
**San Mateo County Coalition
for Safe Schools and Communities**

Pandemic Recovery Framework

February 7, 2022

*The Framework Will Continue to Be Updated as
New Information Becomes Available*



**Coalition for
Safe Schools &
Communities**



**SAN MATEO
COUNTY
OFFICE OF
EDUCATION**



**SAN MATEO
COUNTY HEALTH**
All together better.

Table of Contents

About the Pandemic Recovery Framework	3
Vaccination	4
Vaccination Verification	4
Masks	5
Physical Distancing	8
Gatherings	9
Ventilation	10
Stay Home When Sick and Get Tested	11
When Students or Staff are Sick at School	13
Hand Hygiene	13
Cleaning	13
Food and Meals	14
Cohorting	14
Training	15
Plans	15
Visitors	16
Extracurricular and Athletic Activities	16
Travel	18
Childcare	19
Screening Testing	19
Staff Quarantine and Response Testing	21
Contact Tracing and Quarantine –2 Options	22
Isolation	29
Case Reporting	30
Outbreaks	31
Appendix	35

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 **SMCH Order** (8/2/21) concerning face coverings, **CDPH FAQ** (8/6/21) addressing mask exemptions, the **CA Public Health Officer order** (8/11/21) addressing vaccination verification and testing of school workers and volunteers, **CDPH guidance** (8/17/21) addressing testing for vaccinated individuals, **CDPH update** (9/1/21) on modified quarantine and extracurricular activities, SMCH guidance on modified quarantine for before/after care, **CDPH updates** (9/22/21) addressing extracurricular activities and timing of testing to exit quarantine, **CDPH FAQ** (10/14/21) regarding testing cadence and recommendations on gatherings, **CDPH guidance** (11/24/21) concerning extracurricular activities, **CDC travel guidance** (1/4/22), **CDPH** and **Cal/OSHA** isolation and quarantine guidance (1/6/22), CDPH **school guidance**, **group-tracing** (1/12/22), and updates to reflect **Cal/OSHA guidance** regarding testing and quarantine of employees who have recovered from COVID-19 in the last 90 days.

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 Americans with Disabilities Act), 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. Schools must be in full compliance with the CDPH order regarding vaccination verification of staff by October 15, 2021.

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. The CDPH also extended its [mask requirements](#) to February 15, 2022. 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.

Recommendations for Masks

CDPH provides the following recommendations on the types of masks to wear and how to wear them:

- An effective mask has both **good fit** and **good filtration**.

- Double masking is an effective way to improve fit and filtration. A close-fitting cloth mask can be worn on top of a surgical/disposable mask to improve the seal of the mask to the face.
- Layering more than two masks is not recommended as this could be difficult to breathe through.
- It is not recommended to wear two medical masks, or to wear a medical mask on top of a KN95, KF94, or N95.

More information about masks can be [found here](#), including masks for students.

Most Effective	More Effective	Effective	Least Effective
<ul style="list-style-type: none"> • N95 (also best for wildfire smoke) 	<ul style="list-style-type: none"> • KF94 • KN95 • Double Mask • Fitted Surgical Mask 	<ul style="list-style-type: none"> • Surgical Mask 	<ul style="list-style-type: none"> • Fabric mask with three or more cloth layers

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.
- 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](#)).

- Adults in TK-12 school settings are required to mask.
- 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](#)) 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.
- 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.
- Any face mask that feels wet or becomes saturated with sweat should be changed immediately.
- See the [Extracurricular and Athletic Activities section](#) for mask requirements during extracurricular activities.

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

- All passengers and drivers, regardless of vaccination status, 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.
- The CDC has a similar [requirement](#).

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.” See the [Extracurricular and Athletic Activities section](#) for distancing requirements during extracurricular activities.
- 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 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

School dances, large assemblies, and other school-based crowded events have the potential to cause substantial spread of COVID-19 within and beyond the school community. Schools are encouraged to consult with local health officials before deciding to host such events, particularly in communities where COVID-19 remains highly prevalent and/or vaccination rates remain low. The following are additional considerations to optimize health and safety for all attendees:

- Host such events outdoors whenever possible.
- Separate the event into smaller cohorts (by grade, for example) whenever possible.
- Ensure all eligible attendees (students and adults) are fully vaccinated. Conduct pre-entry testing for all unvaccinated attendees at or just prior to the event.
- Plan in advance how to identify close contacts if it is later discovered that someone with COVID-19 attended the event. Consider requiring pre-registration with [CA Notify](#) and maintaining a log of all attendees (even those arriving pre-event) at the door/entrance to the event.
- Consider requiring the use of masks at outdoor, school-based, large, crowded events. Masks remain required indoors as per CDPH K-12 guidance.
- If food or drinks are to be served, serve them outdoors whenever possible and/or place them away from other areas to clearly designate spaces where masks must be worn.

After an Event or Gathering

- To further protect yourself and loved ones, be sure to self-monitor for symptoms for 14 days after participating in celebrations, activities, or travel.
- Pay special attention from days 3-7 following activities, as this is when people are most likely to develop symptoms.
- If you learn you have been in close contact with someone who tests positive, get tested and, if not fully vaccinated, stay home to quarantine.
- If you are not feeling well or test positive, stay home regardless of vaccination status.

- Children and youth who attend a TK–12 school do not qualify for modified quarantine or group–based tracing if either of the following occur:
 - The event took place outside a school setting
 - All attendees at an event were not wearing face masks

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.

See [Ventilation FAQs: Smoke Days and COVID–19](#) for information about how to address poor air quality while still observing COVID–19 safety standards. The UC Berkeley Center for Cities and Schools has compiled a [useful list of resources](#) concerning ventilation and school reopening.

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. See this [Ventilation FAQ](#) for more details.
- 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., Streptococcal 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.

Common Symptoms of COVID-19 (CDPH)

- | | |
|--|---|
| <ul style="list-style-type: none"> ■ Headache ■ Fever or chills ■ Cough ■ Shortness of breath or difficulty breathing ■ Fatigue (tiredness) ■ Muscle or body aches | <ul style="list-style-type: none"> ■ New loss of taste or smell ■ Sore throat ■ Congestion or runny nose ■ Nausea or vomiting ■ Diarrhea |
|--|---|

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

- Arrange for eating outdoors as much as feasible.
- Maximize physical distance as much as possible while eating (especially indoors). Using additional spaces outside of the cafeteria for mealtime seating such as the gymnasium can help facilitate distancing.
- Minimize the length of time students and staff are not wearing masks.
- 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 19](#) 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 unvaccinated individuals.

Extracurricular and Athletic Activities

CDPH updated [its guidance](#) addressing extracurricular activities on November 24. The requirements and recommendations of the CDPH's November guidance apply

to all extracurricular activities that are operated or supervised by schools, and all activities that occur on a school site, whether or not they occur during school hours, including, but not limited to, sports, band, chorus, and clubs.

Activities may be performed outdoors without masks.

Indoor mask use remains a critical layer in protecting against COVID-19 infection and transmission, including during sports, music, and related activities. Accordingly:

- Masks are required indoors at all times for teachers, referees, officials, coaches, and other support staff.
- Masks are required indoors for all spectators and observers.
- Masks are required indoors at all times when participants are not actively practicing, conditioning, competing, or performing. Masks are also required indoors while on the sidelines, in team meetings, and within locker rooms and weight rooms.
- When actively practicing, conditioning, or competing in indoor sports, masks are required by participants even during heavy exertion, as practicable. If masks are not worn due to heavy exertion, it is strongly recommended that individuals undergo screening testing at least once weekly. An FDA-approved antigen test, PCR test, or pooled PCR test is acceptable for evaluation of an individual's COVID-19 status.
- Individuals using instruments indoors that cannot be played with a mask (e.g., wind instruments) may perform if bell coverings are used when playing wind instruments AND a minimum of 3 feet of physical distancing is maintained between participants. Modified masking may be considered in addition to, but not in place of, bell covers. If bell covers are not used, it is strongly recommended that individuals undergo screening testing at least once weekly. An FDA-approved antigen test, PCR test, or pooled PCR test is acceptable for evaluation of an individual's COVID-19 status.

CDPH provides the following recommendations to mitigate sports-related transmission of COVID-19:

- vaccinate all eligible student athletes, coaches, and parent/adult volunteers;
- develop screening testing programs;
- hold team meetings outdoors;
- minimize team meals and other activities not related to practice or play;

- require masks to be worn during shared transportation (i.e., carpooling to and from activities);
- avoid sharing water bottles; and
- train in pods (e.g., separate teams into varsity/junior varsity, offense/defense, different track & field events, etc.).

Travel

Follow this guidance concerning travel:

- Everyone should follow the same steps concerning travel: get vaccinated, avoid travel when sick, wear a mask when using public transportation or with others outside the household, and avoid large gatherings.
- Schools should not exclude students who have traveled; however, they may want to increase their testing cadence of staff and students during and after peak holiday times.

CDC Recommendations for Domestic Travel

The following provides an overview of [CDC guidance](#) concerning domestic travel:

- Delay travel until you are fully vaccinated.
- Get a COVID-19 booster if eligible.
- Check your destination's COVID-19 situation before traveling. State, local, and territorial governments may have travel restrictions in place.
- Do not travel if you have been exposed to COVID-19, you are sick, if you test positive for COVID-19, or you are waiting for results of a COVID-19 test.
- If you are *not* fully vaccinated, get tested with a viral test 1-3 days before your trip.
- Wearing a mask over your nose and mouth is required in indoor areas of public transportation (including airplanes), and indoors in U.S. transportation hubs (including airports).
- In areas with high numbers of COVID-19 cases, wear a mask in crowded outdoor settings and for activities with close contact with others who are not fully vaccinated like an outdoor festival or sporting event.
- Wash your hands often or use hand sanitizer (with at least 60% alcohol).

- Self-monitor for COVID-19 symptoms; isolate and get tested if you develop symptoms.
- If not fully vaccinated, get tested with a viral test 3-5 days after returning from travel *and*
- Stay home and self-quarantine for five days after travel.

CDC Recommendations for International Travel

- Visit the [CDC website](#) for information on international travel, including recommendations and requirements.

Childcare

Childcare settings and providers remain subject to [separate CDPH guidance](#). Application of modified quarantine to before and after care is addressed on [page 22](#).

Screening Testing

According to the August 11, 2021, [health order](#), schools and districts 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.

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:

- 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.

Staff Quarantine and Response Testing

CDPH and Cal/OSHA updated their guidance for isolation and quarantine in January 2022.

- Exposed persons, whether quarantined or not, should consider testing as soon as possible to determine infection status and follow all isolation recommendations if they test positive.
- Knowing one is infected early during quarantine enables (a) earlier access to treatment options, if indicated (especially for those that may be at risk for severe illness), and (b) notification of exposed persons (“close contacts”) who may also benefit by knowing if they are infected.
- If individual develops symptoms, they should also:
 - Self-isolate and test as soon as possible (do not wait until 5 days after exposure to retest if symptoms develop earlier); *and*
 - Continue to self-isolate if test result is positive, and contact their healthcare provider regarding available treatments and any questions concerning their care.

Diagnostic Testing

- An antigen test, nucleic acid amplification test (NAAT), or LAMP test are acceptable, however, it is recommended that persons use an antigen test for ending isolation.

- Exposed persons who were infected with SARS-CoV-2 within 90 days prior to their current exposure should also use an antigen test.
- Use of over-the-counter tests is also acceptable to end isolation or quarantine.

Masking

- During the days following isolation or exposure when masks are worn, all persons should optimize mask fit and filtration, ideally through use of a surgical mask or respirator (see [Get the Most out of Masking](#) for more information).

Symptom Self-monitoring

- Symptom self-monitoring should include checking temperature twice a day and watching for fever, cough, shortness of breath, or any other [symptoms that can be attributed to COVID-19](#) for 10 days following last date of exposure, even if self-quarantine is completed earlier.

Student Contact Tracing and Quarantine – 2 Options

CDPH guidance provides [two options for student contact tracing and quarantine](#): an individual-based tracing option and a group tracing option.

Individual-Based Tracing Option

Quarantine and Testing of Vaccinated Students Who are Close Contacts

Currently there is no duration limitation on these recommendations after individuals are fully vaccinated. See [CDPH's Guidance on Isolation and Quarantine of the General Public](#) 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 within the last 90 days who are asymptomatic do not need to quarantine.

- Fully vaccinated close contacts who remain asymptomatic do not need to quarantine and should get tested 3–5 days after exposure.
- Fully vaccinated or previously infected close contacts should self-monitor for COVID-19 symptoms and wear a well-fitting mask around others for a total of 10 days, especially in indoor settings.
- If symptoms develop, test and stay home.
- 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.

Quarantine and Testing of Unvaccinated Students Who Are 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 quarantine and continue to attend school for in-person instruction if they:

- Are asymptomatic;
- Continue to appropriately mask, as required;
- Test immediately after exposure and on or after day 5; and
- Continue to quarantine for all extracurricular activities at school, including sports, and activities within the community setting.
- SMCH and CDPH have updated their guidance to allow before and after school care programs to be considered as part of the school setting and thus students eligible for modified quarantine may continue to attend on-site before and afterschool care programs if:
 - They are located on the school site
 - They follow the CDPH K-12 Public Health Guidance, most specifically, the indoor mask requirement is enforced

- They follow the State’s public health order for schools to verify vaccination or test staff once per week

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

- Test as soon as a person is informed that they were a close contact of someone with COVID-19.
- Undergo twice-weekly testing.

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.

CDPH updated its **guidance** to allow modified quarantine to end after day 5 if a diagnostic specimen is collected on or after Day 5 from the date of last exposure and tests negative. Students exiting modified quarantine after Day 5 may also return to extracurricular activities at that time.

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 5 if a diagnostic specimen (e.g., antigen diagnostic test, PCR/molecular diagnostic test, or pooled PCR/molecular test) is collected on or after Day 5 from the date of last exposure and tests negative.

Group Tracing Option

Recommendations for All Students Exposed to Someone with COVID-19 in a K-12 School

- On January 12, 2022, the CDPH updated its guidance to allow schools the [option to do group tracing](#).
- Schools should notify students who spent more than a cumulative total of 15 minutes (within a 24-hour time period) in a shared indoor airspace (e.g., classroom) with someone with COVID-19 during their period of infectiousness.
 - Notification should occur to “groups” of exposed students (e.g., classmates, teammates, cohorts, etc.) rather than contact tracing to identify individual “close contacts” (e.g., those within 6 feet).
 - Notifications should be provided to all individuals considered exposed, including those who are vaccinated and/or recently infected.
 - For example, if a student in tenth grade is diagnosed with COVID-19, the school should notify groups with whom that student interacted as per the criteria above, such as those in the same classes, sports team, and/or other extracurricular cohorts.
 - A [sample notification letter is available here](#) for school edit and use.
- Exposed students, regardless of COVID-19 vaccination status or prior infection, should get tested for COVID-19 with at least one diagnostic test obtained within 3–5 days after last exposure.
 - In the event of wide-scale and/or repeated exposures, broader (e.g., grade-wide or campus-wide) once weekly testing for COVID-19 may be considered until such time that exposure events become less frequent.
 - Any FDA-approved antigen diagnostic test, PCR diagnostic test, or pooled PCR test is acceptable for evaluation of an individual’s COVID-19 status. For individuals who have been recently infected (within the past 90 days), antigen testing is strongly recommended as PCR results may remain persistently positive and not be indicative of a new active infection. Repeat antigen testing and/or confirmatory molecular testing should be considered in individuals who receive a

negative result with an antigen test but have symptoms specific for COVID-19 (such as loss of taste and smell).

- Exposed students who participate in testing may continue to take part in all aspects of K-12 schooling, including sports and extracurricular activities, unless they develop symptoms or test positive for COVID-19. They should test, report positive test results to the school, and follow other components of this guidance, including wearing face-coverings as directed.
 - Exposed students who develop symptoms should see [Section 4 of the K-12 Guidance](#).
 - Exposed students who receive a positive test result should follow the CDPH [isolation recommendations](#).

Quarantine for Exposed Employees Who Are Unvaccinated OR Vaccinated and Booster-Eligible But Have not Received Booster Dose per Cal/OSHA Guidance

Quarantine and testing is not required for asymptomatic employees who have recovered from COVID-19 in the last 90 days.

<p>Requirements apply to employees who are:</p> <ul style="list-style-type: none"> • Unvaccinated; <i>or</i> • Vaccinated and booster-eligible but have not yet received their booster dose.* <p>See CDC COVID-19 Booster Shots to determine who is booster eligible.</p> <p>*Employers are not required to exclude asymptomatic employees in this category if:</p> <ul style="list-style-type: none"> • A negative diagnostic test is obtained within 3-5 days after last exposure to a case; • Employee wears a face covering around others for a total of 10 days (please refer to the section in this FAQ on face coverings for additional face covering requirements); <i>and</i> • Employee continues to have no symptoms. 	<ul style="list-style-type: none"> • Employees must be excluded from the workplace for at least 5 days after their last close contact with a person who has COVID-19. • Exposed employees must test on day 5. • Quarantine can end and exposed employees may return to the workplace after day 5 if symptoms are not present and a diagnostic specimen* collected on day 5 or later tests negative. • If an employee is unable or chooses not to test and does not have symptoms, quarantine can end and the employee may return to the workplace after day 10. • Employees must wear face coverings around others for a total of 10 days after exposure, especially in indoor settings. Please refer to the section in this FAQ on face coverings for additional face covering requirements. • If an exposed employee tests positive for COVID-19, they must follow isolation recommendations. • If an exposed employee develops symptoms, they must be excluded pending the results of a test. • Employees are strongly encouraged to get vaccinated or boosted. <p style="text-align: right;"><i>*Antigen test preferred.</i></p>
--	---

When Quarantine Is not Required for Exposed Employees Who Are Boosted OR Vaccinated but Not Yet Eligible for Booster per Cal/OSHA Guidance

Quarantine and testing is not required for asymptomatic employees who have recovered from COVID-19 in the last 90 days.

<p>Requirements apply to employees who are:</p> <ul style="list-style-type: none">• Boosted; or• Vaccinated, but not yet booster-eligible. <p>See CDC COVID-19 Booster Shots to determine who is booster eligible.</p>	<p>Employees do not need to quarantine if they:</p> <ul style="list-style-type: none">• Test on day 5 with a negative result.• Wear face coverings around others for 10 days after exposure, especially in indoor settings. Please refer to the section in this FAQ on face coverings for additional face covering requirements.• If employees test positive, they must follow isolation recommendations.• If employees develop symptoms, they must be excluded pending the results of a test.
---	---

Isolation

For both vaccinated and unvaccinated students and staff for those diagnosed with COVID-19, schools should follow the [CDPH Isolation Guidance](#), which is summarized here.

<p>Requirements apply to <i>all</i> employees, regardless of vaccination status, previous infection, or lack of symptoms.</p>	<ul style="list-style-type: none">• Employees who test positive for COVID-19 must be excluded from the workplace for at least 5 days.• Isolation can end and employees may return to the workplace after day 5 if symptoms are not present or are resolving, and a diagnostic specimen* collected on day 5 or later tests negative.• If an employee is unable or chooses not to test and their symptoms are not present or are resolving, isolation can end and the employee may return to the workplace after day 10.• If an employee has a fever, isolation must continue and the employee may not return to work until the fever resolves.• If an employee's symptoms other than fever are not resolving, they may not return to work until their symptoms are resolving or until after day 10 from the positive test.• Employees must wear face coverings around others for a total of 10 days after the positive test, especially in indoor settings. Please refer to the section in this FAQ on face coverings for additional face covering requirements. <p style="text-align: right;"><i>*Antigen test preferred.</i></p>
---	---

How to Count Five Days for Isolation

If you develop symptoms after testing positive	Your 5-day isolation period should start over. Day 0 is your first day of symptoms. Follow the recommendations above for ending isolation for people who had COVID-19 and had symptoms .
If you had COVID-19 and had symptoms	Isolate for at least 5 days. To calculate your 5-day isolation period, day 0 is your first day of symptoms. Day 1 is the first full day after your symptoms developed. You can leave isolation after 5 full days.
If you test positive for COVID-19 and never develop symptoms	Isolate for at least 5 days. Day 0 is the day of your positive viral test (based on the date you were tested) and day 1 is the first full day after the specimen was collected for your positive test. You can leave isolation after 5 full days.

Source: [CDC](#)

Case Reporting

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 Health as soon as practicable (within 24 hours) using SPOT, California’s case reporting system. SMC Health staff will access information submitted through SPOT and will be in touch with the school or district COVID contact regarding the submission, as necessary. Use the [SPOT intake form](#) to begin the process for using SPOT.
- Schools or districts with questions about how to respond to a case or to use SPOT should contact SMC Health at COVID19_SchoolTeam@smcgov.org or 650-573-2346.
- The School/District COVID-19 Point Person and the assigned SMC 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 will report for all new cases (a line list) via SPOT.
- 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

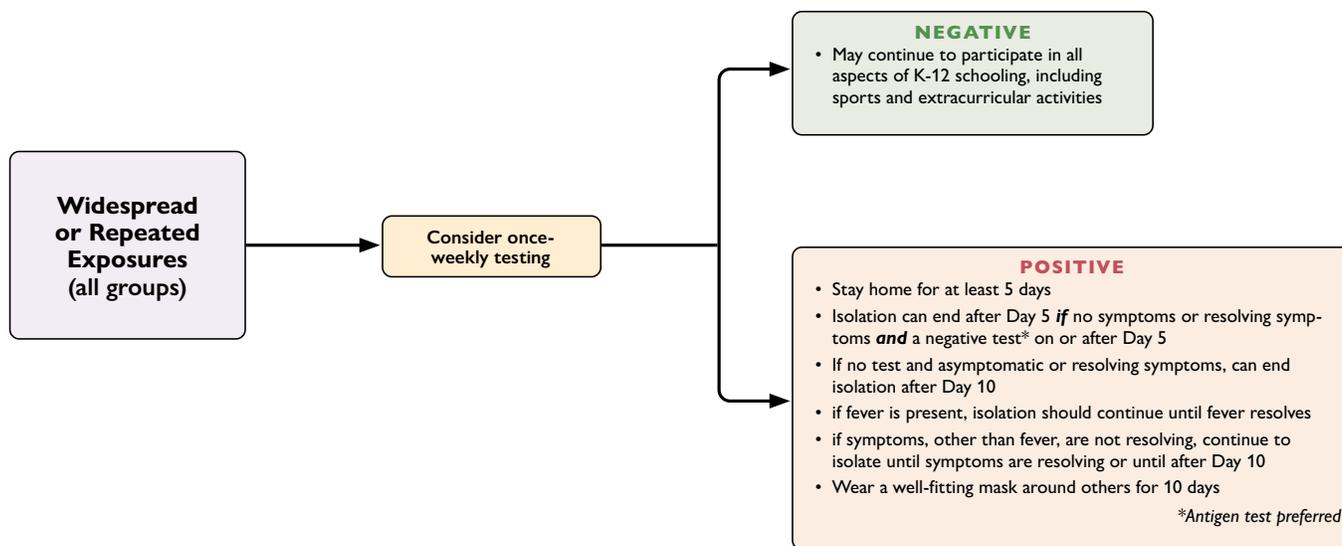
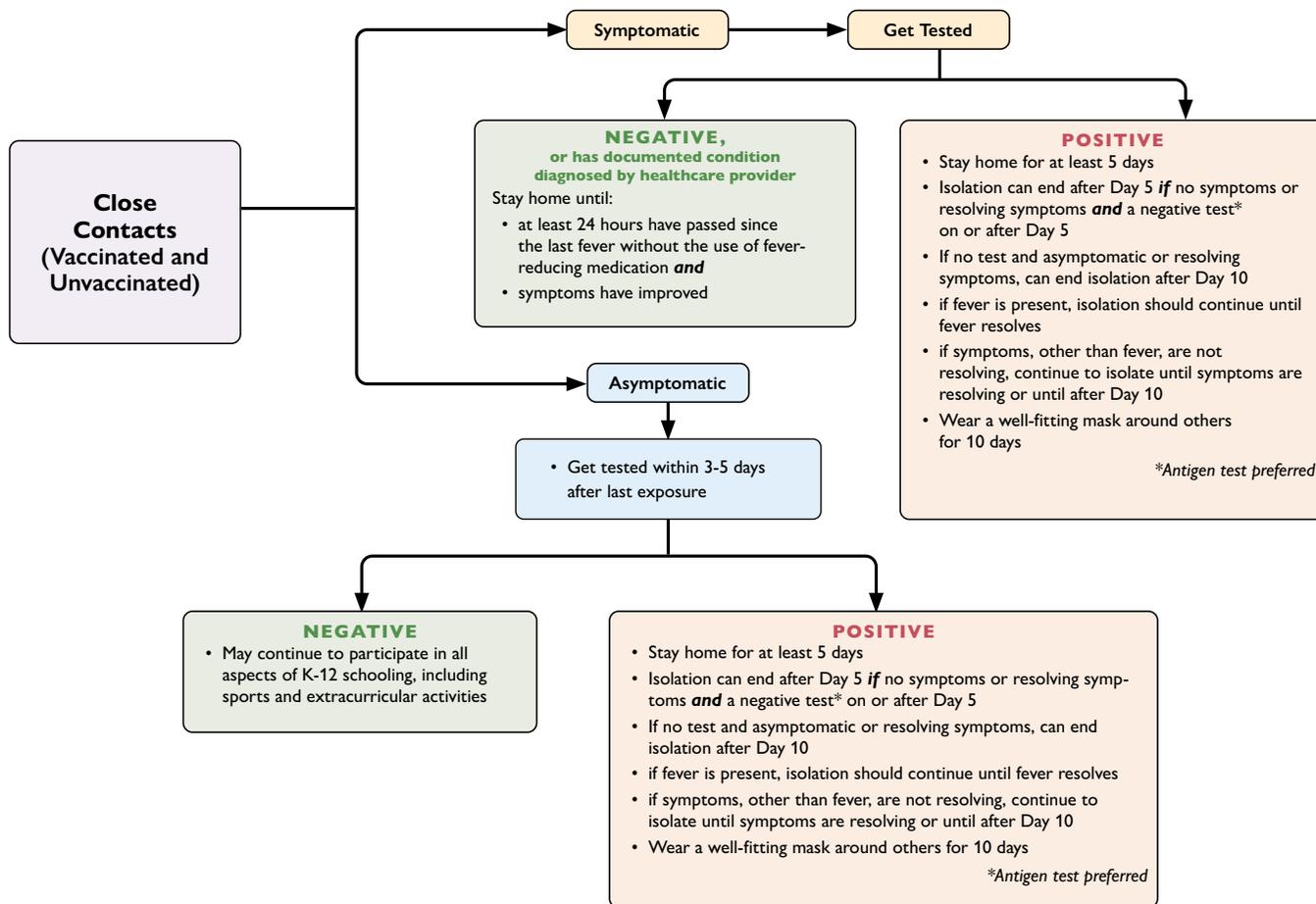
Cal/OSHA provides the following guidance for employers in the case of an outbreak:

- 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-foot physical distancing is required where feasible, both indoors and outdoors.

COVID-19 Student Exposure at School (CDPH)

Option 1: Group Contact Tracing*

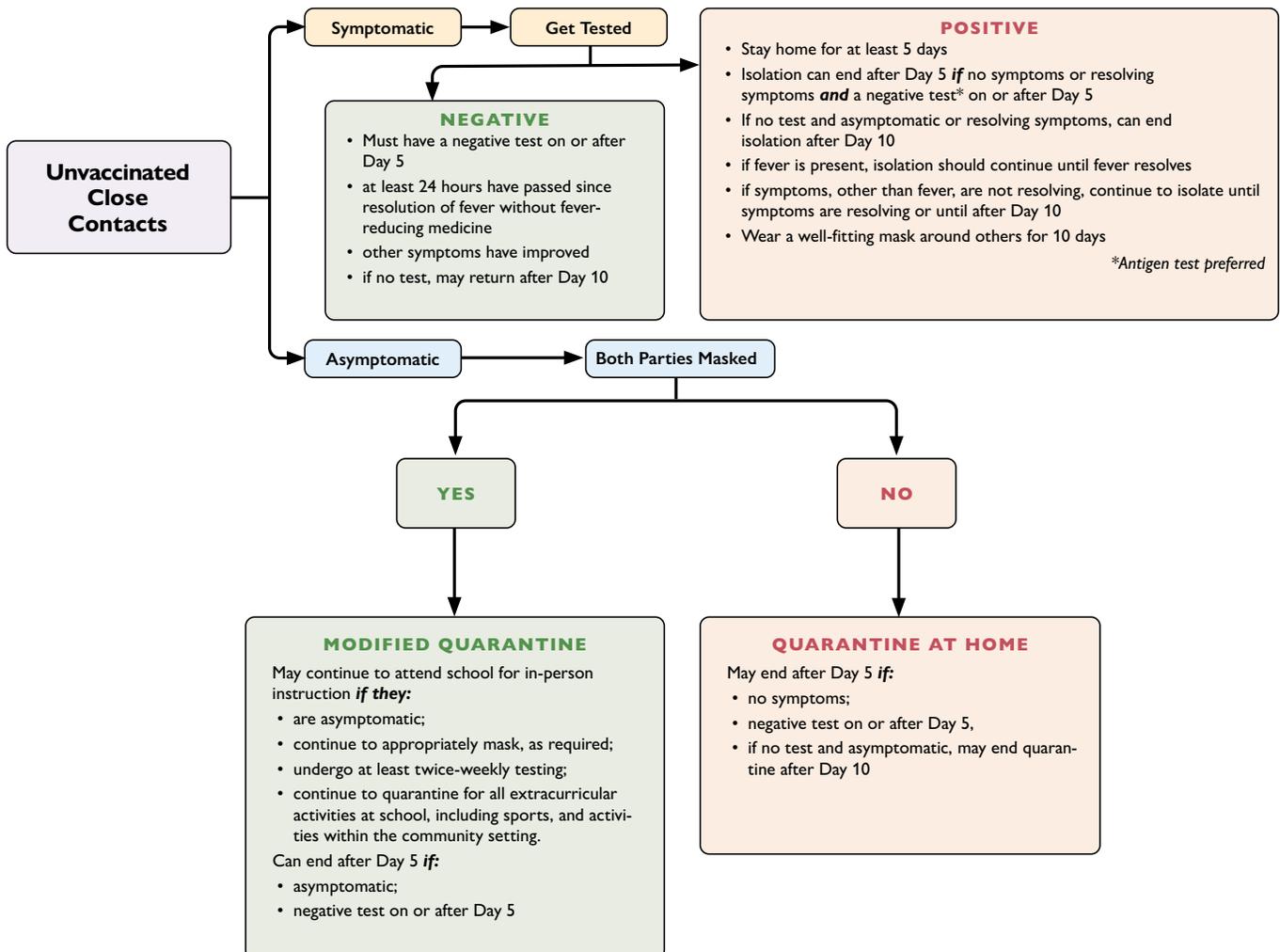
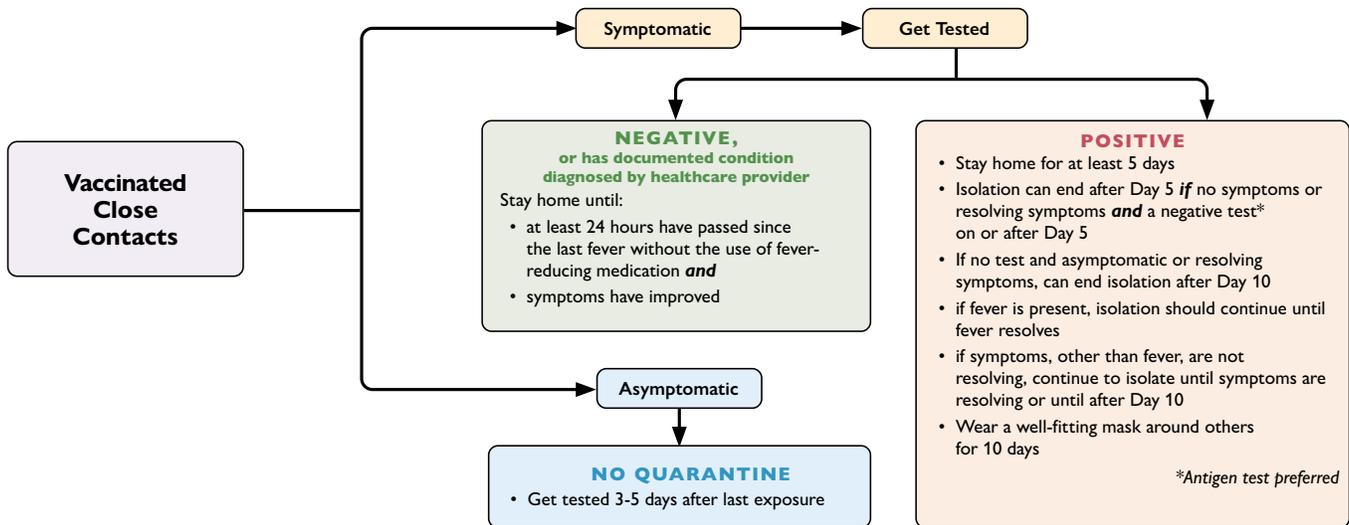
*Identify **groups** who shared the same indoor airspace for at least 15 minutes within 24 hours of someone with COVID-19



COVID-19 Student Exposure at School (CDPH)

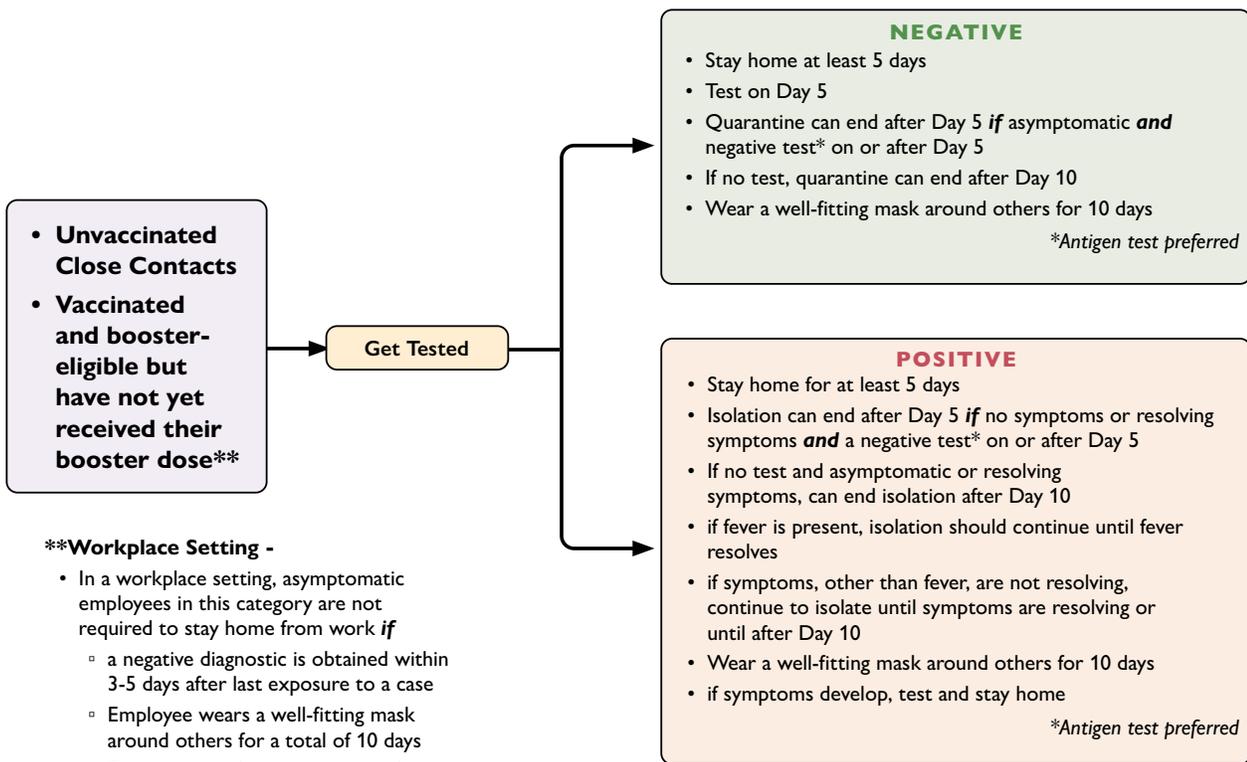
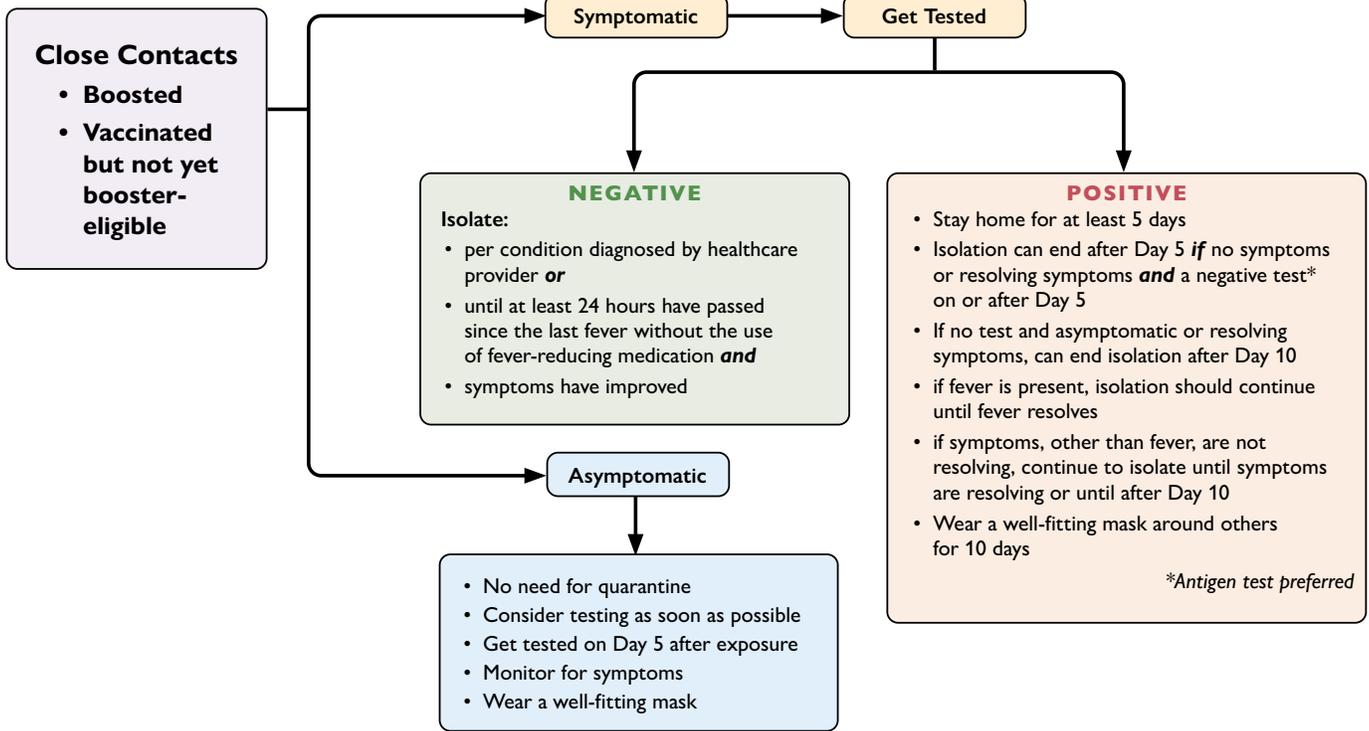
Option 2: Modified Quarantine*

*Identify **individuals** (close contacts) who were within 6 feet for at least 15 minutes within 24 hours of someone with COVID-19



COVID-19 School Staff Exposure (CDPH)

Note: Quarantine and testing is not required for asymptomatic employees who have recovered from COVID-19 in the last 90 days.



****Workplace Setting -**

- In a workplace setting, asymptomatic employees in this category are not required to stay home from work **if**
 - a negative diagnostic is obtained within 3-5 days after last exposure to a case
 - Employee wears a well-fitting mask around others for a total of 10 days
 - Employee continues asymptomatic

Appendix

- Self-Certification of COVID-19 Vaccination Status
- Vaccination Consent Form
- California Department of Public Health Testing Resources
- Updated Testing Guidance from the California Department of Public Health

Communication Templates

- Additional Resources for Schools
- Case in School
- Group Contact Tracing
- 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