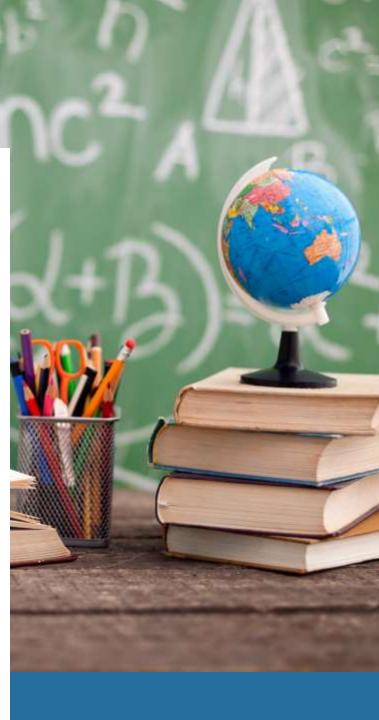
Return to School:

A guide to responding to COVID-19 cases in K-12 school settings. 2021-2022

August 17, 2021

Fresno County Department of Public Health.





Return to School: A guide to responding to COVID-19 cases in K-12 school settings

This document was designed to provide guidance for Fresno County K-12 schools in response to COVID-19 related scenarios. As students return to school and in-person instruction resumes without any physical distance requirements, we recognize the importance of protecting the health and safety of our students, school staff, and community. The goal of this document is to help school staff respond to different scenarios and cases of COVID-19. Fresno County Department of Public Health (FCDPH) also advises schools to prepare plans for remote instruction for students who may need to isolate or quarantine or in the event of class or school closures related to outbreaks. This document is applicable to all K-12 schools, public or private, throughout Fresno County.

The following guidance is included in this document:

- COVID-19 Prevention and Best Practices
- COVID-19 School Scenario Guidance
- Guidelines for COVID-19 Exposure Scenarios for Schools

We will continue to revise these documents as necessary and as guidance from the California Department of Public Health and CDC is updated, in particular:

<u>Guidance for COVID-19 Prevention in K-12 Schools | CDC</u> <u>K-12 Guidance 2021-22 School Year (ca.gov)</u> <u>Guidance for the Use of Face coverings (ca.gov)</u> <u>COVID-19 Emergency Temporary Standards Frequently Asked Questions (ca.gov)</u>

COVID-19 Prevention & Best Practices for Schools

Fresno County Department of Public Health's Best Practices

- Post or perform screening for recent COVID-19 positive close contact or COVID-19 symptoms for all students upon entry into first classroom of the day, AND for all staff, volunteers, or others when entering school buildings.
- Implement universal face coverings while indoors and on public transportation for all students, teachers, staff, volunteers, etc.
- Although masks are optional while outdoors, masks are recommended when unable to maintain physical distancing
- Availability of hand sanitizer at all entrances and commonly visited locations.
- Practice physical distancing in all indoor and outdoor settings when possible, particularly when not wearing face coverings such as in cafeterias.
- Assess and address adequacy of ventilation in all indoor school settings.
- Maximize space between students and between students and the driver on school buses, and open windows and keep air circulation open to outside air to the greatest extent practicable.
- For activities where physical distancing is difficult to maintain we recommend:
 - students stay with their class cohorts
 - \circ limit these activities to 15 minutes or less
 - stay outdoors as much as possible
- Maintain capacity for isolation of symptomatic students in a room with a separate entrance when students are on campus, with staff with appropriate PPE immediately available.
- Cleaning all high use surfaces at least daily.
- Minimize opportunities for contact where students/staff may congregate, i.e., start/end of the school day, lining up for lunch, etc.

Guidelines for COVID-19 Exposure Scenarios for Schools

This following is guidance for steps to take in response to confirmed and suspected positive cases on your school campus.

Scenario	Response and Isolation Steps	Communication and Contact Tracing Steps
1. Student has tested positive for COVID-19	Student to remain at home for 10 days with at least 24 hours of no fever and resolution of symptoms. If asymptomatic, the 10 days begins on the date the student was tested. If symptomatic, the 10 days begins on the day the symptoms began. If symptoms persist beyond 10 days, student to remain at home until at least 1 day after symptoms have resolved without the use of medication. Identify locations where the index case spent more than 15 minutes over a 24-hour period in the two days prior to the day the positive test was collected OR to symptom onset: classroom, library, cafeteria, school bus, etc. If these locations have not been cleaned and disinfected since the student was present, close off areas used by the person who is sick and do not use those areas until after cleaning and disinfecting, wait as long as possible (at least several hours) before you clean and disinfect.	 School to identify close contacts in the two days prior to the day the positive test was collected OR to symptom onset, up to the time the student was last in class. School to send notification letter to all close contacts. Advise ALL household and close contacts to quarantine for 10 days and continue to wear a mask while indoors through Day 14 and self-monitor for COVID-19 symptoms through Day 14. If symptoms occur during this period, immediately self-isolate and contact their local public health department or licensed healthcare provider and seek evaluation and testing. When both parties (index and close contact) were wearing a mask in the indoor classroom setting, unvaccinated students who are close contacts (more than 15 minutes over a 24-hour period within 0-6 feet indoors) may undergo a modified 10-day quarantine as follows. They may continue to attend school for in-person instruction if they: Are asymptomatic; Continue to appropriately mask, as required; Undergo at least twice weekly testing during the 10-day quarantine; and iv. Continue to quarantine for all extracurricular activities at school, including sports, and activities within the community setting. Alternatively, Quarantine can end for close contacts and household members after Day 7 if a diagnostic specimen is collected after Day 5 from the date of last exposure and tests negative if they: Are asymptomatic; Continue to appropriately mask, as required; Continue to appropriately mask, as required; Continue to appropriately mask, as required; Continue to quarantine for all extracurricular activities at school, including sports, and activities within the community setting through day 10 <!--</td-->

	If other school-aged children are in the household, notify their respective school sites. Notify FCDPH liaison. Notify school community including staff and parents of a new positive case. Notification to indicate the date the school was informed of the positive case and the number of new positive cases that day without releasing information that would identify whether the positive case was a student or staff member or what grade or class was involved.
2. Student or teacher or staff person or volunteer (employee) is fully vaccinated but is a close contact	OK to stay in school without additional restrictions if remain asymptomatic. Recommend testing for COVID-19 3-5 days after exposure, even if no symptoms. Fully vaccinated close contact should wear a mask indoors in public for 14 days following exposure or until test result is negative and isolate as described in #1 for 10 days if test result is positive.* If vaccinated close contact becomes symptomatic, follow guidance for symptomatic students or employees in this document. This guidance applies to close contacts who are household members as well. * <u>When You've Been Fully Vaccinated CDC</u>
3. Student is a close contact while wearing a mask when index case not wearing a mask	Recommend quarantine for close contacts as described in #1 above.
4. Student is a close contact while not wearing a mask when index case was wearing a mask	Recommend quarantine for close contacts as described in #1 above.
5. Teacher or staff person or volunteer (school employee) is an unvaccinated close contact	Follow CalOSHA ETS guidance for close contact: The school must exclude from the workplace unvaccinated employees who had a close contact until the applicable return to work criteria are met. (An exception applies if the employee had COVID-19 in the preceding 90 days and has remained symptom free.) If the unvaccinated employee had no symptoms, they may return to work

		when 10 days have passed since the last known close contact. If the employee developed any symptoms, the person can be returned if they either meet the criteria required to return a COVID-19 case, or the person (1) tested negative using a PCR test after the onset of symptoms, and (2) waited 10 days following the last known close contact and (3) has been symptom-free for at least 24 hours without fever reducing medications.
6. Student becomes ill off school campus and is waiting for test results	Student to remain at home for 10/1 or if symptoms persist beyond 10 days, for at least one day after symptoms resolve without the use of medication. OK to return to school if test negative for COVID (PCR) AND symptoms have resolved for at least one day, or if test negative for COVID with either PCR or rapid antigen and evaluated by a licensed health care provider AND symptoms have resolved for at least one day, OR if a licensed health care provider determines that symptoms are not new or worsening based on a chronic medical condition OR if a licensed health care provider has made an alternative diagnosis based on a diagnostic test such as a positive strep screen or a positive screen for influenza.	Recommend student follow up with physician for evaluation and testing. Notify student's family that other school-aged household contacts should not return to school for 10 days from last contact with index case. Household contacts may end quarantine if student who is index case may return to school based on criteria described here AND household contacts have been asymptomatic for at least one day. Notify classroom teacher and advise teacher to monitor other students for symptoms. If second confirmed or suspected case in classroom, school to identify close contacts in classroom and other school settings in the two days prior to illness up to the time the student was last in class, including key contributing factors. Identify close contacts with symptoms and advise them to follow guidance in #6, or if asymptomatic, begin modified quarantine or quarantine as described in #1 and notify FCDPH liaison. If student or close contact test positive for COVID, identify and notify close contacts, as well as school community, and FCDPH liaison as described in #1.
7. Student develops COVID symptoms while at school	Place student in isolation room with separate entrance until transported home or to higher level of care. More than one student may be placed in isolation room if all masked and physically distanced as much as possible. If unable to maintain six feet distance from index case, staff person with full PPE (N95 or higher mask, goggles/eye protector, gown, and gloves) must be immediately available to evaluate or assist student if necessary or arrange for prompt transfer to appropriate level of care. Student may be accompanied while moving from classroom or other school site to	Recommend student follow up with physician, nurse practitioner, or other licensed medical professional practicing under the license of a physician for evaluation and testing. Notify student's family that all household contacts should follow modified quarantine or quarantine recommendations as described in #1. Household contacts may end modified quarantine or quarantine if index case tests negative for COVID AND household contacts have been asymptomatic for at least one day without the use of medication OR if a licensed health care provider determines that symptoms are not new, or worsening based

	isolation room by staff person with face covering AND observing physical distancing protocols. If closer contact required, staff person with full PPE must accompany child to isolation room. Isolation room to be cleaned and sanitized after symptomatic student leaves. Room cannot be re-used until cleaning and disinfecting completed. Student to remain at home for 10/1 or if symptoms persist beyond 10 days, for at least one day after symptoms resolve without the use of medication. OK to return or remain in school if test negative for COVID (PCR) AND symptoms have resolved for at least one day, or if test negative for COVID with either PCR or rapid antigen and evaluated by a licensed health care provider AND symptoms have resolved for at least one day without the use of medication OR if a licensed health care provider determines that symptoms are not new, or worsening based on a chronic medical condition OR if a licensed health care provider has made an alternative diagnosis based on a diagnostic test such as a positive strep screen or a positive screen for influenza.	on a chronic medical condition OR if a licensed health care provider has made an alternative diagnosis based on a diagnostic test such as a positive strep screen or a positive screen for influenza. Notify classroom teacher and advise teacher to monitor other students for symptoms. If second confirmed or suspected case in classroom, school to identify close contacts in classroom and other school settings in the two days prior to illness up to the time the student was last in class, including key contributing factors. Identify close contacts with symptoms and advise them to follow modified quarantine or quarantine guidance as described in #1 and notify FCDPH liaison. If student tests positive for COVID, identify and notify close contacts, school community, and FCDPH liaison.
8. Member of student's household tests positive	Student, and ALL household contacts, including other school-aged household contacts, need to quarantine and not return to work or school for 10 days from date of last contact with index case during index case isolation period. Alternatively, quarantine can end after Day 7 if a diagnostic specimen is collected after Day 5 from the date of last exposure and tests negative as described in #1.	If student in same household becomes symptomatic, refer to scenario #6 or #7 above. If student tests positive for COVID, refer to scenario #1 above. Notify school community including staff and parents of a new positive case. Notification to indicate the date the school was informed of the positive case and the number of new positive cases that day without releasing information that would identify whether the positive case was a student or staff member or what grade or class was involved.
9. Teacher or staff or volunteer (school employee) tests positive	Follow CalOSHA ETS. School employee to remain at home for 10/1. If asymptomatic, the 10 days begins on the date the teacher was tested. If symptomatic, the 10 days begins on the day the symptoms began. If symptoms persist beyond 10 days, teacher to remain at home until at least1 day after symptoms have resolved without the use of medication. If not cleaned and disinfected since teacher was last in class or in any other school setting for 15 minutes or more over a 24- hour period since the two days prior to testing positive or becoming symptomatic, close off areas used by the person who is	School to identify close contacts in the two days prior to the day the positive test was collected OR to symptom onset, up to the time the teacher was last in class. School to send notification letter to all close contacts. Advise ALL household and close contacts to follow quarantine or modified quarantine as described in #1. If symptoms occur, immediately self-isolate and contact their local public health department or physician, nurse practitioner, or other licensed medical professional practicing under the license of a physician and seek evaluation and testing. If there are school-aged children are in the household, notify their respective school sites.

	sick and do not use those areas until after cleaning and disinfecting, wait as long as possible (at least several hours) before you clean and disinfect.	Notify FCDPH liaison. Notify school community including staff and parents of a new positive case. Notification to indicate the date the school was informed of the positive case and the number of new positive cases that day without releasing information that would identify whether the positive case was a student or staff member or what grade or class was involved.
10. Teacher or staff or volunteer (school employee) has symptoms.	Follow CalOSHA ETS and #9 for school employees who either test positive for COVID-19 or are awaiting evaluation for COVID-19 symptoms. COVID-19 symptoms means fever of 100.4 degrees Fahrenheit or higher, chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, or diarrhea, unless a licensed health care professional determines the person's symptoms were caused by a known condition other than COVID-19.	
11. Student feels ill with COVID symptoms, but parent/guardian will NOT be testing child.	Student to remain at home for 10/1. The 10 days begins on the day the symptoms began. If symptoms persist beyond 10 days, student to remain at home until at least 1 day after symptoms have resolved without the use of medication OR if a licensed health care provider determines that symptoms are not new, or worsening based on a chronic medical condition OR if a licensed health care provider has made an alternative diagnosis based on a diagnostic test such as a positive strep screen or a positive screen for influenza.	Recommend evaluation and testing with physician, nurse practitioner, or other licensed medical professional practicing under the license of a physician for index case, and household members to quarantine as described in #1. Notify teacher of symptomatic student and to monitor class to determine if others become ill. If second confirmed or suspected case in classroom, school to identify close contacts in classroom and other school settings in the two days prior to illness up to the time the student was last in class, including key contributing factors. Identify close contacts with symptoms and advise them to follow modified quarantine or quarantine guidance as described in #1 above, and if symptoms occur, immediately self-isolate and contact their local public health department or physician, nurse practitioner, or other licensed medical professional practicing under the license of a physician and seek evaluation and testing to guide further isolation recommendations. If student tests positive for COVID, identify and notify close contacts, school community, and FCDPH liaison.
12. Student tests negative but has COVID symptoms	Student to remain at home while symptoms persist consistent with screening protocols at school. Ok to return to school after negative PCR COVID test AND all symptoms	Recommend evaluation and testing with physician, nurse practitioner, or other licensed medical professional practicing under the license of a physician for index case.

(possible false negative)	have resolved without the use of medications OR if a physician, nurse practitioner, or other licensed medical professional practicing under the license of a physician determines that symptoms are not new, or worsening based on a chronic medical condition OR if a licensed health care provider has made an alternative diagnosis based on a diagnostic test such as a positive strep screen or a positive screen for influenza.	Notify teacher of symptomatic student and to monitor class to determine if others become ill. If second confirmed or suspected case in classroom, school to identify close contacts in classroom and other school settings in the two days prior to illness up to the time the student was last in class, including key contributing factors. Close contacts to follow modified quarantine or quarantine guidance as described in #1 above, and if symptoms occur, immediately self-isolate and contact their local public health department or physician, nurse practitioner, or other licensed medical professional practicing under the license of a physician and seek evaluation and testing to guide further isolation recommendations.
13. AM Kindergarten student or teacher tests positive	PM Kindergarten sharing classroom with AM class with positive case shall move class to another location on the day of notification unless classroom cleaned since index case tested positive. See scenario #1 and/or #8 regarding student tests positive for additional guidance, or #5 if teacher tests positive.	See scenario #1, #5, and/or #8 above.
14. Outbreak of cases on campus	Review all situations when one or more positive cases on a school campus with FCDPH, or three or more positive cases within a 2-week period on a school campus with FCDPH consistent with CDPH guidance.	Consider classroom or school shutdown on case-by-case basis in coordination with FCDPH and consistent with CDPH guidance.
15. What should a school do if a student is not wearing a face covering?	Recommend request documentation of a medical, mental health, or disability exemption from a physician, nurse practitioner, or other licensed medical professional practicing under the license of a physician based on a diagnosis that is documented in their medical record to not wear a face covering. Students with a medical exemption from a licensed health care provider based on a diagnosis that is documented in their medical record to not wear a face covering are expected to wear a face shield with a drape.	
16. What should a school do if a student has a medical exemption from a licensed health care provider to not wear a face covering and is	Verify that a physician, nurse practitioner, or other licensed medical professional practicing under the license of a physician has determined that the student is medically exempt from wearing both a mask as well as face shield and drape. If there is a medical exemption for both a mask as well as a face shield and drape from a physician, nurse	

not wearing a face shield and drape?	practitioner, or other licensed medical professional practicing under the license of a physician that is based on a diagnosis documented in their medical record, consider assigning students to sit in seats that are physically distanced from others in the classroom.	
17. What should a school do for students in TK to second grade if the student is not wearing a face covering or a face shield and drape?	See scenario #16 and #17 above	
18. What should a school do if a student engages in high-risk behaviors such as speaking loudly, yelling, or singing without a mask or face shield with drape, or not following directions to maintain physical distancing?	Consider alternative educational models other than in-person classroom instruction.	
19. What if a student or staff member has a chronic condition causing one of the COVID-19 symptoms?	FCDPH Health Officer Order of 6-28-2021 requires individuals with new or worsening COVID-19 symptoms to isolate as described in #2. Students and staff members with a chronic condition that in the opinion of a physician, nurse practitioner, or other licensed medical professional practicing under the license of a physician is causing one of the COVID-19 symptoms can return to school if they have a note from a physician, nurse practitioner, or other licensed medical professional practicing under the license of a physician indicating that their symptoms are related to a chronic condition and are not new or worsening. The physician, nurse practitioner, or other licensed medical professional practicing under the license of a physician should document in their medical record the chronic condition that is the basis for the symptom(s) in question. If a student or staff member has recurrence of similar symptoms related to the same chronic condition on a later date, schools should consider both symptoms and prior notes written by a physician, nurse practitioner, or other licensed medical professional practicing under the license of a physician should document in their medical record the chronic condition that is the basis for the symptom(s) in question. If a student or staff member has recurrence of similar symptoms related to the same chronic condition on a later date, schools should consider both symptoms and prior notes written by a physician, nurse practitioner, or other licensed medical professional practicing under the license of a physician when determining next steps. Students or teachers who have fever, cough, or shortness of breath when they are	

	screened upon entry to school or during school should be advised to stay at home or return to home until their symptoms have resolved even if they have been diagnosed with a chronic condition that in the opinion of a physician, nurse practitioner, or other licensed medical professional practicing under the license of a physician is causing one of the COVID-19 symptoms.	
20. Student or teacher staff or volunteer (school employee) had documented and test- confirmed COVID-19 in past 90 days and is a close contact		If student or school employee was previously diagnosed with laboratory-confirmed COVID- 19 and has remained asymptomatic after recovery, retesting or quarantine is not recommended if another exposure occurs or might have occurred within 90 days after the date of symptom onset from the initial SARS- CoV-2 infection.
21. What if a student or staff member has one of the COVID symptoms but has been diagnosed with another infectious disease or medical condition?	Students or staff members may also return to school sooner than 10 days if their symptoms have resolved and if a physician, nurse practitioner, or other licensed medical professional practicing under the license of a physician has determined that the cause for their symptoms is due to another infectious process or medical condition that is confirmed by diagnostic testing, such as a positive strep test for sore throat, or a positive influenza test for flu symptoms. Students or teachers who have fever, cough, or shortness of breath when they are screened upon entry to school or during school should be advised to stay at home or return to home until their symptoms have resolved even if they have been diagnosed with a condition other than COVID-19.	
22. Can school nurses that are identified as close contacts quarantine under the health care worker guidance?	Quarantine guidance for school nurses falls under CalOSHA Emergency Temporary Standards.	

Transportation Services

Scenario	Response and Isolation Steps	Communication and Contact Tracing Steps
23. Bus driver or student rider on bus tests positive	Refer to #1 or #9 above.	Refer to #1 or #9 above. Conduct contact tracing consistent with guidance for school scenarios described above, paying attention to key contributing factors. Consult with FCDPH if questions regarding determining close contacts on bus.

After school programs

Scenario	Response and Isolation Steps	Communication and Contact Tracing Steps
24. Student or teacher or staff tests positive, or has symptoms	Ensure availability of space to isolate children or staff with symptoms, with staff person with appropriate PPE available to monitor while awaiting disposition to home or for higher level of care consistent with guidance in above scenarios. Refer to #1, #3, and/or #8 above.	Conduct contact tracing consistent with guidance for school scenarios described above, while determining if any close contacts in alternative settings utilized by after-care program. If any close contacts with symptoms identified, consider key contributing factors and notify FCDPH. Refer to #1, #3, and/or #8 above. Notify school community of positive cases.

Definitions:

Testing: Both PCR and rapid antigen tests are available. PCR is considered the, "gold standard". When rapid antigen testing is used for a symptomatic patient, a negative test should be confirmed with a PCR test. If rapid antigen testing is used for asymptomatic screening and surveillance, a positive test should be confirmed with a PCR test. For more information regarding rapid antigen testing, please refer to the Abbott BinaxNOW Information for Use in Schools at <u>www.fcdph.org/schoolhealth</u>.

10/1: Current CDC guidelines state that the index case must self-isolate for at least 10 days from the date symptoms began (for symptomatic patients) OR at least 10 days from the day the positive test was collected, PLUS one day with no symptoms without the use of medications. If index case has serious underlying medical conditions, contact FCDPH for consultation regarding isolation period.

Index case: person with a positive COVID test. In these scenarios, index case also refers to the person (student, teacher, or staff) who reports symptoms.

Close contact*: Close contact is defined as someone who has been within 6 feet of an infected person for a total of 15 minutes or more over a 24-hour period, cumulative time, during the infectious period. For the purposes of determining a close contact, cumulative time is defined as the period of time of exposure to ANY/ALL COVID-19 positive person(s), and is calculated as 15 minutes or more of time where a close contact has been in contact to a person(s) positive with COVID-19 while that person(s) was infectious, i.e. 2 days prior to symptom onset while symptomatic, or 2 days prior to test date if asymptomatic, up to the last contact with the COVID-19 positive person(s). The close contact definition applies in both the indoor and outdoor settings. If questions about whether an individual meets the criteria for a close contact, refer to key contributing factors. Refer additional questions regarding close contact criteria to FCDPH.

Outbreak: Two or more confirmed COVID positive cases in a classroom OR three or more confirmed COVID positive cases on the school campus within 14 days.

Quarantine: Applies in both indoor and Separates individuals who are close contacts of a confirmed COVID positive case but who are not yet ill. Individuals who are close contacts **and asymptomatic** may discontinue quarantine after Day 10 from the date of last exposure **without** testing. Household close contacts quarantine for **10** days after last close contact with index case while they are in isolation. All contacts released from quarantine before Day 14 must Self-monitor for COVID-19 symptoms through Day 14 and if symptoms occur, immediately self-isolate and contact their local public health department or healthcare provider and seek testing.

School nurses may return to work during staffing shortages after Day 7 from the date of last exposure **with** a PCR test performed after Day 5 and a negative result. After this time, contacts must use surgical face masks at all times during work and continue to use face coverings when outside the home through Day 14 after last exposure.

- 1. **Modified Quarantine:** When both parties were wearing a mask in the indoor classroom setting, unvaccinated students who are close contacts (more than 15 minutes over a 24-hour period within 0-6 feet indoors) may undergo a modified 10-day quarantine as follows. They may continue to attend school for in-person instruction if they:
 - i. Are asymptomatic;
 - ii. Continue to appropriately mask, as required;
 - iii. Undergo at least twice weekly testing during the 10-day quarantine; and
 - **iv.** Continue to quarantine for all extracurricular activities at school, including sports, and activities within the community setting.
 - v. Quarantine can end after Day 7 if a diagnostic specimen is collected after Day 5 from the date of last exposure and tests negative.

Modified quarantine or quarantine can end after Day 7 if a diagnostic specimen is collected after Day 5 from the date of last exposure and tests negative as described in scenario #1.

Isolation: Separates infected people who have a confirmed COVID test from others. Symptomatic COVID positive individuals must isolate for a minimum of 10 days from onset of symptoms and at least one day without fever and an improvement in respiratory symptoms. Asymptomatic COVID positive individuals must isolate for 10 days from test collection date.

Potential Scenarios	Key Contributing Factors	Potential Responses/Actions
 Potential Scenarios Student has tested positive for COVID-19 Student feels ill and is waiting for test results Student develops COVID symptoms while at school Member of student's household tests positive Teacher tests positive Student feels ill with COVID symptoms but parent will not be testing child Student tests negative but has COVID symptoms (possible false negative) 	Key Contributing Factors Was index case wearing mask properly? Was social distancing maintained? Duration of exposure to index case. COVID-19 confirmed or suspected Index case symptomatic or asymptomatic Location of exposure - classroom, outdoors, other indoor setting Proper PPE used? Prior positive cases in	 Potential Responses/Actions Notify school community of COVID positive cases in the child's classroom or school Complete contact tracing Quarantine close contacts Inform potential close contacts to self-monitor, follow up with physician if symptoms develop. Sanitize and disinfect potentially contaminated equipment, supplies, and rooms Close classroom Contact the Fresno County Department of Public Health (FC DPH)
 Administrator or staff member, or volunteer tests positive Administrator or staff, or volunteer feels ill with COVID symptoms AM Kindergarten student or teacher tests positive Outbreak of cases on campus Bus driver, or student rider on bus, tests positive Student or teacher in after school program tests positive 	 classroom? Prior positive cases on school campus? Type of transportation to and from school Windows open or closed on bus Presumed source of spread to index case-school vs community Household contacts at other schools Close contacts in school sports or other after-school programs 	 Recommend testing if not already done Recommend evaluation from physician Follow up contact with index case and/or close contacts scheduled

Covid-19 School Scenario Guidance