re-entry AAP
Healthy Children.Org COVID-19

Appendix 1: Sample COVID-19 School Screening Tool

<School Letterhead in Header>

COVID-19 Daily Screening for Students

Name _____   Date _____

Parents/Guardians: Please complete this short check each morning and report your child's information per your school's reporting instructions.

Section 1: Symptoms

Any of the symptoms below could indicate a COVID-19 infection in children and may put your child at risk for spreading illness to others. Please note that this list does not include all possible symptoms and children with COVID-19 may experience any, all, or none of these symptoms. Please check your child daily for these symptoms:

Column A

☐	Fever (measured or subjective)
☐	Chills
☐	Rigors (shivers)
☐	Myalgia (muscle aches)
☐	Headache
☐	Sore Throat
☐	Nausea or Vomiting
☐	Diarrhea
☐	Fatigue
☐	Congestion or runny nose

Column B

☐	Cough
☐	Shortness of Breath
☐	Difficulty Breathing
☐	New loss of smell
☐	New loss of taste

Students who are sick (e.g. fever, vomiting, diarrhea) should **not** attend school in-person. If **TWO OR MORE of the fields in Column A are checked off** OR **AT LEAST ONE field in column B is checked off**, please keep your child home and notify the school for further instructions.

Section 2: Close Contact/Potential Exposure

Please verify if in the last 14 days:

☐	Your child has had close contact (within 6 feet of an infected person for 15 or more minutes during a 24-hour period) with a person with COVID-19
☐	Someone in your household is diagnosed with or being tested for COVID-19
☐	Your child has traveled to an area of high community transmission.

If **ANY of the fields in Section 2 are checked off**, your child should remain home for 14 days from the last date of exposure (if child is a close contact of a COVID-19 case) or date of return to New Jersey. Contact your child's healthcare provider or your local health department for further guidance.

Appendix 2: Sample COVID-19 School Notification Template, Positive Case in School
<School/Facility Letterhead in Header>

[Date]

Dear Parents/Guardians:

This letter is to inform you that an individual at [school/childcare center] has been identified as a Coronavirus Disease 2019 (COVID-19) case. The District is coordinating closely with public health officials and following CDC, state, and local health department guidance in order to assure the health and safety of our community.

Cleaning and disinfecting of all exposed areas has been completed. The school is also taking precautions to prevent the introduction and spread of viruses and other germs and is cleaning frequently touched surfaces daily. [Insert any details on scheduling changes, if applicable.] The status of this situation is fluid, and we are monitoring it closely.

We understand the level of concern regarding COVID-19. We encourage parents and students to continue following the Centers for Disease Control & Prevention promoted safeguards, such as:

- Staying home when you are sick;
- Washing hands often with soap for at least 20 seconds;
- Covering coughs and sneezes and properly disposing of tissues;
- Limiting close contact with people who are sick and not sharing food, drinks and utensils;
- Practicing social distancing (staying at least 6 feet apart);
- Wearing a mask while in school; and
- Continuing to monitor your health for symptoms.

As always, we appreciate our community's support and cooperation. You can assist us by remaining vigilant but sensible in your approach to dealing with this health concern. Should you have any questions about this situation, please feel free to contact [contact person] at [phone number]. Below are some resources that might be helpful.

RESOURCES

a. NJDOH COVID-19 Information for Communities and the General Public:
   https://www.nj.gov/health/cd/topics/covid2019_community.shtml
b. Get the Facts about Coronavirus: https://www.cdc.gov/coronavirus/2019-ncov/index.html
c. Symptoms of COVID-19: https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html
d. Testing: https://www.cdc.gov/coronavirus/2019-ncov/testing/index.html;
   https://covid19.nj.gov/pages/testing
e. How to Protect Yourself: https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/prevention.html
f. What to Do if You Are Sick: https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/steps-when-sick.html

Sincerely,

Administrator's name

Appendix 2: Sample COVID-19 School Notification Template, Close Contact of Case in School

<School/Facility Letterhead in Header>

[Date]

Dear Parents/Guardians:

This letter is to inform you that your child has been identified as a **close contact** of a case of Coronavirus Disease 2019 (COVID-19) that occurred at [school/childcare center]. A close contact is someone who was within 6 feet of a COVID-19 case for <mark>15 or more minutes during a 24-hour period</mark>.

Due to this exposure, your child will need to be kept home from school through [14 days from date of last exposure]. We ask that you be on the lookout for the signs and symptoms of COVID-19 in your child through that date. Symptoms can include but are not limited to fever, cough, shortness of breath, sore throat, headache, diarrhea, vomiting and abdominal pain. Not everyone will get all these symptoms. Your local health department will also be in touch with additional information. <mark>When the local health department calls, please answer the call and provide any requested information to help slow the spread of COVID-19 in our community.</mark>

If you believe your child may have COVID-19, contact his or her primary care doctor for directions. Most people who are mildly or moderately ill with COVID-19 will be able to safely recover at home.

Cleaning and disinfecting of all exposed areas has been completed. The school is also taking precautions to prevent the introduction and spread of viruses and other germs and is cleaning frequently touched surfaces daily. [Insert any details on scheduling changes, if applicable.] The status of this situation is fluid, and we are monitoring it closely.

As always, we appreciate our community's support and cooperation. You can assist us by remaining vigilant but sensible in your approach to dealing with this health concern. Should you have any questions about this situation, please feel free to contact [contact person] at [phone number]. Below are some resources that might be helpful.

RESOURCES

a. NJDOH COVID-19 Information for Communities and the General Public: https://www.nj.gov/health/cd/topics/covid2019_community.shtml
b. Get the Facts about Coronavirus: https://www.cdc.gov/coronavirus/2019-ncov/index.html
c. Symptoms of COVID-19: https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html
d. Testing: https://www.cdc.gov/coronavirus/2019-ncov/testing/index.html; https://covid19.nj.gov/pages/testing
e. How to Protect Yourself: https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/prevention.html
f. What to Do if You Are Sick: https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/steps-when-sick.html

Sincerely,

Administrator's name