

# **SANGAMON COUNTY DEPARTMENT OF PUBLIC HEALTH**

## **Guidance for Screening, Testing, Isolation/Quarantine and Return to School for Administrators, School Nurses and Staff Dealing with COVID-19**

The purpose of this document is to additionally provide guidance and help administrators, school nurses, and staff that help with screening. It describes symptoms and includes algorithms for screening at the entrance of schools, testing for COVID-19, and recommendations for isolation, quarantine, and return to school after quarantine. The decisions for quarantine and isolation vary. Procedures depend on the type of exposure, availability of a test result, optimal timing of the test, and presence/ absence of symptoms. The local health department and primary care physicians make the final decisions.

The exposure and risk assessment charts are for informational purposes. The communicable disease nurses at the health department will guide the decision for isolation and quarantine after consulting with the family and school officials.

This is a working document and will be updated frequently as the guidelines are available and updated from Illinois Department of Public health and Center for Disease Control. Guidance from IDPH and CDC continually evolve as further information about the pandemic develops.

**Prepared by the Medical Advisors of Sangamon County Department of Public Health with the help of experts from SIU School of Medicine and Community Public Health experts based on CDC, IDPH, ISBE Guidelines**

*Updated August 6, 2020*

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## **SCHOOL GUIDANCE FOR COVID-19 SCREENING, TESTING, ISOLATION/QUARANTINE**

### **SCREENING:**

Schools should encourage parents to screen at home and refrain from sending their children to school if they have a fever, if they have cough and runny nose, vomiting and diarrhea or new rash.

### **SCREENING AT THE ENTRANCE**

\*If there is a COVID19+ family member in the home, the student will be required to quarantine at home per guidelines below

#### **Positive Symptoms on Screening to Send a Student Home: Refer to Table 1 and Table 2**

- Temperature  $\geq 100.4$
- Fatigue
- Muscle or body aches
- Headache
- Shortness of breath
- Cough (that is not documented as asthma and/or allergies)
- Sore throat
- Congestion or runny nose
- New loss of sense of taste or smell
- Nausea
- Vomiting
- Diarrhea
- Abdominal pain

#### **People who are ill should contact their health care provider**

\* If a school nurse is available, nurse to evaluate further for symptoms of shortness of breath (asthma action plan MUST be on file from day 1 and must include spacer rather than the use of nebulizer), muscle aches, nausea.

\* If noted with a new rash on skin or discoloration of fingers and toes, shortness of breath in the absence of asthma should warrant immediate examination by primary care physician

**TABLE 1**

# COVID-19 EXCLUSION GUIDANCE-DRAFT



## Decision Tree for Symptomatic Individuals in Pre-K, K-12 Schools and Child Care Programs

Send home or deny entry if **ANY** of the following symptoms are present: Fever (100.4°F/38°C or higher), fatigue, muscle or body aches, headache, shortness of breath, cough, sore throat, congestion or runny nose, new loss of sense of taste or smell, nausea, vomiting, diarrhea, abdominal pain.  
 This is in addition to general infectious disease exclusion guidance.  
 People who are ill should contact their health care provider for additional guidance **and be tested**.

**Has the person been clinically evaluated by a healthcare provider?**

YES			NO	
<b>Tested positive for COVID-19 (Preferred)</b>	<b>Clinical diagnosis of COVID-19 (not tested)</b>	<b>Alternate clinical diagnosis or laboratory-confirmed condition (e.g., norovirus, strep throat,)</b>	<b>Continue monitoring of symptoms at home</b>	
			<b>If any of the following symptoms are present: Fever (100.4°F/38°C or higher), fatigue, myalgia (body aches), headache, shortness of breath, cough, sore throat, congestion or runny nose, new loss of sense of taste or smell, nausea, vomiting, diarrhea, abdominal pain.</b>	<b>Other symptoms not consistent with COVID-19</b>
Stay home at least 10 days from onset of symptoms <b>and</b> for 24 hours with no fever (without taking fever-reducing medications) <b>and</b> improvement of other symptoms – <b>whichever is longer.</b>	Stay home at least 10 days from onset of symptoms <b>and</b> 24 hours with no fever (without taking fever-reducing medications) <b>and</b> improvement of other symptoms – <b>whichever is longer.</b>	Follow provider directions/ recommended treatment & return to school guidance as per school policies and IDPH Communicable Diseases in Schools. <a href="https://dph.illinois.gov/sites/default/files/publications/commchartschool-032817.pdf">https://dph.illinois.gov/sites/default/files/publications/commchartschool-032817.pdf</a> <b>Physician note is required.</b>	Stay home at least 10 days from onset of symptoms <b>and</b> for 24 hours with no fever (without taking fever-reducing medications) <b>and</b> improvement of other symptoms – <b>whichever is longer.</b>  Testing for COVID is recommended.	Return to school as per school policies and IDPH guidance for Communicable Diseases in Schools. <a href="https://dph.illinois.gov/sites/default/files/publications/commchartschool-032817.pdf">https://dph.illinois.gov/sites/default/files/publications/commchartschool-032817.pdf</a>

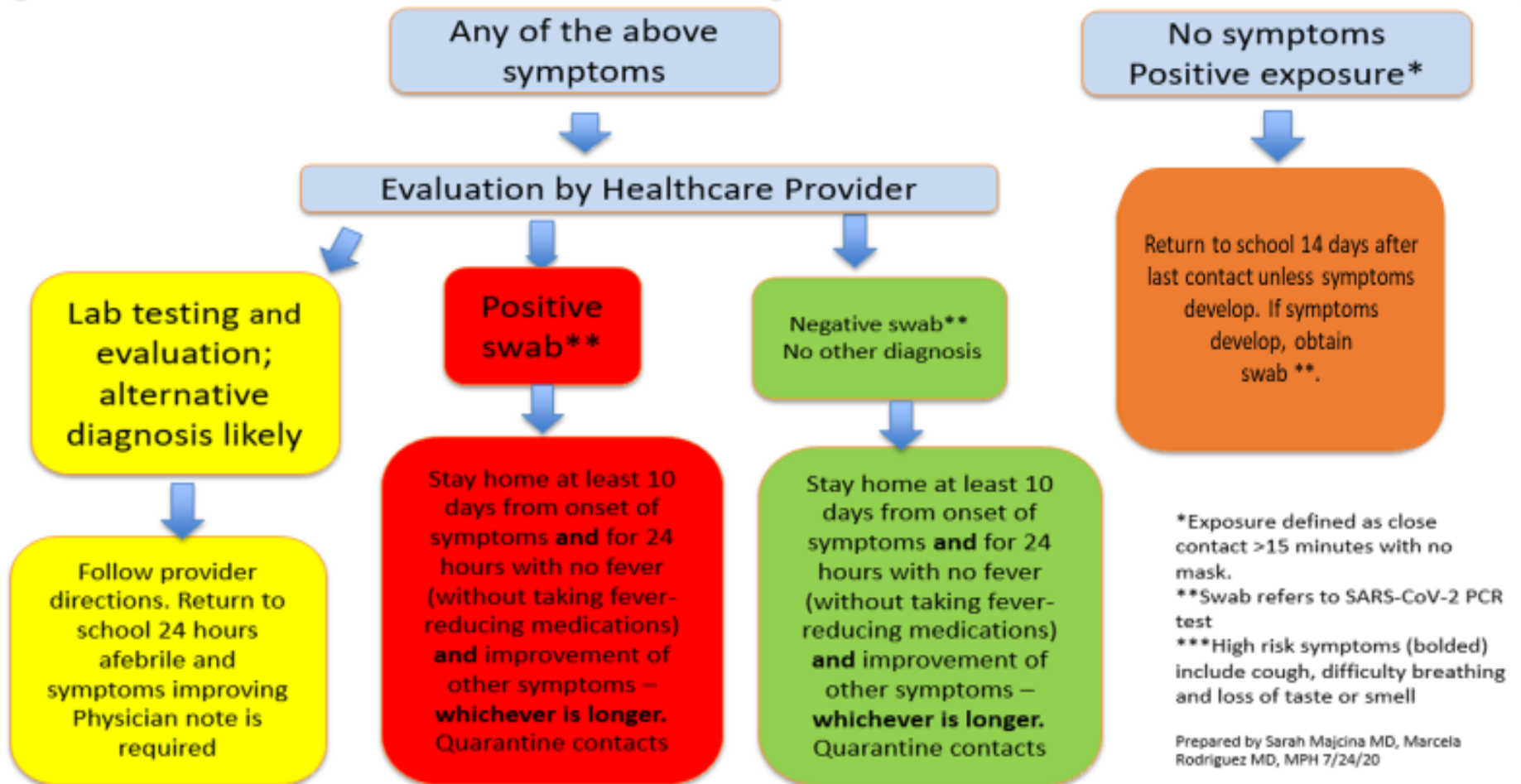
**★ Individuals who are close contacts to a suspected or confirmed COVID-19 case should stay home for 14 days after their last exposure to the case.**

7/17/2020 Interim Guidance, Subject to change.

TABLE 2

School Nurse Algorithm

Send home or deny entry if **ANY** of the following symptoms are present: Fever (100.4°F/38°C or higher), fatigue, muscle or body aches, headache, shortness of breath, cough, sore throat, congestion or runny nose, new loss of sense of taste or smell, nausea, vomiting, diarrhea, abdominal pain.  
Or exposure\* to COVID-19 positive person?



### **Who should Undergo Testing for COVID-19?**

1. Anyone with positive symptom listed in Tables 1 or 2 should be tested at the discretion of a healthcare provider
2. Anyone with known, prolonged (>15 minutes) close contact (within 6 feet) with positive COVID 19 case WITHOUT face covering should be tested (refer to figure 3)

### **When Should A Person Suspected with COVID 19 Get Tested?** (Refer to Table 5)

1. All Symptomatic persons should be tested as soon as possible at the discretion a healthcare provider
2. Anyone that has had contact with COVID19 positive case and remains asymptomatic: test 3-7 days post-exposure

### **Where can a Person Get Tested?**

#### **Testing sites:**

See Table 6 below for details

For a complete and updated listing of testing sites, visit [coronavirus.illinois.gov/s/testing-sites](https://coronavirus.illinois.gov/s/testing-sites)

**Table 3. COVID-19 Exposure and Symptoms Decision Chart for Clinicians**

SCENARIO	TESTING	DURATION OF QUARANTINE / WHEN TO RETURN TO SCHOOL	NOTIFY HEALTH DEPT**
<b>Known/possible exposure* to COVID-19</b>			
<b>Symptomatic</b>	SARS-CoV-2 PCR***  <i>Additional testing per provider's judgement</i>	<p><u>If positive COVID-19:</u> Isolate until afebrile for <math>\geq 24</math> hours (without fever-reducing medication) AND symptoms improving AND approved by the local health department to return to school (typically 10-14 days).</p> <p>NOTE: Quarantine all asymptomatic/negative household contacts for 14 days starting from last potential exposure. (Last potential exposure to a symptomatic household member is 10 days after the sick person started showing symptoms).</p> <p><u>If negative COVID-19:</u> False negative test is possible. Thus, isolate until afebrile for <math>\geq 24</math> hours (without fever-reducing medication) AND symptoms improving AND at least 10 days since symptom onset.</p>	YES
<b>Asymptomatic</b>	SARS-CoV-2 (optional)  <i>Advise patient that test is most accurate when patient is symptomatic; thus a false negative test is possible.</i>  <i>Testing capacity may be limited particularly for asymptomatic people.</i>	<p><u>If positive COVID-19:</u> Isolate until at least 10 days have passed since the date of the positive test, assuming no symptoms develop AND approved by the local health department to return to school (typically 10-14 days).</p> <p>NOTE: Quarantine all asymptomatic/negative household contacts for 14 days starting from last potential exposure. (Last potential exposure to an asymptomatic household member is 10 days after the person's positive test.)</p> <p><u>If negative COVID-19 OR if not tested for COVID-19:</u> Quarantine until 14 days after last potential exposure. A negative test on a specific day cannot be used since the patient could become positive during the 14 day quarantine period.</p>	YES

\*Possible exposure refers to a close contact to an individual who has symptoms of COVID-19 and has not been tested or has a test pending. Close contact: 1) Being within 6 feet of an infected person for at least 15 minutes AND 2) contact occurred 48 hours before the person began feeling sick until the time the patient was isolated OR 3) a household contact. Mask usage will be considered on a case-by-case basis.

Sources: cdc.gov; dph.illinois.gov. Adapted from table developed by University Pediatric Associates: Rachel Shakofsky, MD, Kristine Williams, MD, and Courtney Andrus, PA-C

### Table 4. COVID-19 Exposure and Symptoms Decision Chart for Clinicians

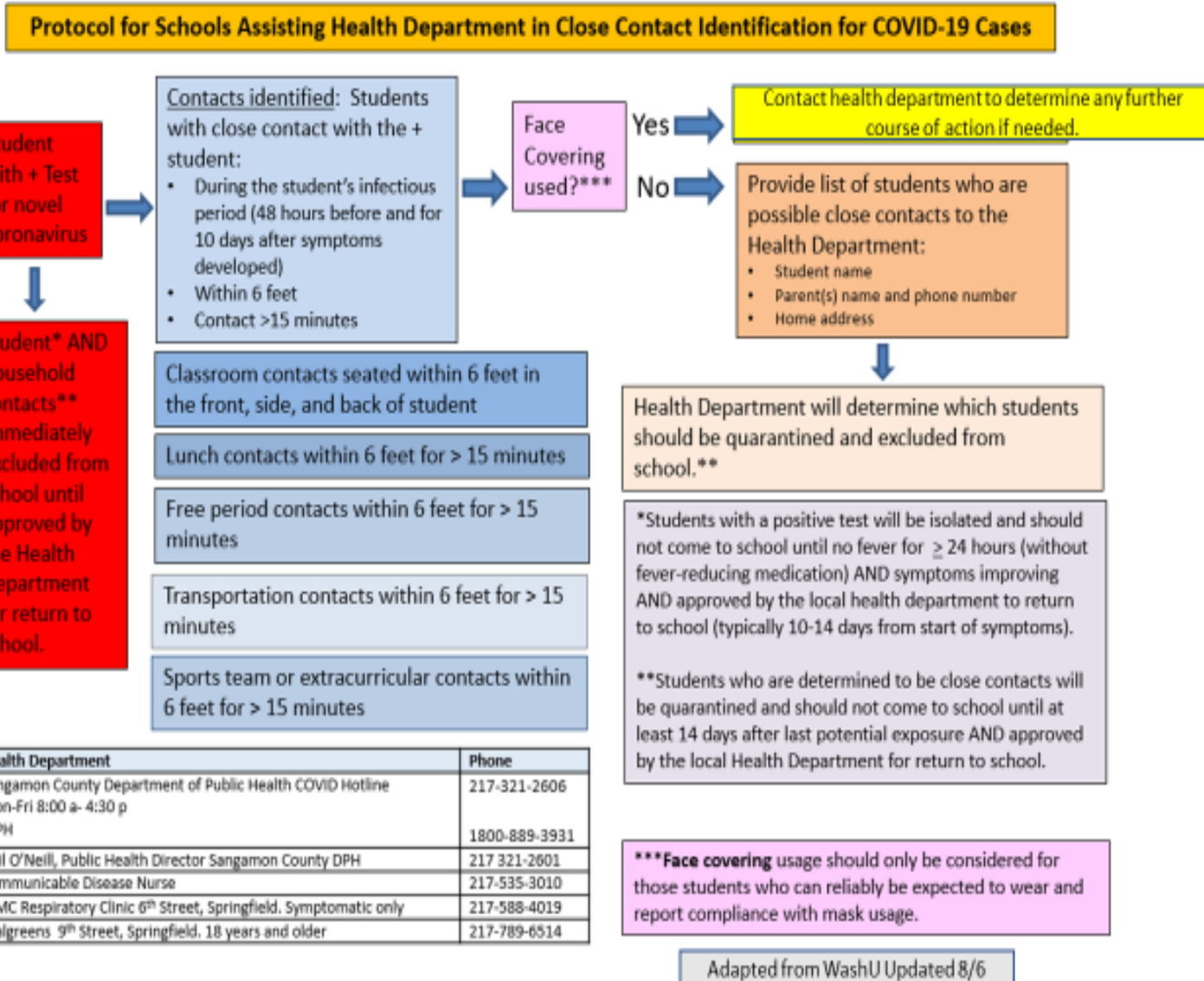
SCENARIO	TESTING	DURATION OF QUARANTINE & WHEN TO RETURN TO SCHOOL	CONTACT HEALTH DEPT**
<b>No known/possible exposure* to COVID-19</b>			
<b>Symptomatic</b>	SARS-CoV-2 PCR***  <i>Additional testing per provider's judgement</i>	<p><u>If positive COVID-19:</u> Isolate until afebrile for <math>\geq 24</math> hours (without fever-reducing medication) AND symptoms improving AND approved by the local health department to return to school (typically 10-14 days).</p> <p>NOTE: Quarantine all asymptomatic/negative household contacts for 14 days starting from last potential exposure. (Last potential exposure to a symptomatic household member is 10 days after the sick person started showing symptoms).</p> <p><u>If negative COVID-19:</u> Isolate until afebrile for <math>\geq 24</math> hours (without fever-reducing medication) AND symptoms improved.</p>	<p>YES – if positive COVID-19</p> <p>NO – if negative COVID-19</p>
<b>Asymptomatic</b>	None, unless specifically advised to test for COVID-19 by employer or prior to a procedure or admission	<p>Not Applicable</p> <p><i>Testing capacity may be limited particularly for asymptomatic people.</i></p>	NO
<b>Important Contact Information</b>		<b>Phone</b>	<b>Information for Health Department</b>
Sangamon County Department of Public Health COVID Hotline Mon-Fri 8:00 a- 4:30 p		217-321-2606	<ul style="list-style-type: none"> <li>• Patient name and DOB</li> <li>• Parent/guardian name and contact number</li> <li>• Home address</li> <li>• Date and location of test</li> <li>• Date of symptom onset</li> <li>• Known close contacts</li> </ul>
Memorial Medical Center Respiratory Clinic (Symptomatic patients) 2950 South 6 <sup>th</sup> Street, Springfield 8:00 am – 8:00 pm		217-588-4019	
SIU Family Medicine Clinic (EXISTING symptomatic Patients only)		217-545-8000	
Walgreens (18 years and older) walgreens.com/findhealth/covid19/testing 1155 N 9 <sup>th</sup> Street, Springfield		217-789-6514	
Illinois Department of Health 24-hour hotline		800-889-3931	

\*Possible exposure refers to a close contact to an individual who has symptoms of COVID-19 and has not been tested or has a test pending. Close contact: 1) Being within 6 feet of an infected person for at least 15 minutes AND 2) contact occurred 48 hours before the person began feeling sick until the time the patient was isolated OR 3) a household contact. Mask usage will be considered on a case-by-case basis.

Sources: cdc.gov; dph.illinois.gov. Adapted from table developed by University Pediatric Associates: Rachel Shakofsky, MD, Kristine Williams, MD, and Courtney Andrus, PA-C



TABLE 5



**TABLE 6: LOCAL TESTING SITES**

SITE	TESTING INFORMATION	PEDIATRIC TESTING
<b>Memorial Express Care</b> at 2950 S. Sixth Street (217) 588-4019	<ul style="list-style-type: none"> <li>• Respiratory Drive-through clinic from 8:00 am – 8:00 pm</li> <li>• Appointment required</li> <li>• Healthcare providers are stationed outside the clinic to:                             <ul style="list-style-type: none"> <li>• screen patients</li> <li>• determine the appropriate level of care based on guidelines set by IDPH</li> </ul> </li> <li>• Testing symptomatic patients or contact of positive covid patient</li> <li>• Pediatric testing available at this time (only for symptomatic children)</li> </ul>	YES
<b>Walgreens</b> 1155 N 9th Street, Springfield 62702 Ph:1-800-925-4733	<ul style="list-style-type: none"> <li>• Drive through testing 9:00 am – 4:00pm, 7 days a week</li> <li>• Appointment required (walgreens.com/findcare/covid19/testing)</li> <li>• Self-administered nasal test for persons &gt; 18 years</li> <li>• NO pediatric screening at this time</li> </ul>	NO
<b>Crossing health Care</b> 320 E. Central Ave., Decatur, IL 62521 COVID Hotline: 217-877-9117	<ul style="list-style-type: none"> <li>• Crossing Healthcare</li> <li>• Hours: 1:00pm - 4:00pm</li> <li>• Days of Operation: Daily</li> <li>• Requirements: Appointment required. Telehealth screening required.</li> <li>• Languages Offered: English and Spanish</li> </ul>	YES
<b>SIU Center for Family Medicine</b> 520 North 4th Street, Springfield, IL 62702 217-545-5100	<ul style="list-style-type: none"> <li>• Testing by appointment only, testing open to SIU patients only.</li> <li>• Hours of operation: 9am to 4:30 pm</li> <li>• Monday through Friday</li> <li>• Nnasopharyngeal tests performed</li> </ul>	YES
<b>St. John’s Emergency Room</b> Call:217-544-6464	<ul style="list-style-type: none"> <li>• Pediatric testing is available through the St. John’s Emergency Room if criteria are met</li> </ul>	YES
<b>6. Sangamon County Department of Public Health</b> Phone: 217-545-5100 Health COVID Hotline: 217-321-2606	<ul style="list-style-type: none"> <li>• Drive up testing site</li> <li>• Nasal and nasopharyngeal tests administered</li> <li>• Timing of operation 9-11am and then 4 to 7 pm.</li> <li>• Testing of symptomatic /asymptomatic patients who have had a recent contact,</li> </ul>	YES

**TABLE 7 to TABLE 12: Summarize Recommendations with Examples**

<b>TABLE 7: SCREENING</b>		
<b>What to do if the symptom screen in positive</b>		
<b>STUDENTS</b>		
<b>SEND HOME AND TEST AS PER HEALTHCARE PROVIDER DISCRETION</b>	<b>SEND HOME FOR THE DAY WITH FURTHER PHYSICIAN EVALUATION IF SYMPTOMS PERSIST</b>	<b>SEND TO NURSE IF AVAILABLE FOR FURTHER TRIAGE AND SEND HOME FOR FURTHER PHYSICIAN EVALUATION</b>
<ul style="list-style-type: none"> <li>• Temperature <math>\geq</math> 100.4</li> <li>• Fatigue</li> <li>• Muscle or body aches</li> <li>• Headache</li> <li>• Shortness of breath</li> <li>• Cough (that is not documented as asthma and/or allergies)</li> <li>• Sore throat</li> <li>• Congestion or runny nose</li> <li>• New loss of sense of taste or smell</li> <li>• Nausea</li> <li>• Vomiting</li> <li>• Diarrhea</li> <li>• Abdominal pain</li> </ul>	<ul style="list-style-type: none"> <li>• Vomiting</li> <li>• Diarrhea</li> <li>• Fatigue</li> <li>• Muscle and body aches</li> <li>• Headache</li> <li>• Temperature between 100.0 and 100.4</li> <li>• Rash</li> </ul>	<ul style="list-style-type: none"> <li>• Shortness of breath: (asthma action plan MUST be on file from day 1 and must include spacer rather than the use of nebulizer)</li> </ul>
<b>TEACHERS AND STAFF</b>		
<b>SEND HOME</b>	<b>RETURN HOME WITH FURTHER MONITORING AND EVALUATION</b>	<b>OKAY TO ATTEND</b>

<ul style="list-style-type: none"> <li>• Temperature <math>\geq 100.4</math></li> <li>• Persistent cough</li> <li>• Visibly short of breath</li> <li>• Impaired sense of smell or taste</li> <li>• Headache</li> <li>• Rash</li> </ul>	<ul style="list-style-type: none"> <li>• Vomiting</li> <li>• Diarrhea: seek medical attention if this persists for more than 2 days</li> </ul>	<ul style="list-style-type: none"> <li>• Non-specific muscle aches that are not out of the ordinary</li> <li>• Alternate explanation available for these symptoms</li> <li>• Seek medical attention if these symptoms persist</li> </ul>
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Table 8: TESTING		
Who should be tested for COVID-19?		
STUDENTS		
TEST HIGHLY RECOMMENDED	SELF MONITOR OR CONSIDER TESTING	NO TEST OR MONITORING
<ul style="list-style-type: none"> <li>• Exposure to known COVID</li> <li>• Positive symptom screen for above symptoms (in the red box)</li> <li>• Persistent Vomiting</li> </ul>	<ul style="list-style-type: none"> <li>• Class exposed to infected teacher for prolonged duration but all masked (MONITOR FOR SYMPTOMS)</li> <li>• Exposed to someone who is a contact of COVID and symptomatic</li> </ul>	<ul style="list-style-type: none"> <li>• Exposure &lt;15 minutes</li> <li>• Both individuals masked</li> </ul>
TEACHERS AND STAFF		
<ul style="list-style-type: none"> <li>• TEST HIGHLY RECOMMENDED</li> </ul>	<ul style="list-style-type: none"> <li>• TEST HIGHLY RECOMMENDED</li> </ul>	<ul style="list-style-type: none"> <li>• TEST HIGHLY RECOMMENDED</li> </ul>

<ul style="list-style-type: none"> <li>Exposure to known COVID-19 patient</li> <li>Positive symptom screen for above symptoms (in the red box)</li> </ul>	<ul style="list-style-type: none"> <li>Exposure to known COVID-19 patient</li> <li>Positive symptom screen for above symptoms (in the red box)</li> </ul>	<ul style="list-style-type: none"> <li>Exposure to known COVID-19 patient</li> <li>Positive symptom screen for above symptoms (in the red box)</li> </ul>
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Table 9: EXPOSURE		
What is the level of risk when exposed to a case of COVID-19 and need to be testing?		
STUDENTS, TEACHERS AND STAFF		
HIGH RISK EXPOSURE: TESTING REQUIRED	MEDIUM RISK EXPOSURE: CONSIDER TESTING	LOW/MINIMAL RISK EXPOSURE: NO TEST NEEDED
<ul style="list-style-type: none"> <li>Exposure to case of COVID with no mask on the exposed</li> <li>Within 6 feet for &gt; 15 minutes</li> </ul>	<ul style="list-style-type: none"> <li>COVID Case masked but contact not masked</li> <li>Case masked but exposure &gt;15 minutes</li> <li>Case masked but exposure &lt; 6 feet</li> </ul>	<ul style="list-style-type: none"> <li>Both wearing mask</li> <li>More than 6 feet apart and exposed for &lt; 15 minutes</li> </ul>

\*The intent of Table 10 is informational. The return to school decisions will be made by Public Health for persons with a positive COVID-19 test.

Table 10: RETURN TO SCHOOL		
When is it safe to return to school after being placed on isolation or quarantine?		
STUDENT		
Recommendations based on adult guidelines. Pediatric recommendations pending.		
COVID TEST POSITIVE	SYMPTOM SCREEN POSITIVE	OTHER RISKS
TEST POSITIVE AND SYMPTOMATIC SYMPTOM BASED STRATEGY:	SYMPTOM SCREEN POSITIVE, TRIAGED BY HEALTH CARE WORKER:	ASYMPTOMATIC TEST NEGATIVE ON ROUTINE TESTING

<p>Stay home for 10 days since symptom onset <b>and</b> symptom improvement <b>and</b> 24 hours since last fever without the use of fever reducing medications</p> <ul style="list-style-type: none"> <li>• If Immunosuppressed, stay home for 20 days with resolution of fever and improvement of symptoms</li> </ul> <p><b>OR</b></p> <p>TEST BASED STRATEGY (not preferred)</p> <ul style="list-style-type: none"> <li>• 24 hours since last fever without medications, symptom improvement <b>and</b> 2 negative tests performed 24 hours apart.</li> </ul> <p><b>TEST POSITIVE BUT WITHOUT ANY COVID SYMPTOMS:</b></p> <p>SYMPTOM BASED STRATEGY</p> <ul style="list-style-type: none"> <li>• Isolate for 10 days after day of positive test.</li> <li>• Follow symptom positive guidelines if symptoms develop.</li> </ul> <p><b>OR</b></p> <p>TEST BASED STRATEGY: (not preferred)</p> <p>2 negative tests at least 24 hours apart performed at least 7 days after initial test.</p>	<p>Determine if test needed after talking with physician or public health</p> <p>TRAVEL OUTSIDE OF THE UNITED STATES OF AMERICA AND HIGH RISK STATES WITHIN THE UNITED STATES OF AMERICA.</p> <p>Return to school after 14 days or sooner if cleared by physician.</p>	<p>CONTACT OF A CONTACT EXPOSED A CASE OF COVID</p> <p>TRAVEL OUT OF THE STATE BUT WITHIN THE UNITED STATES OF AMERICA, BUT NO KNOWN EXPOSURE.</p> <p>Student may return to school</p>
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<p><b>SYMPTOMATIC BUT COVID TEST NEGATIVE</b></p> <ul style="list-style-type: none"> <li>• Quarantine at least 14 days and return to work when symptoms better.</li> <li>• Repeat testing in 1 week if symptoms continue.</li> </ul> <p><b>Students with a positive COVID-19 test require clearance by Public Health or Health Care Provider to return to school.</b></p>		
<b>TEACHER AND STAFF</b>		
<b>COVID TEST POSITIVE</b>	<b>SYMPTOM SCREEN POSITIVE</b>	<b>OTHER RISKS</b>
<p>TEST POSITIVE AND SYMPTOMATIC</p> <p>SYMPTOM BASED STRATEGY:</p> <ul style="list-style-type: none"> <li>• Stay home for 10 days after symptom onset <b>and</b> symptom improvement <b>and</b> 24 hours since last fever without the use of fever reducing medications.</li> <li>• If Immunosuppressed, stay home for 20 days with resolution of fever and improvement of symptoms</li> </ul> <p style="text-align: center;">OR</p> <p>TEST BASED STRATEGY (not preferred)</p> <ul style="list-style-type: none"> <li>• 24 hours since last fever without medications, symptom improvement</li> </ul>	<p>SYMPTOM SCREEN POSITIVE, TRIAGED BY HEALTH CARE WORKER:</p> <p>Determine if test needed after talking with physician or public health</p> <p>TRAVEL OUTSIDE OF THE UNITED STATES OF AMERICA AND HIGH RISK STATES WITHIN THE UNITED STATES OF AMERICA.</p> <p>Return to school after 14 days or sooner if cleared by physician.</p>	<p>ASYMPTOMATIC TEST NEGATIVE ON ROUTINE TESTING</p> <p>CONTACT OF A CONTACT EXPOSED A CASE OF COVID</p> <p>TRAVEL OUT OF THE STATE BUT WITHIN THE UNITED STATES OF AMERICA, BUT NO KNOWN EXPOSURE.</p> <p>Teachers and Staff may return to school</p>

and 2 negative tests performed 24 hours apart.

**TEST POSITIVE BUT WITHOUT ANY COVID SYMPTOMS:**

TEST BASED STRATEGY:  
(not preferred)

- 2 negative tests at least 24 hours apart performed at least 7 days after initial test  
OR  
SYMPTOM BASED STRATEGY
- Isolate for 10 days after day of positive test.
- Follow symptom positive guidelines if symptoms develop.

**SYMPTOMATIC BUT COVID TEST NEGATIVE**

- Quarantine at least 14 days and return to work when symptoms better.
- Repeat testing in 1 week if symptoms continue

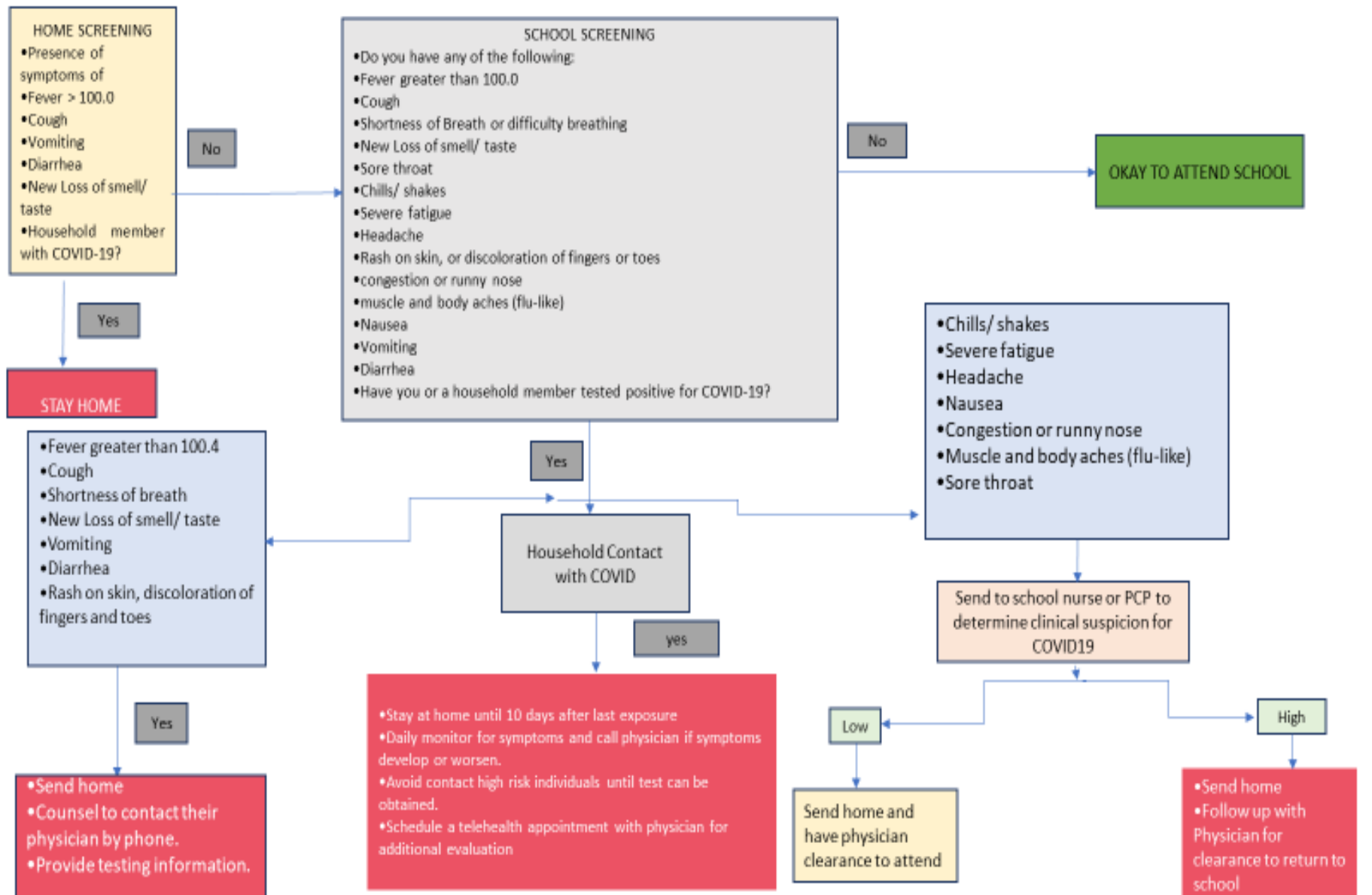
**Teachers and staff with a positive COVID-19 test will require clearance by Public Health or Health Care Provider to return to school.**



<b>Table 11: TIME OF TESTING/ RE-TESTING</b>		
<ul style="list-style-type: none"> <li>For COVID positive cases, re-testing is not necessary except for people who are immunocompromised. It is recommended that they should be evaluated by a specialist before returning to work.</li> </ul>	<ul style="list-style-type: none"> <li>If a test is recommended by health care provider for their symptoms, it can be done right away.</li> <li>If a person is exposed to a case, testing is recommended 3-7 days after exposure. If test is negative, watch 14 days for development of symptoms.</li> </ul>	<ul style="list-style-type: none"> <li>Repeat testing is not needed for asymptomatic individuals without exposure.</li> </ul>

<b>Table 12: RECOMMENDATIONS FOR LEVEL OF DISINFECTION</b>		
<b>POSITIVE CASE OF COVID</b>	<b>POSSIBLE CASE/ TESTING PENDING</b>	<b>NO CASE OF COVID</b>
ADVANCED CLEANING per CDC/ISBE guidelines	ADVANCED CLEANING per CDC/ISBE guidelines	ROUTINE DISINFECTION per CDC/ISBE guidelines

## ALGORITHM FOR SYMPTOM SCREENING BY STAFF



<u>EXPOSURE AND LEVEL OF RISK</u>		
COVID CASE	HEALTHY CONTACT	LEVEL OF RISK
No Mask	No Mask	High Risk
Masked	No Mask	Moderate Risk
Masked	Masked	Minimal/ Low Risk
Masked	Masked	Very Low Risk Distance between the case and contact is greater than 6 feet apart

← Distance between the case and contact is greater than 6 feet apart →

## Guidance for Individuals with Exposure

### Determining when to Quarantine vs. Isolate for known COVID19 exposure (Informational)

THESE DECISIONS WILL BE MADE BY THE LOCAL HEALTH DEPARTMENT AND HEALTH CARE PROFESSIONAL

\*If the individual has a known COVID19 exposure, tests are recommended.

### TEST BASED DECISION BASED ON RISK OF EXPOSURE FOR ADULTS

Test Result Status for exposed person	Days Off	Quarantine vs. Isolate	Return to School
Pending	Until results available, follow PCP recommendations: <ol style="list-style-type: none"><li>1. Isolate self and monitor symptoms.</li><li>2. Quarantine away from asymptomatic close contacts.</li></ol>	Isolate self and monitor symptoms.	Recommendation based on test result
COVID TEST NEGATIVE	Self-Monitor for 10 days	None	<ul style="list-style-type: none"><li>• Must be free of fever and symptoms for a minimum 24 hours</li><li>• Continue to actively monitor for symptoms daily for 10 days.</li></ul>

<b>COVID TEST POSITIVE</b>	10 of Isolation (with fever and symptom improvement) or longer (20 days) if immunocompromised	Isolate person with positive test. Quarantine other household and close contacts.	Continue Isolation. Monitor symptoms, 10 day quarantine for household/close contacts who are asymptomatic. Symptomatic household members/close contacts are presumed positive and would need isolation.
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**SYMPTOM BASED DECISION BASED ON RISK OF EXPOSURE FOR ADULTS:**

RISK	Asymptomatic	Symptomatic
Presumed Covid-19 positive <b>High/ Medium Risk Exposure</b> OR Family/Close Contact with COVID-19 or Test Pending	Quarantine	Isolate
<b>Low Risk Exposure</b>	Self Monitor	Isolate

**DEFINITIONS**

**Definitions for Key Terms**

Q = Quarantine means stay in your own home. Those in the home with you should do the same. Quarantine is for asymptomatic individuals to see if they become sick.

I = Isolate means you should not interact with others, even in your own home. Stay in a specific room. Isolation is for symptomatic individuals and those with pending or positive COVID-19 tests.

ISOLATION FOR symptomatic individuals at least 7 days from onset of symptoms **and** at least 24 hours without fever **and** until symptoms are improving.

ISOLATION FOR asymptomatic individuals who have been asked to isolate is for 10 days. Before returning to school, ensure clearance from local health department/ physician caring for the individual.

Self Monitor: Keep a daily log of symptoms. Take temperature twice a day and record it. Seek treatment if symptoms worsen. Proceed to normal activity/work with masking and social distancing. This will be verified by contact tracer or public health nurse or primary care provider's office.

Close Contact: Anyone who has been on contact with a lab confirmed case of COVID of within 6 feet and more than 15 minutes without any face covering

Secondary contact" This is a contact of a contact. No testing is indicated.

## Frequently Asked Questions

**1) If a teacher tests positive, what will be the next course of action?**

The teacher will be isolated immediately until cleared by the local health department to return to work. As part of contact tracing conducted by the health department, children's risk will be determined by the amount of time spent by the teacher in class, distance between them and personal protective equipment worn. The schools are required to notify families when possible exposure occurs. Further instructions on testing and follow up will be given via the contact tracers.

**2) If a student tests positive, what actions will be taken?**

The student that tests positive will be isolated immediately until cleared by the health department or their pediatrician. Contact tracing will be initiated at once to determine those that are exposed and determine a plan for them based on the level of risk of their exposure.

**3) Is fever a good screening tool?**

Fever > 100.0 is one of the common symptoms of COVID-19. The infection can occur without the presence of fever or any symptoms and those are harder to identify on screening. However, promptly identifying and isolating anyone that is febrile, will ensure protection from exposure if this individual is determined to have COVID-19

**4) There are many asymptomatic carriers of COVID-19. How can we identify them?**

It is exceedingly difficult to identify asymptomatic cases of COVID-19 merely with symptom screening. These are people who are infected with COVID-19 but never develop any symptoms of the infection. Majority of children that develop COVID-19 infections are asymptomatic. Viral transmission from asymptomatic individuals does occur. It is therefore important to continue to socially distance and use appropriate personal protective equipment to prevent spread and help reduce the harm from this dangerous virus.

**5) If there a newly diagnosed positive case in the building, what PPE should be worn?**

Isolate this individual in a designated area of the building until they can be sent home. CDC and IDPH require a gown, gloves, N-95 mask, and eye protection while interacting with the person who could be sick.

**6) What alternative PPE is available for a child that cannot wear a mask?**

Schools should require physician's note for students and staff who are not able to wear a face covering due to trouble breathing. They may attempt to wear a face shield. However, the protection with a face shield is not optimal as it does not fit snugly around the nose and mouth, against the sides of the face. Face shields may be useful in situations where it is important for students to see how a teacher pronounces words (e.g., English Learners, early childhood, foreign language, etc.). ISBE recommends that schools and districts update policies to require the wearing a face covering while on school grounds and handle violations in the same manner as other policy violations.

**7) Do the children have to wear masks all the time?**

ISBE recommends mask/ face cover all the time including in the classroom. Per ISBE, the masks could be removed for eating and when outside. Cloth masks are recommended for all children. Cloth masks/ face mask are recommended for teachers. CDC has video on how to make cloth masks at home: see reference #2. When unable to mask for children, consider face shields.

**8) What are some public health measures taken in school that will keep the children and staff safe?**

In addition to masking, it is important to maintain 6 feet of distance from others as much as possible.

Maintain 6-foot distance in all directions between the desks and face desks in the same direction. Open windows, if possible, for increased ventilation. Schools can contact their Local Health Department or Fire Department to confirm the number of students to safely seat in a class based on the room size.

Build in time for hand hygiene and/or schedule hand hygiene breaks, including before/after eating snacks/meals and upon exiting and returning to the classroom. Schools have ensured adequate hygiene supplies and the methanol content in hand sanitizers used.

**9) Can the children share their electronics?**

It is preferred that children do not share electronic devices, toys, books, and other games or learning aids. Electronics, including, but not limited to, tablets, touchscreens, keyboards, remote controls, lunchroom keypads, door entry systems, etc., should be cleaned before and after use. Consider using a wipeable cover on electronics and clean per the CDC guidelines.

**10) What are some recommendations for COVID-19 specific disinfection in schools?**

Per CDC, IDPH and ISBE, more frequent cleaning and disinfection is necessary to reduce exposure.

Disinfect with a household disinfectant registered with the Environmental Protection Agency (EPA) and follow contact times on the label. Ensure that EPA-approved disinfectants for use against the coronavirus are available to staff responsible for cleaning. Districts should post scheduled cleaning times and maintain appropriate documentation upon the completion of cleaning.

- a. Gloves and other Personal Protective Equipment must be used during cleaning and disinfection. Ensure that appropriate PPE is available to and used by staff, based on job-specific duties and risk of exposure.
- b. Always follow label directions.
- c. Allow the required wet contact time.
- d. Keep all disinfectants out of the reach of children.
- e. Do not mix bleach or other cleaning products and disinfectants together.
- f. Ensure that cleaning supplies brought by staff and students are approved by the EPA.

**11) What do we do if the screening parameters are abnormal but not severe enough to send home?**

There may be times while performing the symptom screen, the measurements are not severe enough to send home. For example, if the temperature is 100.0 does the child need to return home? Follow your school policy for sending students home.

**12) Runny nose and muscle aches are non-specific symptoms. Do the students need to be sent home?**

According to the IDPH guidelines, these symptoms do require students to be sent home. If the student has allergies listed on file and the physician evaluates it as not being COVID-19, the student can be readmitted.

**13) What other help is available?**

Help is always available from Sangamon County Department of Public Health and its colleagues.

COVID Hotline: 217-321-2606

Communicable Disease Nurse: 217-535-3010

Gail O'Neill: 217-321-2601 (Direct line to Office)



References:

1. Updated Guideline 7/16/2020: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/disposition-in-home-patients.html>
2. <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/how-to-make-cloth-face-covering.html>
3. <https://www.isbe.net/Documents/Part-3-Transition-Planning-Phase-4.pdf>
4. <https://coronavirus.jhu.edu/us-map>
5. <https://www.idsociety.org/globalassets/idsa/public-health/covid-19/idsa-masks-infographic-v2.pdf>
6. <https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html>