COVID-19
School Safety Guidelines

Georgia School for the Deaf
Guidelines

- **Purpose:** To establish guidelines governing the employee and student response to COVID-19
- **Scope:** These guidelines apply to full-time and part-time employees and to all students at the school.
- **Responsibility:** School-level administrators are responsible for ensuring employees and students comply with the guidelines in this document.

I. Introduction

The health and safety of employees and students at school is a top priority, and in these unprecedented times, that priority will continue to guide operational decisions. This document establishes guidelines that employees and students must follow. Employees must sign the Receipt/Acknowledgment of the COVID-19 Workplace Guidelines Form on page twelve (12) of this document and return it to Leslie (gray box), Sharion, Jamie H. or Bobby within two (2) work days.

II. Failure to Comply with School Safety Guidelines

**Employees:**
- To provide the best opportunity to avoid direct exposure to COVID-19, it is imperative that all employees and students follow the safety guidelines.
- Employees who are noncompliant with the school safety guidelines will be sent home for the day. Employees who continue to disregard school safety guidelines may receive additional disciplinary action, up to and including termination of employment.

**Students:**
- The superintendent or her designee will meet with students who are purposely noncompliant with the school safety guidelines. Parents/guardians of these students will be contacted. Repeated purposeful noncompliance with the school safety guidelines may result in disciplinary action.

III. School Safety Requirements

**A. Identification (ID) Badge Required at All Times on Campus**

**Employees:**
- To facilitate both safety and contact tracing, all on-campus employees must use their school-issued ID badge to enter buildings.
- Each employee must individually swipe his/her ID badge to enter a building- employees who enter a building at the same time must each use his/her ID badge.
- Any employee that does not have his/her ID badge must report immediately to the superintendent’s office.
B. Masks

Employees:

- On-campus employees are required to have an accessible mask with them at all times. The mask must be used when the employee is outside of his/her personal space and social distancing cannot be ensured.
- Employees may wear masks provided by the school or may wear masks they bring to school as long as the masks are in accordance with recommendations regarding masks from the Center for Disease Control (CDC), Department of Public Health (DPH), and Georgia Department of Education (GaDOE).
- Group teaching/communication with students must occur without a mask while maintaining appropriate social distancing, as student IEPs require access to direct instruction in American Sign Language (ASL). ASL cannot be delivered as a full language while wearing any type of mask. One-on-one support will require both the student and the staff member to wear a mask.

Students:

- At this point in time, the CDC, DPH, and GaDOE recommend that students wear a mask, but it is not a requirement.
- It is our expectation that students wear masks whenever social distancing cannot be ensured (transition times, one-on-one support, etc.)
- Students may wear masks provided by the school or masks they bring to school.

C. Social Distancing and Physical Touch Guidance

Employees:

- Employees will maintain a minimum of a six (6) foot distance between themselves and any other person. When this is not possible, employees must wear a mask.
- Employees may not enter another employee’s personal space (office, classroom, etc.) unless assigned to that space or with written permission from the superintendent. Exceptions include: Admin Team (Leslie, Sharion, Jamie H. and Bobby), and urgent intervention required by the maintenance, housekeeping or IT staff. These staff members will wear masks and/or maintain appropriate social distancing.
- Non-urgent housekeeping/maintenance/IT work will be done before/after staff work hours.
- Trash cans must be placed outside of personal space by 2:00 P.M. for removal.
- If a student needs physical touch guidance, the superintendent or his/her designee will grant approval for employees to provide this guidance to a student. Employees must request this permission in writing.
- Employees must wear a mask and wash their hands using guidance from the CDC, DPH, and GaDOE before and after providing physical touch guidance.

Students:

- Students are expected to maintain a minimum of a six (6) foot distance between themselves and any other person whenever possible in school and the dorm. When this is not possible, it is our expectation that students wear a mask.
D. Hand Washing/Hand Sanitizer
Employees and students:
- All employees and students must, in accordance with CDC, DPH, and GaDOE recommendations, wash their hands and/or use hand sanitizer when hand washing is not practical. Hand sanitizer is located in numerous locations on campus.

E. Cleaning/Disinfecting
Employees:
- Employees must ensure that shared workspaces/property (student desks, tables, toys, etc.) are cleaned/sanitized throughout the school day. Disinfectant will be provided for this purpose.

Students:
- Students may be asked to complete cleaning/sanitizing tasks as appropriate.

F. Student Laptops/Desktops
Employees and students:
- Each student (grades 1-12) will be assigned a laptop that will be the only one he/she uses at school.
- Each student will get his/her laptop 1st period each morning and keep it throughout the school day.
- Laptops will not go outside of the building other than to ASL class (MS/HS) and will not be taken home or to the dorm.
- Laptops/desktops in the dorm lobbies will be assigned to individual students and will not be permitted to leave the assigned lobby.
- Teachers are responsible for all school laptops being returned to 1st period classroom docks at the end of each day.
- Dorm staff are responsible for all dorm laptops being returned to lobby docks.

G. On-campus Wellness Screenings
Employees:
- Employees will have a temperature scan with a hands-free digital thermometer upon arrival on campus. Andy Gentry (paramedic) will conduct 1st shift staff screening at the main gate each morning beginning at 7:30 A.M. 1st shift staff who arrive prior to this time must report to the cafeteria from 7:15 - 7:50 A.M. to be screened (Leslie/Sharion). 2nd and 3rd shift employees will be screened by Kathy Barnes (RN) upon arrival.
- All employees must confirm satisfactory completion of the required Daily Wellness Self-Assessment (DWSA) with the screener (see pages ten (10) and eleven (11))
- If an employee’s screening indicates a temperature of 100.4 degrees or higher and/or indicates that the DWSA indicated unusual symptoms related to COVID-19, he/she cannot enter/remain on campus. He/she should follow the guidance from the CDC, DPH, and GaDOE regarding self-care.
- Random hands-free digital temperature checks will be completed during the school day.
- An employee’s health status will be kept confidential.
Students:
- For students engaged in the remote learning model or in-person day students who have a temperature of 100.4 degrees or higher measured at home and/or indicate having unusual symptoms related to COVID-19 at home, the student’s parent/guardian or the student (over 18 years old) must notify Ms. Jennifer Sanford at jsanford@doe.k12.ga.us or (706)777-2200 or Ms. Jeannie Newman at jnewman@doe.k12.ga.us or (706)777-2249 by 8:00 A.M. Ms. Sanford/Ms. Newman will contact Leslie Jackson, Superintendent.
- Students will have a temperature scan with a hands-free digital thermometer and a wellness assessment developed by nurse Kathy upon arrival on campus (dorm students with nurse Kathy, day students with Leslie/Sharion in the cafeteria).
- If a student’s screening indicates a temperature of 100.4 degrees or higher and/or indicates that he/she has unusual symptoms related to COVID-19, he/she cannot enter/remain on campus. The student will be isolated until he/she can be assessed by nurse Kathy Barnes or Andy Gentry (paramedic) and transportation arranged if indicated by this assessment. Parents and should follow the guidance from the CDC and DPH.
- Random hands-free digital temperature checks will be completed during the school day.
- A student’s health status will be kept confidential.

H. Change in Health Status During the School Day
Employees:
- Employees who complete the daily wellness self-assessment with no unusual symptoms related to COVID-19 but later develop unusual symptoms while on campus must immediately notify their supervisor. The supervisor must report immediately to Leslie Jackson, Superintendent at lejackson@doe.k12.ga.us or (706) 853-8547.
- The superintendent or his/her designee will contact the school nurse/paramedic and notify the school’s Human Resources representative.
- The school nurse/paramedic will assess the staff member and may recommend that the employee leave campus immediately and follow guidance from the CDC and DPH regarding self-care.

Students during the Instructional Day:
- If a student who passed the temperature screening and completed the wellness assessment with no unusual symptoms related to COVID-19 later develops unusual symptoms while at school:
  1. The student should immediately inform a staff member of his/her change in health status.
  2. The staff member must contact Jennifer and/or Jeannie immediately.
  3. Jennifer/Jeannie will contact the school nurse/paramedic immediately and inform the superintendent or her designee.
  4. The school nurse/paramedic will assess the situation and discuss it with the superintendent of the school or her designee.
  5. The parent/guardian will be contacted to discuss the student’s health and to arrange transportation home if needed.
  6. Quarantine protocols will be followed as indicated.
Students During Residential Time:
If a student develops unusual symptoms while in the dorm:
1. The student must inform any available staff member of his/her change in health status.
2. The staff member must contact the school nurse immediately.
3. The school nurse will assess the situation and discuss it with Bobby.
4. The parent/guardian will be contacted to discuss the student’s health and to arrange transportation home if indicated.
5. Quarantine protocols will be followed as indicated.

I. Visitors on Campus
- During the on-going pandemic, visitors will not be allowed on campus unless approved by the superintendent or her designee.
- Parents/guardians are discouraged from visiting campus other than for the drop-off and pickup of students (parents will remain in their vehicles at this time and the student will be escorted to/from the school building). If a parent/guardian believes that an on-campus visit is imperative for understanding his/her child’s educational programming, then he/she may schedule this with the superintendent or her designee with at least 48-hours advance notice. The parent/guardian will be admitted to campus only after completing a COVID-19 wellness self-assessment.
- Personnel of other governmental entities and contractors working with the school will be encouraged to conduct business remotely.
- Meetings that must be conducted in-person must be scheduled in advance through the superintendent or her designee, and such visitors will be admitted to campus only after completing a COVID-19 wellness self-assessment.

J. Exposure to Suspected/Confirmed COVID-19-Positive Individual
Employees:
Any employee who has had direct exposure (defined as 10 or more minutes within 6 feet) to a COVID-19 positive individual or an individual suspected of having COVID-19 must:

1. Immediately notify his/her supervisor. The supervisor must report immediately to Leslie Jackson, Superintendent at lejackson@doe.k12.ga.us or (706) 853-8547.
2. Remain off campus for 14 days and be symptom free in accordance with recommendations from the CDC and DPH before returning to campus.

Students:
Any student who has had direct exposure (defined as 10 or more minutes within 6 feet) to a COVID-19 positive individual or an individual suspected of having COVID-19 must:

1. Notify Ms. Jennifer Sanford at jsanford@doe.k12.ga.us or (706)777-2200 or Ms. Jeannie Newman at jnewman@doe.k12.ga.us or (706)777-2249 by 8:00 AM. Ms. Sanford/Ms. Newman will contact Leslie Jackson, Superintendent.
2. Remain off campus for 14 days and be symptom free in accordance with recommendations from the CDC and DPH before returning to campus.
K. Staff or Student Suspected/Confirmed COVID-19

Employees:
Any employee who has clear COVID-19 symptoms or a positive COVID-19 test must:
1. Immediately notify their supervisor. The supervisor must report immediately to Leslie Jackson, Superintendent at lejackson@doe.k12.ga.us or (706) 853-8547.
2. Remain off campus in accordance with recommendations from the CDC and DPH for 10 days from the COVID-19 test results receipt/onset of symptoms and be symptom free in accordance with recommendations from the CDC and DPH.

Students:
If a student has clear COVID-19 symptoms or a positive COVID-19 test, the parent/guardian or student (over 18 years old) must:
1. Notify Ms. Jennifer Sanford at jsanford@doe.k12.ga.us or (706) 777-2200 or Ms. Jeannie Newman at jnewman@doe.k12.ga.us or (706) 777-2249 by 8:00 AM. Ms. Sanford/Ms. Newman will contact Leslie Jackson, Superintendent
2. Remain off campus in accordance with recommendations from the CDC and DPH for 10 days from the COVID-19 test results/onset of symptoms and be symptom free in accordance with recommendations from the CDC and DPH.

L. Leave

Employees:
Employees who are required to be in quarantine because of COVID-19 (with or without infection) may be eligible for leave under the Families First Coronavirus Response Act (FFCRA). The employee should contact Lisa Parsons at lparsons@doe.k12.ga.us or (706) 777-2286 regarding leave under FFCRA. Employees may use their accrued annual, sick, and/or personal leave to cover time not covered by FFCRA. Inquiries or requests related to FFCRA must be addressed to the school’s Human Resources representative.

M. Contact Tracing

- Once school administration has been notified that an employee or student exhibits unusual symptoms consistent with COVID-19 or has tested positive for COVID-19, to the extent possible, school administration or DPH will conduct contact tracing and provide notification to individuals indicated as having direct exposure (defined as 10 or more minutes within 6 feet) to a person with confirmed/suspected COVID-19.

Note:
- Contact tracing on GSD campus should NEVER indicate direct exposure.
- Direct exposure cannot happen while following GSD’s COVID-19 School Safety Guidelines.
- There should be no instance where GSD has to close classrooms, dorm or school.
- Diligence by adults will prevent this possibility.
- The only exceptions would be if a student requiring approved physical touch guidance or an employee working with that student were to test positive. In that case, a specific person or classroom may experience a quarantine.
Employees:
- The employee will be notified that the school will let individuals with risk of direct exposure (defined as 10 or more minutes within 6 feet) to the employee know of the diagnosis without identifying the employee by name. It should be noted that some individuals may discern the employee’s identity based on context.
- The employee will be asked the following:
  1. What has your work schedule/workday been like the past 14 days (i.e., what percentage of the days were spent on what tasks and in what areas/locations)?
  2. With whom did you work in close proximity (six feet or less) for more than 10 minutes within the last 14 days?
  3. Have you shared materials or supplies with other employees or students in the last 14 days? If so, when, where, and with whom?
  4. Have you spent time in any community shared spaces (e.g., restrooms, break rooms, etc.) at work in the last 14 days? If so, when, where, and with whom?
- Voluntary Identification: while employees may choose to identify themselves to other employees, they may not waive the school’s confidentiality standards.

Students:
- The student and his/her parents/guardians will be notified that the school will let individuals with risk of direct exposure (defined as 10 or more minutes within 6 feet) to the student know of the diagnosis without identifying the student by name. It should be noted that some individuals may discern the student’s identity based on context.
- The student will be asked the following questions:
  1. What has the school day been like for the past 14 days (i.e., what areas/locations of the school have you been in while at school)?
  2. With whom did you work with (six feet or less) within the last 14 days of school?
  3. Have you shared materials or supplies with other students in the last 14 days of school? If so, when, where, and with whom?
  4. Have you spent time in any shared spaces (e.g., restrooms, breakrooms, etc.) in the last 14 days of school? If so, when, where, and with whom?
- Voluntary Identification: While students may choose to identify themselves to others, they may not waive the school’s confidentiality standards.
N. Notification of Exposure

Employees:
- The superintendent or her designee shall provide notification to each staff identified as being at risk of direct exposure (defined as 10 or more minutes within 6 feet) without identifying the name of the individual with positive or suspected COVID-19. It should be noted that some individuals may discern the individual’s identity based on context.

Students:
- The superintendent or her designee shall provide notification to each student/parent/guardian identified as being at risk of direct exposure (defined as 10 or more minutes within 6 feet) without identifying the name of the individual with positive or suspected COVID-19. It should be noted that some individuals may discern the individual’s identity based on context.

O. COVID-19 Employee and Student Return to School Self-Certification Form

- Employees and students returning from quarantine (with or without having COVID-19) must complete the COVID-19 Employee and Student Wellness Self-Assessment RETURN to SCHOOL Form on page fourteen (14) of this guidance document and submit it to Leslie Jackson, Superintendent. The form can also be found on the school’s website.

P. Individuals at High Risk for COVID-19

Employees:
- A high-risk employee for purposes of COVID-19 is defined as older individuals (age 65+) and individuals with pre-existing conditions, including those who are immune-compromised.
- As with any non-COVID-19 related scenario, it is the employee’s responsibility to inform Leslie Jackson, Superintendent (706) 853-8547/ lejackson@doe.k12.ga.us and Lisa Parsons lparsons@doe.k12.ga.us or (706) 777-2286 in writing or verbally of a need for an accommodation.
- Upon receiving a request for an accommodation, Ms. Parsons will gather information from the employee related to the accommodation request, collect medical documentation as needed, and work with the GaDOE Human Resources Office to determine if the employee is able to complete the essential functions of their position with an accommodation. Ms. Parsons will discuss possible accommodations the employee may have in mind and then work with the supervisor to determine what the employer can provide.
- It is important to note that an accommodation is designed to permit an employee to complete the essential functions of his/her position. Possible accommodations may include telework work (when the employee’s position supports teleworking) or providing a separate workspace for the employee (when space is available, and the employee’s position supports it).
• If the employer is unable to provide an accommodation that meets the employee’s needs and the employee is unable to complete the essential functions of his/her position, the GaDOE Human Resources Office will contact the employee by U.S. Mail.

• An employee who cannot complete the essential functions of his/her position with an accommodation may be considered for reassignment if available or may be separated from employment consistent with regulations, rules, state law, and federal law.

Students:
• Parent/guardian or the student (over 18 years old) must contact Leslie Jackson, Superintendent (706) 853-8547 or lejackson@doe.k12.ga.us to discuss a student being high-risk in regard to COVID-19.

• School staff will work with the parent/guardian and student to implement a learning model intended to protect the student’s health.

Q. Teleworking
Employees:
• The superintendent will inform employees regarding telework options.

• Any individual teleworking must follow the GaDOE’s protocols regarding the completion of the GaDOE’s telework agreement form.

R. Daily Wellness Self-Assessment (DWSA)

Employees:
• Each employee (in-person or teleworking) will be required to respond to all questions on the DWSA before leaving home each day.

• If the employees DWSA indicates any symptom that would normally require staying at home (fever, chills or diarrhea), any unusual COVID-19 strongly-related symptom (shortness of breath, or non-allergy related cough), any combination of other unusual (not related to allergies, usual sinus problems or other chronic conditions) listed symptoms or any direct exposure (defined as 10 or more minutes within 6 feet) to any individual with known or suspected COVID-19, the employee must contact his/her supervisor and remain at home. Supervisors must contact Leslie Jackson, Superintendent, lejackson@doe.k12.ga.us or (706) 853-8547.

• Upon arrival at school, each employee will confirm positive completion of the DWSA with the person performing the temperature screening.

• Positive completion of the DWSA means: completion indicating no symptom that would normally require staying at home (fever, chills or diarrhea), no unusual COVID-19 strongly-related symptom (non-asthma or chronic health issue related shortness of breath, or non-allergy/chronic health issue related cough), no combination of other unusual (not related to allergies, usual sinus problems or other chronic conditions) listed symptoms and no direct exposure (defined as 10 or more minutes within 6 feet) to any individual with known or suspected COVID-19.
Employee Daily Wellness Self-Assessment (DWSA)

1. Have you experienced any of the following in the past 24 hours?
   - Feeling feverish or have a measured temperature greater than or equal to 100.4 degrees
   - Cough (not related to allergies or other chronic conditions you may have)
   - Shortness of breath or difficulty breathing (not related to asthma, allergies, or other chronic conditions)
   - Chills and/or repeated shaking with chills
   - Muscle pain (not related to other health conditions you may have)
   - Headache/body aches (not related to allergies or other chronic conditions you may have)
   - Sore throat (not related to allergies or other chronic conditions you may have)
   - Diarrhea
   - Loss of taste or smell

2. Have you been exposed to someone being tested for or who has tested positive for COVID-19 or who has symptoms compatible with COVID-19?

3. Are any members of your household or anyone that you have recently had close contact with on quarantine for exposure to COVID-19?
Receipt/Acknowledgment
COVID-19 Workplace Guidelines Form

I have received and read the COVID-19 Workplace Guidelines. I understand that I must comply with all of the guidelines, including but not limited to:

- Mask-wearing protocols
- Practicing social distancing where possible (at least 6 feet of separation)
- Using my ID Badge to enter school buildings
- Completing the Daily Wellness Self-Assessment and informing the school superintendent or her designee of possible symptoms
- Practicing good hygiene measures by regularly washing hands and/or using hand sanitizer while on campus
- Refraining from reporting to work when ill
- Notifying the superintendent or his/her designee if there has been potential exposure to COVID-19 or the results of a COVID-19 test are positive
- Cooperating with contact tracing efforts when asked by the superintendent or her designee

I understand that failure to comply with any of the guidelines in this document may result in my being subject to disciplinary action, up to and including termination of employment.

Employee Name: ____________________________________________

Employee Signature: _________________________________________

Date: ______________

This signed receipt must be returned to Leslie Jackson, Superintendent (gray box) within two (2) business days of receiving this document. Ms. Jackson will transfer all receipt forms to Lisa Parsons to be placed in employee folders.

Human Resources Representative Acknowledgment of Receipt of Form:

Signature: _________________________________________

Date: ______________
COVID-19 Employee and Student Wellness Self-Assessment RETURN to SCHOOL Form

Date: ____________

Employee or Student Name (please print): ___________________________________

School Name: ___________________________________________

I, _______________________, attest to the following:

• I have had no fever for at least three days without taking medication to reduce fever during that time.
• Date of last fever of 100 degrees or higher: _____________________
• My respiratory symptoms (cough and shortness of breath) have improved.
• Date respiratory symptoms began improving: ______________
• At least ten days have passed since my fever and/or respiratory symptoms began.
• Date fever and/or respiratory symptoms began: _____________________
• I had a positive COVID-19 test (with or without symptoms) on ________________.

Note: An employee or student may return after 10 days have passed from the date of the positive result.

Employee or Student Signature: ________________________________________

Today’s Date: _____________

Date Expected to Return to School: ____________

Superintendent’s or His/Her Designee’s Acknowledgment of Receipt of Form:

Signature: ________________________________________

Date: ____________________________
Return to Work Guidance After COVID-19 Illness or Exposure for Persons Who Are Not Healthcare Personnel

July 22, 2020


The following guidance should be used to make decisions about “return to work” for persons who are not Healthcare Personnel:

- with laboratory-confirmed COVID-19;
- who have suspected COVID-19 (e.g., developed symptoms of a respiratory infection [e.g., cough, shortness of breath, fever] but did not get tested for COVID-19 and have been exposed to a person with COVID-19 or live in an area with local or widespread transmission;
- who have been exposed to COVID-19 without appropriate personal protective equipment (PPE).

Return to Work Strategy

DPH recommends a time-based return to work strategy that is determined based on a person’s health status. Decisions about “return to work” for persons with confirmed or suspected COVID-19 who are not healthcare personnel should be made in the context of local circumstances (community transmission, resource needs, etc.).

Symptomatic persons who are not healthcare personnel with confirmed COVID-19 or suspected COVID-19

• Who had mild or moderate illness* and are not severely immunocompromised† can return to work after:
  ○ At least 10 days have passed since symptoms first appeared and
  ○ At least 24 hours have passed since last fever without the use of fever-reducing medications and
  ○ Symptoms (e.g., cough, shortness of breath) have improved

• Who had severe to critical illness (if they were hospitalized for shortness of breath, pneumonia, low oxygen levels, respiratory failure, septic shock, and/or multiple organ failure) * or who are severely immunocompromised† can return to work after:
  ○ At least 20 days have passed since symptoms first appeared
  ○ At least 24 hours have passed since last fever without the use of fever-reducing medications and
  ○ Symptoms (e.g., cough, shortness of breath) have improved

Asymptomatic persons who are not healthcare personnel with confirmed COVID-19:

• Who are not severely immunocompromised† can return to work after:
  ○ At least 10 days have passed since the positive laboratory test and the person remains asymptomatic

• Who are severely immunocompromised† can return to work after:
At least 20 days have passed since the positive laboratory test and the person remains asymptomatic.

- Note, asymptomatic persons who test positive and later develop symptoms should follow the guidance for symptomatic persons above.

Asymptomatic persons who are not healthcare personnel, and who do not work in critical infrastructure who have a known exposure to a person with COVID-19 without appropriate PPE can return to work after:

- After they have completed all requirements in the DPH guidance for persons exposed to COVID-19 found at https://dph.georgia.gov/contact
- Of note, if this person is tested for COVID-19 during the 14-day quarantine period, a negative test result would not change or decrease the time a person is monitored.

Asymptomatic persons who are not healthcare personnel, but who do work in critical infrastructure who have a known exposure to a person with COVID-19 can follow the CDC guidance for return to work:


Both CDC and DPH DO NOT recommend using a test-based strategy for returning to work (2 negative tests at least 24 hours apart) after COVID-19 infection for non-healthcare personnel. CDC has reported prolonged PCR positive test results without evidence of infectiousness. In one study, individuals were reported to have positive COVID-19 tests for up to 12 weeks post initial positive.

More information about the science behind the symptom-based return to work can be found at: https://www.cdc.gov/coronavirus/2019-ncov/community/strategy-discontinue-isolation.html

Return to Work Practices and Work Restrictions

Persons who are not healthcare personnel who complete the above conditions and can return to work should:

- Wear a face covering if social distancing cannot be maintained in the workplace, per current CDC guidelines: https://www.cdc.gov/coronavirus/2019-ncov/protect-yourself-and-others/cloth-face-coverings.html. Note: A facemask, instead of a cloth face covering, should be used by healthcare providers only. Cloth face coverings are appropriate for persons who are not healthcare personnel and are recommended by CDC to help prevent asymptomatic spread of COVID-19 in settings where social distancing cannot be practiced.
- Adhere to hand hygiene, respiratory hygiene, and cough etiquette in CDC’s interim infection control guidance (e.g., cover nose and mouth when coughing or sneezing, dispose of tissues in waste receptacles)
- Self-monitor for symptoms and seek re-evaluation from occupational health if respiratory symptoms recur or worsen.

CDC guidance for discontinuation of home isolation for persons with COVID-19 infection not in a healthcare setting can be used in conjunction with this guidance for returning to work and can be found at https://www.cdc.gov/coronavirus/2019-ncov/hcp/disposition-in-home-patients.html
Note: The studies used to inform this guidance did not clearly define "severe" or "critical" illness. This guidance has taken a conservative approach to define these categories. Although not developed to inform decisions about duration of Transmission-Based Precautions, the definitions in the National Institutes of Health (NIH) COVID-19 Treatment Guidelines are one option for defining severity of illness categories. The highest level of illness severity experienced by the patient at any point in their clinical course should be used when determining the duration of Transmission-Based Precautions.

Mild Illness: Individuals who have any of the various signs and symptoms of COVID-19 (e.g., fever, cough, sore throat, malaise, headache, muscle pain) without shortness of breath, dyspnea, or abnormal chest imaging.

Moderate Illness: Individuals who have evidence of lower respiratory disease by clinical assessment or imaging, and a saturation of oxygen (SpO2) ≥94% on room air at sea level.

Severe Illness: Individuals who have respiratory frequency > 30 breaths per minute, SpO2 < 94% on room air at sea level (or, for patients with chronic hypoxemia, a decrease from baseline of >3%), ratio of arterial partial pressure of oxygen to fraction of inspired oxygen (PaO2/FiO2) < 300 mmHg, or lung infiltrates > 50%.

Critical Illness: Individuals who have respiratory failure, septic shock, and/or multiple organ dysfunction.

In pediatric patients, radiographic abnormalities are common and, for the most part, should not be used as the sole criteria to define COVID-19 illness category. Normal values for respiratory rate also vary with age in children, thus hypoxia should be the primary criterion to define severe illness, especially in younger children.

† The studies used to inform this guidance did not clearly define "severely immunocompromised." For the purposes of this guidance, CDC used the following definition:

• Some conditions, such as being on chemotherapy for cancer, untreated HIV infection with CD4 T lymphocyte count < 200, combined primary immunodeficiency disorder, and receipt of prednisone > 20mg/day for more than 14 days, may cause a higher degree of immunocompromise and inform decisions regarding the duration of Transmission-Based Precautions.
• Other factors, such as advanced age, diabetes mellitus, or end-stage renal disease, may pose a much lower degree of immunocompromise and not clearly affect decisions about duration of Transmission-Based Precautions.
• Ultimately, the degree of immunocompromise for the patient is determined by the treating provider, and preventive actions are tailored to each individual and situation.

† Completing a test-based strategy is contingent upon the availability of ample testing supplies, laboratory capacity, and convenient access to testing and requires two samples taken at least 24 hours apart. If a facility requires the test-based strategy for return (which is discouraged by DPH), this should be done by a private physician through a commercial lab. The test-based strategy is not fulfilled by a single test, nor should it be used for screening of all persons returning to work.
Return to School or Childcare Guidance After COVID-19 Illness or Exposure

July 22, 2020

The Georgia Department of Public Health (DPH) in conjunction with the Georgia Department of Education have released guidance to help schools plan for a safe return to in-person instruction in fall 2020: https://www.georgiainsights.com/recovery.html. DPH recommends schools use this guidance to make decisions regarding opening for in-person education.

CDC also provides guidance on preventing the spread of COVID-19 in school and childcare settings https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/schools.html

For schools opting to have in-person instruction and childcare facilities the following guidance should be used to make decisions for children, teachers, and staff:

- with laboratory-confirmed COVID-19;
- who have suspected COVID-19 (e.g., developed symptoms of a respiratory infection [e.g., cough, shortness of breath, fever] but did not get tested for COVID-19 and have been exposed to a person with COVID-19 or live in an area with local or widespread transmission;
- who have been exposed to COVID-19 without appropriate personal protective equipment (PPE).

Return to School or Childcare Strategy

DPH recommends a time-based return to school or childcare strategy that is determined based on a person’s health status. Decisions about “return to school” or “return to childcare” for persons with confirmed or suspected COVID-19 should be made in the context of local circumstances (community transmission, resource needs, etc.).

Symptomatic persons with confirmed COVID-19 or suspected COVID-19

- Who had mild or moderate illness* and are not severely immunocompromised† can return to school or childcare after:
  - At least 10 days have passed since symptoms first appeared and
  - At least 24 hours have passed since last fever without the use of fever-reducing medications and
  - Symptoms (e.g., cough, shortness of breath) have improved
- Who had severe to critical illness (if they were hospitalised for shortness of breath, pneumonia, low oxygen levels, respiratory failure, septic shock, and/or multiple organ failure) * or who are severely immunocompromised† can return to school or childcare after:
  - At least 20 days have passed since symptoms first appeared
  - At least 24 hours have passed since last fever without the use of fever-reducing medications and
  - Symptoms (e.g., cough, shortness of breath) have improved
Asymptomatic persons with confirmed COVID-19:
- Who are not severely immunocompromised can return to school or childcare after:
  - At least 10 days have passed since the positive laboratory test and the person remains asymptomatic
- Who are severely immunocompromised can return to school or childcare after:
  - At least 10 days have passed since the positive laboratory test and the person remains asymptomatic
- Note, asymptomatic persons who test positive and later develop symptoms should follow the guidance for symptomatic persons above.

Asymptomatic persons who have a known exposure to a person with COVID-19 without appropriate PPE can return to school or childcare after:
- They have completed all requirements in the DPH guidance for persons exposed to COVID-19 found at https://dph.georgia.gov/contact
- Of note, if this person is tested for COVID-19 during the 14-day quarantine period, a negative test result would not change or decrease the time a person is quarantined.

Both CDC and DPH DO NOT recommend using a test-based strategy for children or adults returning to school or childcare (at least 24 hours apart) after COVID-19 infection. 2 CDC has reported prolonged PCR positive test results without evidence of infectiousness for up to 12 weeks.

More information about the science behind the symptom-based strategy for discontinuing isolation can be found at https://www.cdc.gov/coronavirus/2019-ncov/community/strategy-discontinue-isolation.html

*Note: The studies used to inform this guidance did not clearly define “severe” or “critical” illness. This guidance has taken a conservative approach to define these categories. Although not developed to inform decisions about duration of Transmission-Based Precautions, the definitions in the National Institutes of Health (NIH) COVID-19 Treatment Guidelines are one option for defining severity of illness categories. The highest level of illness severity experienced by the patient at any point in their clinical course should be used when determining the duration of Transmission-Based Precautions.

Mild Illness: Individuals who have any of the various signs and symptoms of COVID-19 (e.g., fever, cough, sore throat, malaise, headache, muscle pain) without shortness of breath, dyspnea, or abnormal chest imaging.

Moderate Illness: Individuals who have evidence of lower respiratory disease by clinical assessment or imaging, and a saturation of oxygen (SpO2) ≥94% on room air at sea level.

Severe Illness: Individuals who have respiratory frequency >30 breaths per minute, SpO2 <94% on room air at sea level (or, for patients with chronic hypoxemia, a decrease from baseline of >3%), ratio of arterial partial pressure of oxygen to fraction of inspired oxygen (PaO2/FiO2) <300 mmHg, or lung infiltrates >50%.

Critical Illness: Individuals who have respiratory failure, septic shock, and/or multiple organ dysfunction.
In pediatric patients, radiographic abnormalities are common and, for the most part, should not be used as the sole criteria to define COVID-19 illness category. Normal values for respiratory rate also vary with age in children, thus hypoxia should be the primary criterion to define severe illness, especially in younger children.

† The studies used to inform this guidance did not clearly define "severely immunocompromised." For the purposes of this guidance, CDC used the following definition:

- Some conditions, such as being on chemotherapy for cancer, untreated HIV infection with CD4 T lymphocyte count < 200, combined primary immunodeficiency disorder, and receipt of prednisone >20 mg/day for more than 14 days, may cause a higher degree of immunocompromise and inform decisions regarding the duration of Transmission-Based Precautions.
- Other factors, such as advanced age, diabetes mellitus, or end-stage renal disease, may pose a much lower degree of immunocompromise and not clearly affect decisions about duration of Transmission-Based Precautions.
- Ultimately, the degree of immunocompromise for the patient is determined by the treating provider, and preventive actions are tailored to each individual and situation.

† Completing a test-based strategy is contingent upon the availability of ample testing supplies, laboratory capacity, and convenient access to testing and requires two samples taken at least 24 hours apart. If a facility requires the test-based strategy for return (which is discouraged by DPH), this should be done by a private physician through a commercial lab. The test-based strategy is not fulfilled by a single test, nor should it be used for screening of all persons returning to work.