San Mateo County Coalition for Safe Schools and Communities

Pandemic Recovery Framework

August 23, 2021

The Framework Will Continue to Be Updated as New Information Becomes Available
Table of Contents

About the Pandemic Recovery Framework .................................................. 3
Vaccination ................................................................. 4
Vaccination Verification ......................................................... 4
Masks ........................................................................... 5
Physical Distancing ................................................................. 8
Gatherings ...................................................................... 8
Ventilation ....................................................................... 8
Stay Home When Sick and Get Tested ................................................. 10
When Students or Staff are Sick at School ............................................. 11
Hand Hygiene ................................................................... 11
Cleaning .......................................................................... 12
Food and Meals .................................................................. 12
Cohorting ......................................................................... 13
Training ............................................................................ 13
Plans ................................................................................ 13
Visitors ............................................................................ 14
Extracurricular and Athletic Activities ............................................... 15
Travel .............................................................................. 16
Childcare .......................................................................... 17
Screening Testing.................................................................. 17
Response Testing and Quarantine ....................................................... 20
Isolation ............................................................................ 24
Case Reporting and Contact Tracing .................................................. 24
Outbreaks .......................................................................... 25
Appendix ........................................................................... 26
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.

Updated from July 30 Version

Updated to reflect the San Mateo County Public Health Order (8/2/21) concerning face coverings in workplaces and public settings, CDPH’s FAQ (8/6/21) addressing documentation related to mask exemptions, the State Public Health Officer order (8/11/21) addressing required vaccination verification and testing of school workers and volunteers, and the CDPH’s guidance (8/17/21) addressing testing for vaccinated individuals.
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 ADA), 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.

**Masks**

On August 2, 2021, the San Mateo County Health Officer issued an order requiring masks to be worn regardless of vaccination status in all indoor public settings, venues, gatherings, and workplaces, including schools. The order exempts people from wearing masks when working alone in a closed office or room, or when actively eating and/or drinking. This order is more restrictive than the CDPH mask guidance issued in July 2021. Universal masking inside schools addresses concerns about variants and provides extra protection for students who are not vaccinated. It also made it possible for CDPH to lift physical distancing requirements, which had been a key barrier to all students returning to in-person learning on a full-time basis last year.

CDPH will continue to assess conditions and update its own mask requirements.

**Masks Indoors**

- All TK–12 students are required to mask indoors except those who are exempt based on CDPH face mask guidance. Exemptions include:
- Persons younger than two years old.
- Persons with a medical condition, mental health condition, or disability that prevents wearing a mask. This includes persons with a medical condition for whom wearing a mask could obstruct breathing or who are unconscious, incapacitated, or otherwise unable to remove a mask without assistance.
- Persons who are hearing impaired, or when communicating with a person who is hearing impaired, the ability to see the mouth is essential for communication.
- Persons for whom wearing a mask would create a risk to the person related to their work, as determined by local, state, or federal regulators or workplace safety guidelines.

- Adults in TK–12 school settings are required to mask.
  - Assessing for exemption due to a medical condition, mental health condition, disability that prevents wearing a mask, or hearing impairment is a medical determination and therefore must be made by a physician, nurse practitioner, or other licensed medical professional practicing under the license of a physician. Self-attestation and parental attestation for mask exemptions due to the aforementioned conditions do not constitute medical determinations. ([CDPH FAQ](https://www.cdph.ca.gov/Programs/CID/DCDC/TIC/FAQS/default.htm)).

- Persons exempted from wearing a mask due to a medical condition, must 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 provide a mask to students who fail to bring one.

- Schools must develop and implement local protocols to enforce the mask requirements.

- Schools should offer alternative educational opportunities for students who are excluded from campus because they will not wear a mask. Note: Public schools should be aware of the requirements in **AB 130**, which authorizes independent study for a public school pupil whose health would be put at risk by in-person instruction, as determined by the parent or guardian.

- In limited situations where a mask cannot be used for 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](https://www.cdph.ca.gov/Programs/CID/DCDC/TIC/FAQS/default.htm)).
can be used instead of a mask while in the classroom as long as the wearer maintains physical distance from others. Staff must return to wearing a mask outside of the classroom.

- No disciplinary action should be taken against a student who does not have a mask as described in the U.S. Department of Education COVID-19 Handbook, Volume 1.
- Students who participate in indoor sports and other higher-risk activities must wear masks and also maintain physical distance as much as possible.
- If students are participating in a school event or being supervised by school staff, face mask guidance for K–12 settings must be followed regardless of location.

**Masks Outdoors**

- Masks are optional outdoors for all in TK–12 school settings. However, particularly in areas of substantial to high transmission, 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 who are not fully vaccinated.

**Masks on Buses**

- Passengers and drivers must 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.

**Additional Mask Guidance from Cal/OSHA**

- According to the San Mateo County Public Health Officer, his August 2nd mask order takes precedence over the Emergency Temporary Standards (ETS) from Cal/OSHA.
- Employees are not required to wear masks when outdoors regardless of vaccination status except during outbreaks.
- Employees are explicitly allowed to wear a mask without fear of retaliation from employers.
- Employees who are not fully vaccinated may request respirators for voluntary use from their employers at no cost and without fear of retaliation from their employers.
In outbreaks, all employees must wear masks indoors and outdoors when six-feet physical distancing cannot be maintained, regardless of vaccination status.

Physical Distancing

- The CDPH does not include any recommendations concerning physical distancing in schools and reports that, “Recent evidence indicates that in-person instruction can occur safely without minimum physical distancing requirements when other mitigation strategies (e.g., masking) are implemented.”
- 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 classrooms or 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

CDPH does not address gatherings in its guidance. However, the San Mateo County Public Health Officer’s August 2nd universal mask requirement applies to indoor settings, venues, gatherings, and workplaces. Schools should also consider how they might limit the size of gatherings, maintain distance among participants, and require masks even if events are outdoors and participants are vaccinated.

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.

**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, which can be done by following CDPH and CDC recommendations, including:

- All individuals should wear masks—this practice 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.

- 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., Strep–tococcal 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.

<table>
<thead>
<tr>
<th>Common Symptoms of COVID-19 (CDPH)</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Headache</td>
</tr>
<tr>
<td>- Fever or chills</td>
</tr>
<tr>
<td>- Cough</td>
</tr>
<tr>
<td>- Shortness of breath or difficulty breathing</td>
</tr>
<tr>
<td>- Fatigue (tiredness)</td>
</tr>
<tr>
<td>- Muscle or body aches</td>
</tr>
<tr>
<td>- New loss of taste or smell</td>
</tr>
<tr>
<td>- Sore throat</td>
</tr>
<tr>
<td>- Congestion or runny nose</td>
</tr>
<tr>
<td>- Nausea or vomiting</td>
</tr>
<tr>
<td>- Diarrhea</td>
</tr>
</tbody>
</table>

**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

Maximize physical distance as much as possible while eating (especially indoors). Using additional spaces outside of the cafeteria for mealtime seating such as classrooms or the gymnasium can help facilitate distancing. Arrange for eating outdoors as much as feasible.

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.

Cohorting

The CDPH does not address cohorting in its 2021–22 guidance, except in reference to boarding schools. The CDC provides the following guidance on cohorting:

- Cohorting means keeping people together in a small group and having each group stay together throughout an entire day.
- Cohorting can be used to limit the number of students, teachers, and staff who come in contact with each other, especially when it is challenging to maintain physical distancing, such as among young children, and particularly in areas of moderate-to-high transmission levels.
- The use of cohorting can limit the spread of COVID-19 between cohorts but should not replace other prevention measures within each group.
- Cohorting people who are fully vaccinated and people who are not fully vaccinated into separate cohorts is not recommended.
- If a school determines it will organize around cohorting, it is their responsibility to ensure it is done in an equitable manner that does not perpetuate academic, racial, or other tracking, as described in the U.S. Department of Education COVID-19 Handbook, Volume 1.

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 page 4 on vaccination verification requirements and screening testing on page 17 of this framework.

CDPH also offers the following recommendations for visitors to campus:

- Schools should develop rules for visitors and family engagement activities.
- Schools should limit nonessential visitors, volunteers, and activities involving external groups or organizations with people who are not fully vaccinated, particularly in areas where there is moderate–to–high COVID-19 community transmission.
- 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.
- All visitors are required to wear masks while indoors on campus unless exempt.
- 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 not vaccinated individuals.

### Extracurricular and Athletic Activities

CDPH will be providing additional guidance for other supervised settings for TK–12 school-aged children and youth (including activities such as band and drama). This framework will be updated to reflect that guidance. CDPH policies related to extracurricular activities include:

- Students who are not vaccinated may not participate in extracurricular and athletic activities after an exposure.
- Students who are vaccinated and have been exposed do not require quarantine unless symptomatic.
- Students who are not vaccinated and have been exposed must quarantine for 10 full days for all extracurricular activities (e.g., at school, within the community settings).

The CDC makes the following recommendations related to extracurricular activities:

- Testing recommendations vary for low-, medium-, and high-risk sports and activities. See table in CDC guidance.
- Students who participate in indoor sports and other higher-risk activities must continue to wear masks and also maintain physical distance as much as possible.
- Coaches and school sports administrators should also consider specific sport-related risks for people who are not fully vaccinated:
Setting of the sporting event or activity. In general, the risk of COVID-19 transmission is lower when playing outdoors than in indoor settings. Consider the ability to maintain physical distancing in various settings at the sporting event (i.e., fields, benches/team areas, locker rooms, spectator viewing areas, spectator facilities/restrooms, etc.).

Physical closeness. Spread of COVID-19 is more likely to occur in sports that require sustained close contact (such as wrestling, hockey, football).

Number of people. Risk of spread of COVID-19 increases with higher numbers of athletes, spectators, teachers, and staff.

Level of intensity of activity. The risk of COVID-19 spread increases with the intensity of the sport.

Duration of time. The risk of COVID-19 spread increases the more time athletes, coaches, teachers, staff, and spectators spend in close proximity or in indoor group settings. This includes time spent traveling to/from sporting events, meetings, meals, and other settings related to the event.

Presence of people more likely to develop severe illness. People at increased risk of severe illness might need to take extra precautions.

- Testing at least once per week is recommended for high-risk sports and extracurricular activities (those that cannot be done outdoors) 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.
- If the school is not tracking COVID-19 vaccination status of participants, screening testing should be encouraged.

Schools may consider requiring vaccination for participation in extracurricular activities, sports, etc.

**Travel**

Please see the table below for CDC recommendations and requirements concerning travel. Schools may also want to share the CDPH’s [flyer concerning travel](#) with families and staff.
## Travel Recommendations and Requirements

<table>
<thead>
<tr>
<th>Domestic Travel</th>
<th>Not Vaccinated</th>
<th>Fully Vaccinated</th>
</tr>
</thead>
<tbody>
<tr>
<td>Get tested 1-3 days before travel</td>
<td>✔️</td>
<td></td>
</tr>
<tr>
<td>Get tested 3-5 days after travel and self-quarantine for 7 days. Self-quarantine for 10 days if you don’t get tested.</td>
<td>✔️</td>
<td></td>
</tr>
<tr>
<td>Self-monitor for symptoms</td>
<td>✔️</td>
<td>✔️</td>
</tr>
<tr>
<td>Wear a mask and take other precautions during travel</td>
<td>✔️</td>
<td>✔️</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>International Travel</th>
<th>Not Vaccinated</th>
<th>Fully Vaccinated</th>
</tr>
</thead>
<tbody>
<tr>
<td>Get tested 1-3 days before traveling out of the US</td>
<td>✔️</td>
<td></td>
</tr>
<tr>
<td>Mandatory test required before flying to US</td>
<td>✔️</td>
<td>✔️</td>
</tr>
<tr>
<td>Get tested 3-5 days after travel</td>
<td>✔️</td>
<td>✔️</td>
</tr>
<tr>
<td>Self-quarantine after travel for 7 days with a negative test or 10 days without test</td>
<td>✔️</td>
<td></td>
</tr>
<tr>
<td>Self-monitor for symptoms</td>
<td>✔️</td>
<td>✔️</td>
</tr>
<tr>
<td>Wear a mask and take other precautions during travel</td>
<td>✔️</td>
<td>✔️</td>
</tr>
</tbody>
</table>

## Childcare

Childcare settings and providers remain subject to separate CDPH guidance.

## Screening Testing

According to the August 11, 2021, health order, the schools and district 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 have passed since individual received their final dose of COVID–19 vaccine.

**Close Contact**: anyone who was within 0–6 feet of a Case for more than 15 minutes over a 24–hour period.

The State has developed a testing planning tool to help schools develop a testing strategy. The following is a summary of the testing goals schools might consider in developing their strategy. The testing planning tool also provides examples of the types of tests that might be used under each goal.

- Keeping Track of COVID–19 (lower case rates in the community) – periodic testing of a portion of unvaccinated asymptomatic staff and students to understand school rates of COVID–19.
- Preventing Outbreaks of New Cases via Screening (higher case rates or outbreaks in the community) – screening testing for all unvaccinated people at high frequency (weekly or twice weekly) in order to prevent in–school transmission and prevent an outbreak on campus.
- Responding to School Outbreaks (might happen at low or high community case rates) – testing unvaccinated close contacts in a school outbreak to find any potentially asymptomatic infectious individuals who should isolate at home to prevent infecting others.
- Helping Keep Kids in School (symptom testing and testing to modify quarantine) – testing students and staff with symptoms, and testing to modify quarantine for unvaccinated close contacts as described in the CDPH K–12 schools guidance.
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:

- People who are fully vaccinated do not need to participate in screening testing.
- Schools may consider testing a random sample of at least 10% of students who are not fully vaccinated or may conduct pooled testing for COVID-19.
- 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.

Response Testing and Quarantine

Testing and Quarantine of Vaccinated Close Contacts

Currently there is no duration limitation on these recommendations after individuals are fully vaccinated. See CDPH’s COVID-19 Public Health Recommendations for Fully Vaccinated People for additional information.

Recommendations for fully vaccinated close contacts include:

- Fully vaccinated close contacts should get tested if experiencing COVID-19 symptoms.
- Fully vaccinated close contacts and previously infected close contacts who are asymptomatic do not need to quarantine.
- Fully vaccinated close contacts who remain asymptomatic and do not need to quarantine should get tested 3–5 days after exposure.
- Fully vaccinated or previously infected close contacts should self-monitor for COVID-19 symptoms and strictly adhere to all recommended non-pharmaceutical interventions (e.g., wearing a mask, maintaining a distance of at least 6 feet from non-household members, frequently performing hand hygiene, avoiding crowds and poorly ventilated indoor spaces) for 14 days following the last date of exposure.
- If fully vaccinated people test positive for COVID-19, they should follow CDPH and local health department guidance regarding isolation and/or exclusion from high-risk settings.
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.

Testing and Quarantine of Unvaccinated Close Contacts

When All Parties Were Wearing a Mask

When all parties were wearing a mask in an indoor or outdoor school setting or school bus, students who are unvaccinated and are close contacts may undergo a modified 10-day quarantine and continue to attend school for in-person instruction if they:

- Are asymptomatic;
- Continue to appropriately mask, as required;
- Undergo at least twice weekly testing during the 10-day quarantine; and
- Continue to quarantine for all extracurricular activities at school, including sports, and activities within the community setting.

CDPH provides the following testing guidance for students in modified quarantine.

- Testing should begin immediately after exposure to someone with COVID-19. Subsequent testing should occur at least 3 days apart.

According to CDPH, students in modified quarantine:

- Are strongly encouraged to wear masks when outdoors.
- May use school buses, including buses operated by public and private school systems.
- May participate in all required instructional components of the school day, except activities where a mask cannot be worn, such as while playing certain musical instruments.
- May eat meals on campus using the food service recommendations provided in this framework.

Please note: Modified quarantine does not apply to teachers or other adults.
When One Party Was Not Wearing a Mask

When one party was not wearing a mask, those who remain asymptomatic may discontinue self-quarantine under the following conditions:

- Quarantine can end after Day 10 from the date of last exposure without testing; OR
- Quarantine can end after Day 7 if a diagnostic specimen is collected after Day 5 from the date of last exposure and tests negative.
- To discontinue quarantine before 14 days following last known exposure, asymptomatic close contacts must:
  - Continue daily self-monitoring for symptoms through Day 14 from last known exposure; AND
  - Follow all recommended non-pharmaceutical interventions (e.g., wearing a mask when around others, hand washing, avoiding crowds) through Day 14 from last known exposure.

If any symptoms develop during this 14-day period, the exposed person must immediately isolate, get tested, and contact their healthcare provider with any questions regarding their care.

Additional Requirements Concerning Employees Who Are Not Vaccinated

Per Cal/OSHA, employers must:

- Exclude employees who have COVID-19 symptoms and/or are not fully vaccinated and have had a close contact from the workplace and, if that close contact is work related, ensure continued wages.
- Offer COVID-19 testing at no cost during paid time to their employees who are not fully vaccinated and had potential exposure to COVID-19 in the workplace, and provide them with information on benefits.

Tests to Assess Status during Quarantine or to Exit Quarantine

- Any FDA-approved diagnostic test is acceptable for evaluation of an individual’s COVID-19 status. This includes antigen diagnostic tests and PCR diagnostic tests. PCR tests are preferred, but not required. See the CDPH school testing resources for more information.
COVID-19 Exposure at School (CDPH)

Vaccinated Close Contacts

Isolate until:
• at least 10 days have passed since symptoms first appeared and
• at least 24 hours have passed since the last fever without the use of fever-reducing medication and
• symptoms have improved

Unvaccinated Close Contacts

Asymptomatic

Isolate:
• per condition diagnosed by healthcare provider or
• until at least 24 hours have passed since the last fever without the use of fever-reducing medication and
• symptoms have improved

Both Parties Masked

Isolate until:
• at least 10 days have passed since symptoms first appeared and
• at least 24 hours have passed since the last fever without the use of fever-reducing medication and
• symptoms have improved

14-day quarantine (cannot test out)

No need for quarantine
• Get tested 3-5 days after exposure
• Monitor for symptoms

14-day quarantine

Yes

Student

End Quarantine After Day 7
For those who remain asymptomatic:
• After Day 5, get a COVID-19 test that shows a result of negative; and
• Continue daily self-monitoring for symptoms through Day 14 from last known exposure; and
• Follow all recommended non-pharmaceutical interventions (e.g., wearing a mask when around others, hand washing, avoiding crowds) through Day 14 from last known exposure.

Exposed asymptomatic people may end quarantine after Day 10 without a test.

No

Staff

End Quarantine After Day 10
For those who remain asymptomatic:
• Continue daily self-monitoring for symptoms through Day 14 from last known exposure; and
• Follow all recommended non-pharmaceutical interventions (e.g., wearing a mask when around others, hand washing, avoiding crowds) through Day 14 from last known exposure.
• Exposed asymptomatic people may end quarantine after Day 10 without a test.

COVID-19 Exposure at School (CDPH)
- Collection of diagnostic specimens for asymptomatic persons during quarantine may occur in schools, healthcare settings, or other locations supervised by school or healthcare personnel. Specimens may be processed at the point-of-care (POC) or in a laboratory.
- At this time, at-home testing is not recommended for evaluation of an individual’s status during quarantine.
- For persons in quarantine who experience symptoms, a negative result from an antigen test or POC molecular test results should be confirmed with a laboratory-based PCR test.

**Isolation**

For both vaccinated and unvaccinated persons, follow the [CDPH Isolation Guidance](#) for those diagnosed with COVID-19.

**Case Reporting and Contact Tracing**

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 CD Control as soon as practicable (within 24 hours) at COVID19_SchoolTeam@smcgov.org.
- The School/District COVID-19 Point Person and the assigned San Mateo County Health investigator will be in daily contact Monday – Friday, unless instructed otherwise by SMC CD Control.
- The District COVID-19 Point Person collects data from all schools and must complete a daily report for all new cases (a line list) and submit it via secure email to SMC CD Control daily by 10:00 a.m.
- 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.
- The District COVID-19 Point Person or Superintendent/Private School Head should notify SMCOE at info@smcoe.org.
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-feet physical distancing is required where feasible, both indoors and outdoors.
Appendix

- Self-Certification of COVID-19 Vaccination Status
- Vaccination Consent Form
- COVID-19 Testing Options

Communication Templates

- Additional Resources for Schools
- Case in School
- Exposed Students – Vaccinated
- Exposed Students – Unvaccinated, Class Not Fully Masked
- Exposed Students – Unvaccinated, Class Masked
- 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