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This document contains Hamilton County Public Health’s requirements, recommendations, and guidelines for suspected, probable or confirmed cases of COVID-19. These guidelines are based on current data and guidelines from the Centers for Disease Control and Prevention (CDC) and the Ohio Department of Health. These guidelines are subject to change.

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INTRODUCTION

This document is intended for use by schools that fall within Hamilton County Public Health’s jurisdiction, as shown in the map to the right.

This document is intended to be used as a tool to help educational leaders in Hamilton County respond to suspected, probable or confirmed cases of COVID-19 in school grades K-12.

This document does not outline all detailed public health responses to cases of COVID-19. For additional information on Personal Protective Equipment (PPE) and infection control items please visit:

- Ohio’s Reset and Restart Education;
- Planning for Blended or Remote Learning;

This document outlines protocols for school staff members to follow when responding to positive COVID-19 test results. These protocols are meant to help staff members identify the next steps in responding to students or staff members who are suspected, probable or confirmed cases of COVID-19.
SCHOOL RESPONSIBILITY

Schools are responsible for providing the highest practical levels of education and care for all staff members and students in their buildings, while also ensuring their safety. COVID-19 mitigation is relevant to school settings as just a singular case of COVID-19 increases risks of outbreaks among staff members and students, as well as among visitors and individuals in surrounding communities.

CONTACTING LOCAL HEALTH AUTHORITY

It is the responsibility of the school to know when they need to contact their local health department and to do so in a timely manner. In the State of Ohio, there are many Class A reportable diseases, including COVID-19, that should be reported immediately to the local health department upon the discovery of the disease in either a student or staff member. Schools can report diseases to their local health departments by calling, securely emailing or faxing information about the individual and the disease the individual was diagnosed with.

For COVID-19, schools should immediately notify Hamilton County Public Health about any of the following situations:

- If a student or staff member is considered a suspected, probable or confirmed case of COVID-19;
- If a student or staff member develops a severe respiratory infection resulting in a hospitalization;
- If two or more students or staff members develop new-onset respiratory symptoms within 72 hours of each other.

The identification and notification of COVID-19 cases within the school is critical to slowing the spread of the disease. Hamilton County Public Health will help schools with contact tracing and infection prevention activities to help slow the spread of COVID-19.

ESTABLISHING A POINT OF CONTACT

Hamilton County Public Health strongly recommends prior to the school year beginning, that each school identify a staff member who will be the main point of contact. The point of contact will be the liaison between Hamilton County Public Health’s Communicable Disease Specialists and the school and will be tasked with reporting all COVID-19 information to Hamilton County Public Health.

When the school point of contact needs to reach out to Hamilton County Public Health, please call the main line at (513) 946-7800. Your information will be relayed to one of the Communicable Disease Specialists and you will be contacted within 1 business day.
COVID-19

Coronavirus disease 2019, more commonly known as COVID-19, is caused by a novel coronavirus that was first identified in Wuhan, China, in December 2019. COVID-19 causes mild to severe lower-respiratory tract illnesses. Since its discovery, COVID-19 has been the most common cause of outbreaks in the United States throughout 2020 and 2021. The virus that causes COVID-19, SARS-CoV-2, is highly contagious and affects people of all ages.

SIGNS & SYMPTOMS OF COVID-19

Individuals who are diagnosed with COVID-19 have had a wide range of symptoms reported. These symptoms can range from mild symptoms to more severe illnesses. Individuals can also be diagnosed with COVID-19 and have no symptoms reported, also known as asymptomatic individuals. Symptoms of COVID-19 may appear up to 14 days after exposure to the virus. However, some individuals may have symptoms appear in as little as two days after exposure to the virus. Symptoms of COVID-19 may include:

- Fever (≥ 100.4°F measured or subjective fever);
- Chills;
- Cough;
- Shortness of breath or difficulty breathing;
- Fatigue;
- Muscle pain or body aches;
- Headache;
- Sore throat;
- New loss of taste or smell;
- Congestion or runny nose;
- Nausea or vomiting;
- Diarrhea.

Complications of COVID-19 may include respiratory failure, shock or multi-organ system dysfunction. Adults 65 years of age and older and individuals of any age with underlying medical conditions are at a higher risk for severe illness and outcomes with COVID-19.

WHEN TO SEEK EMERGENCY MEDICAL CARE

Look out for any emergency warning signs* for COVID-19. If any individual is experiencing any of the following signs, seek emergency medical care immediately:

- Trouble breathing;
- Persistent pain or pressure in the chest;
- New confusion;
- Inability to wake or stay awake;
- Blueish lips or face.

Call 911 or call ahead to your local emergency facility. Alert the operator that you are seeking care for someone who has or may have COVID-19.

*This list does not include all possible symptoms. Please call your medical provider for any other symptoms that are severe or concerning.
PERIOD OF COMMUNICABILITY
Recent available data indicates that individuals who have mild to moderate COVID-19 remain infectious for no longer than 10 days after their symptom onset. Those who have more severe to critical illness or are severely immunocompromised are likely to remain infectious for no longer than 20 days after their symptom onset. Individuals are believed to be contagious two days prior to their symptom onset, or for those who tested positive for COVID-19 and did not have any symptoms, two days before the date the first positive viral test was collected.

TRANSMISSION OF COVID-19
The virus that causes COVID-19 spreads easily between people, mainly through respiratory droplets. Respiratory droplets are produced when an infected individual coughs, sneezes, talks or breathes. These droplets can land in the mouths or noses of people who are within close distance of the infected individual and can be inhaled into the lungs.

Sometimes, COVID-19 can spread by airborne transmission. Airborne transmission occurs when small droplets from an infected individual are able to travel further than six feet away from the infected individual, or when the individual who is infected with COVID-19 leaves the space. However, spread of COVID-19 is more likely to occur between people who are in close contact with one another, usually within approximately six feet. COVID-19 can also be spread by individuals who are not displaying symptoms, known as asymptomatic individuals.

While it is possible, it’s less common that an individual can get COVID-19 by touching a contaminated surface. This occurs when an individual touches a surface or object that has been infected by COVID-19 and then touching their own mouth, nose, or even their eyes, however, this is not thought to be the main way the virus spreads.

TYPES OF COVID-19 CASES
Hamilton County Public Health strongly recommends that all symptomatic students and staff be tested for COVID-19 or see their primary care doctor for an alternative diagnosis. An individual who does opt to receive the recommended testing should remain out of school and isolated until the test results are known.

There are three main types of COVID-19 cases: suspected, probable and confirmed cases of COVID-19.

SUSPECTED CASE OF COVID-19
A suspected case of COVID-19 is where a student or staff member of a school has a positive antibody detected in a serum, plasma, or whole blood test or a positive detection of an antigen found in an autopsy specimen, and has no prior history of being a confirmed or probable case.
**PROBABLE CASE OF COVID-19**

An individual can be classified as a probable case of COVID-19 from one of three different definitions.

**DEFINITION 1**

A probable case of COVID-19 can be where a student or staff member of a school dies and the death certificate lists COVID-19 disease or SARS-CoV-2 as an underlying cause of death or a significant condition contributing to death without a confirmed laboratory test.

**DEFINITION 2**

A probable case of COVID-19 can be where a student or staff member of a school has a positive antigen test that was collected on or after November 1, 2020.

**DEFINITION 3**

A probable case of COVID-19 can also be where a student or staff member of a school has had exposure to another case of COVID-19 (probable or confirmed), does not wish to or did not receive a COVID-19 test, **AND** meets symptoms from either Category 1 or Category 2 (shown below) **AND** has no alternative more likely diagnosis.

<table>
<thead>
<tr>
<th>Category 1</th>
<th>Category 2</th>
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</thead>
<tbody>
<tr>
<td>One of the following symptoms</td>
<td>Two of the following symptoms</td>
</tr>
<tr>
<td>▪ Cough</td>
<td>▪ Fever (&gt;100.4°F measured or subjective)</td>
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<tr>
<td>▪ Shortness of breath</td>
<td>▪ Chills</td>
</tr>
<tr>
<td>▪ Difficulty breathing</td>
<td>▪ Rigors (chills with shaking)</td>
</tr>
<tr>
<td>▪ New loss of smell</td>
<td>▪ Myalgia (body aches)</td>
</tr>
<tr>
<td>▪ New loss of taste</td>
<td>▪ Headache</td>
</tr>
<tr>
<td></td>
<td>▪ Sore throat</td>
</tr>
<tr>
<td></td>
<td>▪ Nausea or vomiting</td>
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<tr>
<td></td>
<td>▪ Diarrhea</td>
</tr>
<tr>
<td></td>
<td>▪ Fatigue</td>
</tr>
<tr>
<td></td>
<td>▪ Congestion or runny nose</td>
</tr>
</tbody>
</table>

If you are unsure if a student or staff member received a positive antigen test result or if their test was PCR, please reach out to Hamilton County Public Health for assistance.

**CONFIRMED CASE OF COVID-19**

A confirmed case of COVID-19 is where a student or staff member has laboratory confirmed evidence of SARS-CoV-2 RNA in a clinical or autopsy specimen. The laboratory confirmation of infection is through the RT-PCR (Real Time Polymerase Chain Reaction) test that detects viral RNA. A confirmed case of COVID-19 can be further classified by being either a symptomatic case of COVID-19 or an asymptomatic case of COVID-19. A symptomatic confirmed case of COVID-19 is where the individual is showing signs and symptoms of COVID-19 **AND** has laboratory confirmed evidence of infection. An asymptomatic confirmed case of COVID-19 is where the individual has laboratory confirmed evidence of infection and never develops symptoms of COVID-19.
LONG TERM EFFECTS OF A COVID-19 INFECTION

Most people recover quickly from COVID-19, but there are some people that are experiencing symptoms long after their recovery from the initial infection. Data is still being gathered on long term effects of COVID-19 infections, but those who are experiencing it report a variety of ongoing symptoms such as shortness of breath, fatigue, brain fog, sleep issues, fever, anxiety, and depression. This is being referred to as “Post-COVID Conditions,” “Long COVID,” or “post-acute sequelae of SARS-CoV-2 infection” (PASC). For treatment or advice regarding this condition, please consult your primary care doctor.

MISC, COVID-19 COMPLICATIONS IN CHILDREN

A rare, but serious condition associated with COVID-19 illness called Multisystem Inflammatory Syndrome (MIS) can affect children (MIS-C) and adults (MIS-A). MIS-C is a condition where different parts of the body can become inflamed including the heart, lungs, kidneys, brain, skin, eyes, or gastrointestinal organs. A lot is still unknown surrounding MIS-C and its association with recent COVID-19 infection or exposure, but additional signs of MIS-C can include:

- Fever (>100.4°F measured or subjective fever) AND any of the following signs and symptoms;
  - Abdominal (gut) pain;
  - Bloodshot eyes;
  - Chest tightness/pain;
  - Diarrhea;
  - Feeling extra tired;
  - Headache;
  - Low blood pressure;
  - Neck pain
  - Rash;
  - Vomiting.

As with COVID-19, signs and symptoms may not be the same in all children who experience COVID-19. Please contact the child’s parents or primary physician if they begin to experience the combination of symptoms listed above.

CLOSE CONTACTS

A close contact is any individual (e.g., student or staff member) that has been within six feet of a case of COVID-19 for 15 minutes or more (total/cumulative time) during the infectious period.

Identifying close contacts begins 48 hours before the onset of symptoms, or 48 hours before the date of the COVID-19 test if the individual never developed symptoms of COVID-19, until the time the individual is isolated. These close contacts will include other students or staff members, with or without face coverings. An individual would also be considered a close contact if they had direct physical contact with them (i.e., hugged or kissed them), share eating or drinking utensils, or had unprotected direct contact with infectious bodily fluids of the sick individual (e.g., was coughed/sneezed on, or touched used tissues with a bare hand). Fully vaccinated people should be tested 3-5 days following a known exposure to someone with suspected or confirmed COVID-19 and wear a mask in public indoor settings for 14 days or until they receive a negative test result.

Hamilton County Public Health and the point of contact will work together to determine who will be considered a close contact. For quarantine guidance of close contacts please see page 9 under Isolation and Quarantine Requirements.
VACCINATION

Vaccination is an important tool to help ensure students and staff are as safe as possible and will help the community as a whole get back to normal. The clinical trials and studies show that the COVID-19 vaccines are safe and effective in reducing an individual’s chance of contracting the illness and will also help keep one from getting seriously ill if they do get COVID-19.

A person is fully vaccinated 2 weeks after they received their second dose in a 2-dose series vaccine (such as the Pfizer or Moderna vaccines), or 2 weeks after a single dose vaccine (such as Johnson & Johnson's Jansen vaccine). People who meet the criteria to be considered fully vaccinated may start to be able to do some things that have been restricted because of the pandemic. Fully vaccinated people should be tested 3-5 days following a known exposure to someone with suspected or confirmed COVID-19 and wear a mask in public indoor settings for 14 days or until they receive a negative test result.

Staff and students who are not fully vaccinated should be encouraged to continue wearing a face covering while indoors to prevent the spread of COVID-19.

As of May, 2021, everyone ages 12 and older are eligible to receive a COVID-19 vaccination.
**ISOLATION AND QUARANTINE REQUIREMENTS**

If a student, whether in school or at home, develops symptoms of COVID-19, notify Hamilton County Public Health at (513) 946-7800. A Communicable Disease Specialist at Hamilton County Public Health and the Point of Contact at the school will determine how to proceed.

If a student or staff member develops symptoms consistent with COVID-19, they should:
- Be excluded from school;
- Be advised by the school to seek medical attention.

If the symptoms are non-COVID-19 related (e.g., Asthma, allergies, Pertussis, etc.) as determined by their doctor, the individual may return to school based on the guidance following their diagnosis.

**ISOLATION REQUIREMENTS**

Isolation helps to protect the students, staff, and families by preventing exposure to people who have COVID-19. Isolation separates people who are sick with a contagious disease, such as COVID-19 from people who are not sick.

If an individual is medically confirmed or thought to have COVID-19 (e.g., a probable case of COVID-19), and has shown symptoms of COVID-19, that person shall be required to isolate until the following criteria are met:
- At least 10 days* have passed since symptom onset **AND**
- The individual has been fever-free for at least 24 hours without the use of fever-reducing medication **AND**
- Their other symptoms have improved.

If an individual is medically confirmed to have COVID-19, and has never developed symptoms of COVID-19 (asymptomatic), that person shall be required to isolate until the following criteria are met:
- At least 10 days* have passed since the date of their positive COVID-19 test (RT-PCR test for SARS-CoV-2 RNA, or Antigen Test) **AND**
- The individual has **NOT** developed symptoms of COVID-19.

* A limited number of individuals with severe illness or other health conditions, may still spread the virus beyond the 10 days, which may warrant extending the duration of their isolation period for up to 20 days after symptom onset or their COVID-19 test (if they are asymptomatic). These include, but are not limited to, individuals who were hospitalized and required oxygen or ventilation, and individuals who have been diagnosed by a doctor as having an immunocompromised condition. Determination of extended isolation will be made by the contact tracer during the case interview.

If an individual who is fully vaccinated begins experiencing signs and symptoms of a COVID-19 infection, it is recommended that they consult with their primary care doctor. If they are subsequently tested and the test result is positive for COVID-19, the vaccinated individual must adhere to the isolation requirements listed above that are applicable to their situation.

**SYMPTOMS-BASED APPROACH**

The CDC, Ohio Department of Health and Hamilton County Public Health recommend a symptoms-based resolution requirement to allow students and staff to return to work.

A symptoms-based approach means that the school should utilize the time frame and resolutions...
of symptoms described earlier in the Isolation Requirements section of this report. It is not recommended that the school utilize or require negative testing to return to school or work.

If the school has a policy in place that requires negative testing to return to school, Hamilton County Public Health will support the school’s decision. They must also follow the guidance for returning to school utilizing the following guidance:

- **Negative Test Results**
  - For students and staff members to return to work using the test to cure methods, they will need two negative test results using RT-PCR for detection of SARS-CoV-2 RNA. These two negative tests must have at least 24 hours in-between collection of the tests.
- **Positive Test Results**
  - If the student or staff member tests positive on either of these tests, their exclusion requirements will extend 10 days after the test was taken.

**QUARANTINE REQUIREMENTS**

Quarantine, much like isolation, also helps to prevent exposing the public to individuals who may have COVID-19. Quarantine separates and restricts the movement of people who were exposed to a contagious disease, such as COVID-19, to see if they become sick. Students and staff who meet the definition of close contact of someone with COVID-19 should be notified of their exposure, regardless if they meet criteria to be excluded from quarantine requirements. Notification will allow each individual and family to make their own informed decisions for what is best for them.

If an individual is a close contact of a case of COVID-19, there are three recommended lengths for quarantine: Optimal Quarantine Duration, Reduced Quarantine Duration One, Reduced Quarantine Duration Two.

**OPTIMAL QUARANTINE DURATION**

To follow optimal quarantine duration, the close contact shall self-quarantine for 14 full days from the date after the last exposure (date they were last around the case). A full 14 days presents the lowest risk of post-exposure transmission.

**REDUCED QUARANTINE DURATION ONE**

To follow reduced quarantine duration one, the individual shall self-quarantine for at least 10 full days from the date after the last exposure (date they were last around the case). The individual shall then self-monitor for signs and symptoms of COVID-19 through day 14. Ideally, the individual should also wear a face covering through day 14 as well, to reduce potential transmission if symptoms appear after day 10.

**REDUCED QUARANTINE DURATION TWO**

To follow reduced quarantine duration two, the close contact shall self-quarantine after the last exposure (date they were last around the case) and obtain a viral test for SARS-CoV-2 on/or after day five. If the viral test result is negative, quarantine can end after a full 7 days of quarantine. The individual shall then self-monitor for signs and symptoms of COVID-19 through day 14. Ideally the individual should also wear a face covering through day 14 as well, to reduce potential transmission in the event that symptoms appear after quarantine is discontinued. If an individual receives a viral test for SARS-CoV-2 before day five, this test result will not count towards reduced quarantine duration, and they will need to obtain another viral test for SARS-CoV-2 on/or after day five.
QUARANTINE EXEMPTIONS

There are instances in which a close contact can be exempt from quarantine. If a fully vaccinated individual is exposed to a case of COVID-19, they should self-monitor for signs and symptoms of COVID-19 for 14 days after an exposure and immediately follow isolation requirements if symptoms develop. Fully vaccinated people should be tested 3-5 days following a known exposure to someone with COVID-19 and wear a mask in public indoor settings for 14 days or until they receive a negative test result.

Similarly, if a person who has recovered from a COVID-19 infection that was verified with a viral diagnostic test is within three months of their symptom onset of the previous illness episode, they are not required to self-quarantine or seek testing to avoid quarantine. In either instance, if the exposed person begins to experience new symptoms consistent with a COVID-19 infection, consulting with their primary care doctor, testing and isolation is recommended until the illness can be confirmed or they receive an alternative diagnosis.

Teachers, school nurses, school administration, food service and transportation are all considered to be essential employees. Hamilton County Public Health recommends that all staff that can work remotely, be allowed to do so when the school is experiencing an outbreak. Fully vaccinated employees do not need to quarantine unless they experience symptoms, at which time they should follow up with their doctor for testing or an alternate diagnosis.

If an unvaccinated or partially vaccinated staff member is considered a close contact of a case of COVID-19, they may be considered part of Hamilton County’s critical infrastructure. A Communicable Disease Specialist will work with the school’s Point of Contact to determine if unvaccinated staff who are close contacts will be considered part of the critical infrastructure. If the close contact is asymptomatic (they are not showing symptoms) and they are deemed as part of the critical infrastructure, they may return to work if they follow certain guidelines for 14 days following their exposure. The guidelines they must follow are:

- The individual takes their temperature twice-a-day, once in the morning and once in the evening.
- The individual should wear a mask when they are working.
- When the individual is done with work, they should return home and self-quarantine for the 14 days following their exposure or in accordance to a reduced quarantine option, if they so choose.
SPECIAL CONSIDERATIONS FOR QUARANTINE IN K-12 CLASSROOM ENVIRONMENTS

Quarantine is not necessary for students and staff possibly exposed to COVID-19 in K-12 classroom environments regardless of vaccination status, if **ALL** the following prevention measures have been in place:

- Masking for students and staff (regardless of vaccination status).
- Physical distancing is maximized (at least three feet between desks).
- Documented COVID-19 prevention policies (e.g., identification of individuals experiencing symptoms, strategies to increase ventilation, protocols for cleaning, etc.).

If not all prevention measures listed above were in place, **quarantine is not necessary** for students and staff who are **NOT** full vaccinated if the individual who was exposed was wearing a face mask consistently and correctly (covering both the nose and mouth) and physical distancing was maintained. However, they should take the following precautions:

- Wear a mask indoors, as much as possible, either for 14 days or until a viral COVID-19 test (RT-PCR test for SARS-CoV-2 RNA, or Antigen Test) performed at least five days after exposure has come back negative.
  - While this negative test result would allow the individual to discontinue masking in school after day seven, it is encouraged that they continue masking.
- Self-monitor for symptoms for 14 days following exposure; unless symptoms develop, individuals can continue attending in-person class and participating in sports and extra-curricular activities.
- If the individual has symptoms of COVID-19, they should isolate away from others and seek a COVID-19 test.
  - If they test positive for COVID-19, they should follow the isolation requirements found on page eight.
  - If they test negative for COVID-19, they should follow up with their primary care doctor for an alternative diagnosis.
RISK ASSESSMENTS

The risk of spread for COVID-19 increases as a student or staff member interacts with more people. The longer the interaction, the higher the risk of spread. The risk of COVID-19 spread increases in the setting is illustrated in the figure below.

Figure 2. Risk Assessment Level and Type of Risk

LOWEST RISK

All students and staff are fully vaccinated. If this is not possible, the lowest risk would be for students and teachers to engage in virtual-only classes, activities, and events.

MODERATE RISK

A mix of vaccinated and unvaccinated students and staff with small, in-person classes, activities, and events. These small groups of students stay together with the same teacher throughout the school day and do not mix with other students. Students remain at least 3 to 6 feet apart and do not share objects.

HIGHEST RISK

Most or all students and staff unvaccinated, with full-sized, in-person classes, activities, and events. Students are not spaced apart, share classroom materials or supplies, and mix between classes and activities.
SAFETY PLAN (INFECTION PREVENTION & CONTROL MEASURES)

Schools have the unique opportunity and responsibility to reduce transmission of Covid-19 by implementing safety plans. Prevention and control measures can positively impact a school community’s physical, social, and mental well being while meeting the educational needs of the students. Healthy students and staff result in a more productive learning environment and can contribute to the overall welfare of the surrounding community. Implementation should be guided by what is feasible, practical, acceptable, and tailored to fit the needs of each school. Schools in Hamilton County should consider the implementation of several strategies to encourage healthy behaviors in students and staff to prevent COVID-19.

The recommended strategies to help prevent the spread of illness, are:

- Students and staff should stay home if they are ill.
- Avoid close contact with anyone who may be ill.
- Schools should develop policies that encourage sick students and staff to stay at home without the fear of reprisal and ensure staff, students, and families are aware of these policies.
  - Consider not having perfect attendance awards, not assessing the school based on absenteeism, and consider offering virtual learning and telework options if feasible.
  - Educate students, staff, and families about when to stay home and when they can return to school/work.
  - Actively encourage students and staff who are ill or who have had recent close contact with a person who has COVID-19 to stay home.
  - Students and staff should stay home if they have tested positive for or are showing symptoms of COVID-19.
  - Schools should work with Hamilton County Public Health to determine when students and staff can return to school, as vaccination status can impact this timeline.
- Hand Hygiene
  - Teach and reinforce hand-washing with soap and water for at least 20 seconds and increase monitoring to ensure adherence among students and staff.
    - If soap and water are not readily available, alcohol-based hand sanitizers can be used.
    - The alcohol-based hand sanitizer should contain at least 60% alcohol
Respiratory Etiquette
- Encourage staff and students to cover coughs and sneezes with a tissue. Used tissues should be thrown away in the trash and hands washed immediately with soap and water for at least 20 seconds.
- If tissues are not available, encourage students to cough or sneeze into their elbow.

Face coverings
- Teach and reinforce the use of face coverings. Face coverings may be challenging for students, especially younger students, to wear in an all-day setting such as school.
- Face coverings should be worn by unvaccinated students in grades K-12 and staff, and are most essential in times when physical distancing is difficult.
- Individuals should be frequently reminded not to touch the face covering and to wash their hands frequently.
- Information should be provided to staff, students, and families on the proper use, removal, and washing of reusable face coverings.
  - Face coverings should not be placed on:
    - Children younger than two years old.
    - Anyone who has trouble breathing or is unconscious.
    - Anyone who is incapacitated or otherwise unable to remove the cloth face covering without assistance.
- Face coverings are meant to protect other people in case the wearer is unknowingly infected but does not have symptoms. Evidence also indicates that face coverings can offer protection to the wearer against virus particles during an exposure as well.
- Cloth face coverings are not surgical masks, respirators or other medical personal protective equipment.
- Medical grade PPE is not recommended for the general public, as mass purchasing of it can cause shortages for medical professionals.

Adequate supplies
- Support healthy hygiene behaviors by providing adequate supplies such as:
  - Soap
  - Alcohol-based hand sanitizer
  - Paper towels
  - Tissues
  - Disinfectant wipes
  - Cloth face coverings
  - No-touch/foot-pedal trash cans

Signs and Messages
- Post signs in highly visible locations that promote everyday protective measures and describe how to stop the spread of germs.
  - How to properly perform hand washing.
  - How to properly wear a cloth face covering.
- Broadcast regular announcements on reducing the spread of COVID-19 on PA systems.
- Include messages about behaviors that prevent the spread of COVID-19 when communicating with students, staff, and families on school websites, in emails and in school social media accounts.
- Find free CDC-approved print and digital resources on the CDC's website: www.cdc.gov
HAND HYGIENE

Students and staff should perform frequent hand hygiene throughout the day. Reinforce the use of hand sanitizer by providing stations through the school premises and assign continuous oversight to ensure hand hygiene stations are regularly refilled.

Create habits of performing hand hygiene at regular intervals during the day, but especially in the following situations:

- Upon entering the building
- When returning to the classroom
- After using the restroom
- After sneezing, coughing, or blowing the nose
- Before and after touching the face
- Before eating or handling food
- After a break
- After handling potentially contaminated objects
- Whenever visibly soiled

Hand-washing with soap and water is the most effective method against COVID-19. Scrub hands together for at least 20 seconds, covering all surfaces. Dry using a single-use drying material or air dry.

Alcohol-based hand sanitizer is another great option when soap and water are not immediately available as long as hands are not visibly soiled. Alcohol-based hand sanitizer should be 60-95% alcohol to be the most effective.

PERSONAL PROTECTIVE EQUIPMENT

All unvaccinated students and staff in grades K-12 are highly encouraged to wear masks. Exemptions may be made for students and staff with medical conditions that prevent wearing masks. Masks may help prevent people who have COVID-19 from spreading the virus to those around them. When widely used by people in public settings, masks help to reduce the spread of COVID-19. In school settings, universal mask usage allows for unvaccinated students and staff to bypass quarantine, ensuring a less fractured learning environment. Hamilton County Public Health supports universal mask policies, should schools choose to implement them. In the absence of a universal mask policy, schools should ensure that those who choose to continue mask usage are not stigmatized.

Masks should not be worn by children under the age of two, or anyone who has trouble breathing, who is unconscious, incapacitated, or otherwise unable to remove the mask without assistance.
Hamilton County Public Health recommends masks as a barrier to help prevent respiratory droplets from traveling into the air and onto other people when the person wearing the mask coughs, sneezes, talks or raises his/her voice.

This recommendation is based on the CDC’s guidance and scientific knowledge about the role respiratory droplets play in the spread of COVID-19. Clinical and laboratory studies show that masks help reduce the spread of droplets when worn over the mouth and nose.

**SCHOOL TRANSPORTATION**

The CDC continues to require that masks be worn on all public transportation, including school buses. This requirement is regardless of vaccination status.

All transportation services should follow applicable federal rules and regulations. Learn more at the following link:

[CDC’s Guidance for COVID-19 Prevention in K-12 Schools](#)

**WATER FOUNTAIN USE**

To minimize the risk of COVID-19 and diseases associated with water, take steps to ensure that all water systems and features (e.g., sink faucets, drinking fountains, decorative fountains) are safe to use after a prolonged facility shutdown. CDC provides guidance related to mold and Legionella that can be found using the following link:

[Guidance for Reopening Buildings After Prolonged Shutdown or Reduced Operations](#)

Drinking fountains should be cleaned and sanitized. The proximity of people’s mouths and noses to drinking fountains while they are in use creates an unacceptable level of risk for spreading COVID-19. Drinking fountains should not be allowed for direct drinking access. If appropriate precautions can be taken, limited access to a small number of drinking fountains can be allowed exclusively for filling water bottles. However, Hamilton County Public Health strongly encourages staff and students to bring their own water to minimize the use and touching of water fountains. If this is not feasible, in certain scenarios, communal water sources may be necessary to ensure consistent access to water, especially to prevent heat exhaustion in students when outside temperatures are high.

Considerations for using drinking fountains to fill water bottles:

- Clean and sanitize drinking fountains frequently.
- Consider restricting use to faculty and staff only.
- Do not allow water bottles to come into contact with the nozzle when refilling.
- Test the water flow and let the water flow for 10 seconds to allow for fresh, clean water to come through before drinking.
- If the fountain requires you to push a button or lever, clean the surface before and after, or use your elbow.
- Clean your hands afterward with soap and water, or alcohol-based hand sanitizer if hand washing facilities are not readily available.
CLEANING AND DISINFECTION METHODS

Cleaning an area will remove germs, dirt, and impurities on the surface, while disinfecting will kill germs on surfaces, further reducing the risk of spreading infection.

HOW TO CLEAN & DISINFECT EXPOSED AREAS

To ensure the proper cleaning and disinfecting of any areas that may have been exposed to COVID-19:

- Wear disposable gloves to clean and disinfect.
- Clean the surfaces using soap and water first, then use a disinfectant.
- Follow the instructions on the label to ensure the safe and effective use of the product.
- Practice routine cleaning on frequently touched surfaces.
  More frequent cleaning and disinfection may be required based on the level of use.

Diluted household bleach solutions can also be used if appropriate for the surface. The bleach solution must be at least 1000ppm sodium hypochlorite or a concentration of 5%-6%. To prepare a bleach solution for cleaning and disinfecting you want to:

- Check to ensure that the product is not past its expiration date.
- Never mix household bleach with ammonia or any other cleanser.
- Mix bleach solution using the following instructions:
  - 5 Tablespoons (cup) bleach per gallon of room temperature water or,
  - 4 teaspoons bleach per quart of room temperature water.

For a list of EPA approved products and instructions, please see Disinfectants for Use Against SARS-CoV-2

TIMING AND LOCATION OF GENERAL CLEANING AND DISINFECTION

Staff members should clean and disinfect frequently touched surfaces (e.g., playground equipment, door handles, sink handles, drinking fountains) within the school and on school buses at least daily or as needed when visibly soiled. Use of shared objects (e.g., gym or physical education equipment, art supplies, toys, games) should be limited when possible or cleaned between use. The CDC offers guidance on how to safely clean and disinfect school buses or other vehicles in What Bus Transit Operators Need to Know About COVID-19.

Cleaning Tips for Schools that will help stop the spread of germs:

- Develop a schedule for increased routine cleaning and disinfection.
- Ensure safe and correct use and storage of cleaning and disinfection products, including storing products securely away from children.
- Use products that meet EPA disinfection criteria.
- Cleaning products should not be used near children, and staff should ensure that there is adequate ventilation when using these products to prevent children or themselves from inhaling toxic fumes.
TIMING AND LOCATION OF GENERAL CLEANING AND DISINFECTION AFTER PERSONS SUSPECTED/CONFIRMED TO HAVE COVID-19 HAVE BEEN IN THE FACILITY

If a probable or confirmed case of COVID-19 has been identified, the school should take these steps to clean and disinfect the exposed area:

- Close off areas visited by the ill persons.
- Open outside doors and windows and use ventilating fans to increase air circulation in the area.
- Wait 24 hours or as long as practical before beginning cleaning and disinfection.
- Cleaning staff should clean and disinfect all areas such as offices, classrooms, bathrooms, common areas, and shared electronic equipment, focusing especially on frequently touched surfaces.

*If it has been more than seven days since the person with suspected/confirmed COVID-19 visited or used the facility, additional cleaning and disinfection are not necessary.*

HARD (NON-POROUS) SURFACES

If hard surfaces are dirty, they should be cleaned using a detergent or soap and water before disinfection. Once the surface is clean and dried, it should be disinfected with an effective disinfectant. Please follow the manufacturer’s instructions for all cleaning and disinfecting products for concentration, application method, and contact time, and to ensure safe and effective disinfection use.

SOFT (POROUS) SURFACES

If soft surfaces such as carpeted floors, rugs, and drapes become dirty, clean visible contamination (if present). Clean items with appropriate cleaners indicated for use on the surfaces. If applicable, launder the item by the manufacturer’s instructions using the warmest appropriate water setting for the items and then dry items completely.

LINENS, CLOTHING, AND OTHER ITEMS THAT GO IN THE LAUNDRY

Wash items as appropriate by the manufacturer’s instructions. If possible, launder items using the warmest appropriate water setting for the items and dry items completely. Dirty laundry that has been in contact with an ill person can be washed with other people’s items. To minimize the possibility of dispersing virus through the air, do not shake dirty laundry.

*Clean and disinfect hampers or other carts for transporting laundry according to the guidance above for hard or soft surfaces.*

ELECTRONICS

For electronics such as tablets, touch screens, keyboards, remote controls, and ATMs, remove visible contamination if present. Please follow the manufacturer’s instructions for all cleaning and disinfection products. If no manufacturer guidance is available, consider the use of alcohol-based wipes or sprays containing at least 70% alcohol to disinfect touch screens. Dry surfaces thoroughly to avoid the pooling of liquids.
ENVIRONMENTAL CLEANING CHECKLIST

Schools can use the following checklist to help identify frequently touched surfaces and objects that should be cleaned.

**COVID-19 Cleaning & Disinfection Checklist**

Clean and disinfect at least daily (or between use as much as possible) frequently touched surfaces and objects such as:

- Face shields*
- Door knobs & handles
- Stair rails
- Classroom desks & chairs
- Lunchroom tables
- Lunchroom chairs
- Countertops
- Handrails
- Light switches
- Bus seats & handrails
- Sink handles & faucets
- Drinking fountains (if open)
- Playground equipment
- Handles on equipment (i.e., athletic equipment)
- Push-buttons on vending machines & elevators
- Shared toys
- Shared remote controls
- Shared telephones
- Shared desktops
- Shared computer keyboards and mice^*

*Face shields should be cleaned following manufacturer’s instructions. 1) While wearing gloves, carefully wipe the inside, followed by the outside of the face shield or goggles using a clean cloth saturated with neutral detergent solution or cleaner wipe. 2) Carefully wipe the outside of the face shield or goggles using a wipe or clean cloth saturated with EPA-registered hospital disinfectant solution. 3) Wipe the outside of face shield or goggles with clean water or alcohol to remove residue. 4) Fully dry (air dry or use clean absorbent towels). 5) Remove gloves and perform hand hygiene.

^Computer keyboards are difficult to clean. Shared computers should have signs posted instructing proper hand hygiene before and after using them to minimize disease transmission. To facilitate cleaning, consider using covers that protect the keys but enable use of the keys.

**EPA REGISTERED COVID-19 DISINFECTANT LIST**

The Environmental Protection Agency (EPA) has a list of all products that meet the EPA’s criteria for use against SARS-CoV-2, the virus that causes COVID-19. To find a product use the link below. Clicking on the “Other Search Options” button at the bottom of the page will allow you to search by active ingredient, product name, formula type, surface type, and other criteria.

List N: Disinfectants for Use Against SARS-CoV-2

**STAFF TRAINING**

COVID-19 has impacted staff, students, and families across Hamilton County. To help keep the school community safe, the school should consider offering training and resources for staff on coronavirus to help prepare them for their new normal. Focusing on prevention will help keep school members and communities safe and healthy during the COVID-19 pandemic. Educators and other staff members should be trained on all safety protocols and how to recognize the signs and symptoms of COVID-19.
ACTIVE & PASSIVE MONITORING

Schools should encourage staff, students, and families to self-report to the school if they flag for any of the following scenarios:

- They are having symptoms of COVID-19
- Are being tested for COVID-19
- Test positive for COVID-19
- Are exposed to someone with COVID-19 within the last 14 days

This is following the guidance from the U.S. Department of Health and Human Services’ [health information sharing regulations for COVID-19](#). Once a person has been identified, the Point of Contact at the school should notify Hamilton County Public Health as soon as possible.

PASSIVE MONITORING

If there are no cases of COVID-19 identified within a school, the school may do passive monitoring. Staff, students, and families should monitor for signs and symptoms of COVID-19 at home. Schools should encourage individuals and families to monitor for signs and symptoms of COVID-19 before reporting to school.

If staff members or students screen positive for COVID-19, they should not attend school, and they should notify the school as soon as possible. Passive monitoring, or monitoring at home, should include [temperature, signs, and symptoms of COVID-19, COVID-19 testing, and COVID-19 exposure](#).

If a staff member or student reports “yes” to any of these items, the Point of Contact at the school should notify Hamilton County Public Health.

ACTIVE MONITORING

Once a student or a staff member has been identified as a confirmed or probable case of COVID-19, the school should consider active monitoring of the facility. The school should implement screenings before students and staff enter a school bus or building. Hamilton County Public Health encourages the facility to use the screening tool on page III of the Appendices.

If a student or staff member screens positive, the Point of Contact at the school should notify Hamilton County Public Health as soon as possible.
CLOSURE RECOMMENDATIONS

Schools districts should utilize local data to determine if/when schools should close due to COVID-19 as well as to assess the risk of various types environments (in person, hybrid, or remote learning). Hamilton County Public Health, in collaboration with the Cincinnati Health Department and Cincinnati Children’s Hospital Medical Center, have adapted recommendations from the Harvard Global Health Institute for use by schools and their administrators to make these decisions. Hamilton County Public Health supports the use of these guidelines by schools and will assist with facilitating these recommendations as needed. The entire set of guidance can be found at the following location under ‘School Planning’: www.hamiltoncountyhealth.org/covid19

COVID-19 SCHOOL OUTBREAK DEFINITIONS

Hamilton County Public Health will help schools monitor the cases of COVID-19 in their buildings to determine if there is an outbreak of COVID-19 in the school. The type of outbreak will be classified by the number of COVID-19 cases identified in the school, as well as the time between cases or if the cases can be linked together.

NOT A COVID-19 OUTBREAK

A school will be considered to not have a COVID-19 outbreak only under two circumstances.

- If there are no cases of COVID-19 at the school, or if a suspected case of COVID-19 was determined to not be a case (received a negative COVID-19 test) or,
- Only one case of COVID-19 was found to be at the school, and after 28 days of monitoring for additional cases of COVID-19 in the school there were no other cases identified.

SUSPECTED COVID-19 OUTBREAKS

A school will be considered to have a suspected outbreak of COVID-19 if one student or staff member is determined to be a probable or confirmed case of COVID-19. The school will be monitored for 28 days (or two incubation periods) to ensure there is no community spread of COVID-19 within the school. If after 28 days of monitoring and no additional staff or students develop COVID-19, the outbreak will be classified as not an outbreak and closed.

CONFIRMED COVID-19 OUTBREAKS

A school will be considered to have a confirmed outbreak of COVID-19 if more than one student or staff member is determined to be a probable or confirmed case of COVID-19 and it is determined that the spread of disease likely occurred between the cases (i.e. each case did not acquire the illness from outside sources). The school will be monitored for 28 days to help control and stop the spread of COVID-19. Hamilton County Public Health will consider the outbreak closed if, after 28 days from the last case of COVID-19 that was identified, no other staff or students develop COVID-19.
SCHOOL AND CLASSROOM RECOMMENDATIONS
If a probable or confirmed case of COVID-19 is discovered at the school, the designated Point of Contact will notify Hamilton County Public Health as soon as possible so that quick action may be taken. Hamilton County Public Health will work with each school to help with source control as well as answer any questions or concerns the school has.

The Outbreak Response Team at Hamilton County Public Health can be reached at (513) 946-7800.

SAFETY PLAN RECOMMENDATIONS
A Safety Plan is the most important step in keeping students and staff members safe and informed. Once a positive case of COVID-19 has been identified within the school, administration and Hamilton County Public Health will need to take swift action to stop the spread of the virus.

NOTIFICATION
The school will be required to notify staff, students, and families within 24 hours of when a case of COVID-19 is identified within the school. This notification should be sent out via the school’s communication system or by using a notification letter. These notifications need to follow all privacy policies and applicable laws that the school is required to follow.

Hamilton County Public Health has a template letter that the school can use, which can be found on page IV of the appendix or Hamilton County Public Health can send the school, as necessary. At minimum, the affected classrooms, students, and staff should be notified, but the school can also distribute the letter to the entire school population if desired.

UNIVERSAL FACE MASKS
A facial covering is the most effective and simple measure to reduce transmission of Covid-19. Hamilton County Public Health supports schools that choose to implement universal face coverings.

CLEANING AND DISINFECTING
To lower the risk of spread of the COVID-19 virus as well as other diseases, schools should continue routine cleaning with soap and water or an EPA-approved cleaner and disinfectant. Routine cleaning will help to remove germs and dirt from surfaces.

If a case of COVID-19 is identified in a school, the school should close off the areas that were used by the person (regardless if they actively had symptoms while in the facility). These areas should not reopen until after cleaning and disinfecting have occurred.

The school staff should wait as long as possible (at least several hours) before returning to the area for cleaning and disinfecting.

Once a case of COVID-19 has been identified within the school, the school should implement a more proactive approach to cleaning. Commonly touched surfaces should be cleaned more often and in between uses as much as possible. Commonly touched surfaces can include tables, doorknobs, light switches, countertops, handles, desks, phones, keyboards, toilets, faucets, sinks, water fountains, etc.
ACTIVE MONITORING
If the school is not already actively monitoring students and staff members before they enter the building, Hamilton County Public Health highly recommends that they begin to do so. This recommendation will continue until 28 days after the onset of symptoms of the last case of COVID-19 that was identified at the school. Active monitoring includes the implementation of the Hamilton County Public Health COVID-19 screening tool, found on page III of the appendix, or a similar screening tool created by the school.

SOCIAL DISTANCING
To help prevent the spread of COVID-19, the CDC, the Ohio Department of Health, and Hamilton County Public Health recommend that all students and staff practice social distancing. Social distancing, or physical distancing, means keeping ideally six feet and at a minimum three feet between oneself and other people who are not from one’s household.

COHORTING STUDENTS
Schools should keep students and staff in small groups, commonly referred to as cohorts as much as possible. Keeping cohorted groups from moving and intermingling within the school will help slow the spread of COVID-19. If keeping students in cohorts is not possible, adhering to a seating chart and ensuring attendance is accurately recorded is pertinent to allowing for swift identification and notification of potential close contacts.

CONTACT TRACING
Hamilton County Public Health will work with the Point of Contact at the school to help with contact tracing. Using the provided line list, the Point of Contact will complete all fields for every close contact of a positive case of COVID-19.

Close contact is any student, staff member, or visitor who was less than six feet from the positive case for longer than 15 minutes, cumulatively. Close contacts are identified starting 48 hours before symptom onset until the case of COVID-19 began isolation.

Hamilton County Public Health will provide the school with a close contact notification letter, found on page V of the appendix. This letter will be sent by the school to all close contacts identified. The school will also remind the close contacts that they are required to self quarantine (as outlined in the Quarantine Requirements sections) from the date of last exposure (date the individual was last around the positive case). Fully vaccinated close contacts will have the option of providing proof of vaccination to the school in order to avoid quarantine.
DURATION OF PREVENTION MEASURES

When a case or outbreak of COVID-19 is identified within the school, Hamilton County Public Health will work with the school to monitor the staff and students for 28 days after the most recent symptom onset date. This monitoring will help limit community spread and minimize infection within the school.

Hamilton County Public Health recommends implementing the safety plan during the monitoring period, which include best practices:

- Actively screen staff and students for COVID-19;
- Clean and disinfect more often;
- Cohort students whenever possible;
- Encourage social distancing;
- Encourage universal face coverings.

OUTBREAK CLOSURE

Outbreaks are considered closed after two incubation periods (28 days) have passed since the last probable or confirmed case of COVID-19.

Once a COVID-19 outbreak is resolved, it is recommended the school administration conduct an after-action review. This review allows for the identification of the strengths and weaknesses of the response process. Identifying strengths and weaknesses will provide an opportunity to identify areas that may be improved upon for future outbreaks.

After the closure of a COVID-19 outbreak, the school returns to passive monitoring.

If another case of COVID-19 is identified at the school, the Point of Contact should reach out to Hamilton County Public Health at (513) 946-7800.
Samples or templates of documents and forms will be provided in electronic fillable copies by a member of Hamilton County Public Health.

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Links to Resources and Signage ...................................................................... II
Screening Tool................................................................................................. III
COVID-19 Notification Letter .......................................................................... IV
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# Symptoms of COVID-19 Comparison

<table>
<thead>
<tr>
<th>Symptoms of COVID-19</th>
<th>Strep Throat</th>
<th>Common Cold</th>
<th>Flu</th>
<th>Asthma</th>
<th>Seasonal Allergies</th>
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<tbody>
<tr>
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<tr>
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<td>✔</td>
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</table>

✔ Symptom of illness

cdc.gov/coronavirus
LINKS TO RESOURCES AND SIGNAGE

Schools can find additional resources and signage that can be used throughout the school provided by the Ohio Department of Health, Ohio Department of Education, and Centers for Disease Control and Prevention.


- CDC Print Resources for Schools: https://www.cdc.gov/coronavirus/2019-ncov/communication/print-resources.html?Sort=Date%3A%3Adesc&Audience=Schools

- CDC Handwashing Promotion Materials: https://www.cdc.gov/handwashing/materials.html


- Ohio Department of Education, Reset and Restart: http://education.ohio.gov/Topics/Reset-and-Restart


### SCREENING TOOL

**Instructions:** Staff and students should check their temperature and complete this form twice daily for 14 days after the date of the last exposure even if they are opting for a reduced quarantine. If the temperature is above or equal to 38.0°C/100.0°F, staff report subjective fevers, or any of the following symptoms, they should self-isolate and notify their primary care doctor or call their local public health department. Staff and students should be encouraged to be cognizant of if they are feeling feverish or ill before they leave home.

### COVID-19 Screening Tool

<table>
<thead>
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<th>School Name:</th>
<th>Date &amp; Time:</th>
<th>Screening Location:</th>
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</thead>
<tbody>
<tr>
<td>Person Completing Form:</td>
<td>Date of Birth:</td>
<td>Student / Staff:</td>
</tr>
<tr>
<td>Name of Individual:</td>
<td>Date of Exposure:</td>
<td></td>
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<tr>
<td>Have you been tested for COVID-19?</td>
<td>Have you been exposed to COVID-19 in the last 14 days?</td>
<td></td>
</tr>
<tr>
<td>□ Yes □ No</td>
<td>□ Yes □ No</td>
<td></td>
</tr>
<tr>
<td>Date of Test:</td>
<td>Date of Exposure:</td>
<td></td>
</tr>
</tbody>
</table>

**Symptoms, check all that apply:**

- □ Cough
- □ Shortness of breath
- □ Difficulty breathing
- □ New loss of smell
- □ New loss of taste
- □ Fever
- □ Chills
- □ Rigors (chills with shaking)
- □ Body aches
- □ Headache
- □ Sore throat
- □ Nausea or vomiting
- □ Diarrhea
- □ Fatigue
- □ Congestion or Runny Nose
- □ Other (specify)
- □ None

| Name of Individual: | Date of Birth: | Student / Staff: |
| Have you been tested for COVID-19? | Have you been exposed to COVID-19 in the last 14 days? |
| □ Yes □ No | □ Yes □ No |
| Date of Test: | Date of Exposure: |

**Symptoms, check all that apply:**

- □ Cough
- □ Shortness of breath
- □ Difficulty breathing
- □ New loss of smell
- □ New loss of taste
- □ Fever
- □ Chills
- □ Rigors (chills with shaking)
- □ Body aches
- □ Headache
- □ Sore throat
- □ Nausea or vomiting
- □ Diarrhea
- □ Fatigue
- □ Congestion or Runny Nose
- □ Other (specify)
- □ None
Dear School Name Staff, Parents, and Students,

This letter is to notify you that a student or staff member at School name has been diagnosed with COVID-19. In order to contain the spread of this infection, we are asking you to monitor for symptoms, stay home when sick and see a physician for testing and treatment if you observe any signs or symptoms of COVID-19. Please take this letter with you when you go to your physician. The period of observing yourself related to this exposure through [DATE 14 days after last exposure].

Here are the steps we need you to do to protect our community:

- Please monitor yourself for symptoms of COVID-19, which may include cough, shortness of breath, new smell disorder, or new taste disorder. Other symptoms include fever (measured or subjective), shivering with chills, body aches, headache, sore throat, nausea or vomiting, diarrhea, fatigue, congestion or runny nose.
- If you develop symptoms consistent with COVID-19 please stay at home and consult with your physician regarding next steps.
- Please notify school administration if you choose to get tested or if you develop symptoms.

The overall health and well-being of the students and employees at [SCHOOL NAME] and throughout Hamilton County continues to be our top priority. Thank you for your cooperation in keeping our community healthy. Please contact Hamilton County Public Health’s COVID-19 Hotline (513) 946-7919, Monday through Friday 8am-4pm, if you have any questions or concerns.

Sincerely,

Greg Kesterman
Health Commissioner
Hamilton County Public Health
250 William Howard Taft
Cincinnati, Ohio 45219

Dear Parent/Guardian,

This letter is to notify you that a student or staff member at [NAME OF SCHOOL] has been diagnosed with COVID-19. During routine contact tracing your child has been identified as a close contact, but will not need to quarantine.

In order to contain the spread of this infection we are asking parents to monitor your child(ren) for symptoms, keep your child(ren) home when sick, and take them to see a physician for testing if you observe any signs or symptoms of COVID-19. Symptoms of COVID-19 range from mild to severe and may appear 2-14 days after exposure to the virus. Please take this letter with you when you go to your physician. The period of observing your child related to this exposure ends [DATE(This is 1 incubation period (14 days) from last known exposure)].

If your child develops any of the following symptoms please have the child isolate and speak to their medical provider.

- fever
- chills
- rigors
- myalgia
- headache
- sore throat
- nausea
- vomiting
- diarrhea
- fatigue
- congestion
- runny nose
- cough
- shortness of breath
- difficulty breathing
- loss of taste
- lost of smell

On December, 30, 2020, Governor Dewine and the Ohio Department of Health updated quarantine guidelines for K-12. Students and staff are no longer required to quarantine if their exposure to COVID-19 occurred in a classroom that followed appropriate protocols (see below.) This guidance excludes exposure outside the classroom and in extracurricular activities, such as sports. Quarantine is still required for exposures in these settings.

Classroom protocols include:
- Hand hygiene
- A regularly cleaned and disinfected school environment
- Use of a facemask

More information on the updated protocols can be found here: COVID-19 Health and Prevention Guidance for Ohio K-12 Schools.

If you or your child’s doctor has any questions or concerns, please contact Hamilton County Public Health’s Division of Epidemiology and Assessment Outbreak Response Team at (513) 946-7919.

Thank you for your cooperation.

Sincerely,

Greg Kesterman  
Health Commissioner  
Hamilton County Public Health  
250 William Howard Taft  
Cincinnati, Ohio 45219

Month, Date, Year

Dear Parent/Guardian,

This letter is to notify you that a student or staff member at [NAME OF SCHOOL] has been diagnosed with COVID-19. During routine contact tracing your child has been identified as a close contact and will need to quarantine unless they are fully vaccinated with documentation (i.e., > 2 weeks following receipt of the second dose in a 2- dose series) and remain asymptomatic.

In order to contain the spread of this infection we are asking parents to monitor your child(ren) for symptoms, keep your child(ren) home when sick, and take them to see a physician for testing if you observe any signs or symptoms of COVID-19. Symptoms of COVID-19 range from mild to severe and may appear 2-14 days after exposure to the virus. Please take this letter with you when you go to your physician. The period of observing your child related to this exposure ends [DATE(This is 1 incubation period (14 days) from last known exposure)].

If your child develops any of the following symptoms please have the child isolate and speak to their medical provider.

- fever
- chills
- rigors
- myalgia

On December, 30, 2020, Governor Dewine and the Ohio Department of Health updated quarantine guidelines for K-12. Students and staff are no longer required to quarantine if their exposure to COVID-19 occurred in a classroom that followed appropriate protocols (see below.) This guidance excludes exposure outside the classroom and in extracurricular activities, such as sports. Quarantine is still required for exposures in these settings.

Classroom protocols include:

- Hand hygiene
- A regularly cleaned and disinfected school environment
- Universal facemask usage

More information on the updated protocols can be found here: [COVID-19 Health and Prevention Guidance for Ohio K-12 Schools](#).

# INFECTION CONTROL MEASURES CHECKLIST

## COVID-19 Outbreak Interventions

<table>
<thead>
<tr>
<th>Communication</th>
<th>Applies (Yes, No, N/A)</th>
<th>Completed By</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Facility administration notified.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Facility COVID-19 point of contact and team notified.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Local health department notified.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Staff, students, families and community notified.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Investigation and Monitoring</th>
<th>Applies (Yes, No, N/A)</th>
<th>Completed By</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Students evaluated for COVID-19. Symptomatic students are sent home and placed in isolation.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Staff members evaluated for COVID-19. Symptomatic staff are sent home and placed in isolation.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Student line list completed.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Staff line list completed.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Floor plan sent to local health department to help map cases.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Update and report all new cases to the local health department on a daily basis.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Testing</th>
<th>Applies (Yes, No, N/A)</th>
<th>Completed By</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Symptomatic students are referred to providers for testing.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Symptomatic staff are referred to providers for testing.</td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Infection Control Measures</th>
<th>Applies (Yes, No, N/A)</th>
<th>Completed By</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>COVID-19 notification letter sent to staff, students and families.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Contact tracing to identify close contacts.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Close contacts vaccination status and documentation of vaccination status obtained.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Unvaccinated close contacts notified and sent home to quarantine.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Vaccinated close contacts notified and told to self monitor for 14 days.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Letter sent home to identified close contacts.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## COVID-19 Outbreak Interventions

<table>
<thead>
<tr>
<th>Infection Control Measures</th>
<th>Applies (Yes, No, N/A)</th>
<th>Completed By</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cleaning and disinfecting affected areas.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Safe return plan in place.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Active monitoring in place.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Universal masking in place.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Social distancing in place.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cohort students in place.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Enhanced environmental cleaning conducted through the outbreak period.</td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Safe Return</th>
<th>Applies (Yes, No, N/A)</th>
<th>Completed By</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Students return to school.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Staff members return to school.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Hand Hygiene</th>
<th>Applies (Yes, No, N/A)</th>
<th>Completed By</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Staff performs hand hygiene with soap and water or alcohol-based hand sanitizer frequently.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Students perform hand hygiene with soap and water or alcohol-based hand sanitizer frequently.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Education</th>
<th>Applies (Yes, No, N/A)</th>
<th>Completed By</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Training provided to all staff on the signs and symptoms of COVID-19.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Education materials are given out to staff.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>COVID-19 control measures are discussed.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
REFERENCES


CONTACT US

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