



# Interim Guidance on Management of Respiratory Illness (including COVID-19) in PreK-12 Schools, Early Childcare, and IHE Settings

The following guidance refers to management of COVID-19 and other respiratory illness in schools and early childcare settings within the City of Chicago.

For additional questions please contact the CDPH Youth Settings Team at [schoolscd@chicago.org](mailto:schoolscd@chicago.org) or (312) 746-6015. For Quick reference see, [Checklist for COVID-19 Mitigation in Youth Settings](#)

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## Key Points (updated 8/16/2023)

- Facilities should take a broad approach to preventing respiratory illness in their school communities for the 2023-24 School Year.
- Non-high-risk congregate settings (including K-12 Schools, Early Childcare facilities, and Universities) are encouraged to internally monitor suspected outbreaks/ clusters of COVID-19 in their facilities and take steps to prevent further spread.
- Facilities should report COVID-19 clusters or outbreaks to the Youth Settings team. **The definition of a suspected COVID-19 outbreak/cluster has been updated as follows: at least 20% of a defined group/ cohort OR at least 5 cases among individuals within a defined group/cohort (whichever is lower) with symptom onset within seven days of each other.** Suspect outbreaks/ clusters can be reported at the following link: <https://redcap.link/SchoolECEDiseaseReport>
- Facilities should report individual cases of COVID-19 to CDPH **only if**:
  - a student or staff **death** occurs due to COVID-19 OR
  - a student or staff **ICU hospital admission** occurs due to COVID-19.
- Students and staff **who have tested positive** for COVID-19 must **isolate** at home and stay away from the school/ECE premises for **a minimum of 5 days after symptom onset or test date if no symptoms** (date of symptom onset or positive test date is day 0) and until [requirements for the end of isolation are met](#). Positive individuals should mask for an additional 5 days (days 6-10 after symptom onset or test date, if asymptomatic) upon return to school
- **Schools may continue to use the 10-day isolation (for those that test positive for COVID-19) if their population is unable to mask or is at high risk of severe illness due to underlying medical issues.**
- Students and staff who have been part of the same classroom or cohort as someone who tests positive for COVID-19 during their infectious period **should not be excluded from school, but they should be encouraged mask for 10 days from the date of the exposure and test on day 5 (day 0 is date of exposure)**. Any close contacts who [test positive for SARS-CoV-2](#) should begin [isolation](#) regardless of [vaccination status](#).
  - See ["For students or staff that are part of the same cohort as a COVID-19 case"](#)
- For schools and ECEs in Chicago, all case investigation activities conducted should be consistent with CDPH policies and applicable federal and workplace, healthcare/medical, privacy, informed consent, data security, and confidentiality laws, regulations, and requirements.
- **The CDPH Youth Settings Team is also available for consultation and to answer questions from school nurses and administrators via email ([schoolscd@cityofchicago.org](mailto:schoolscd@cityofchicago.org)) or phone (312-746-6015).**

## Respiratory Illness Mitigation Strategies

- **A comprehensive approach to respiratory hygiene should be emphasized in schools and early childcare settings, which includes: covering coughs and sneezes, good hand hygiene, maximizing indoor ventilation, and encouraging mask wearing when symptomatic or when in crowded spaces during respiratory season.**
- Vaccination is a leading public health prevention strategy to prevent adverse outcomes related to COVID-19 and influenza. Schools should [promote equitable access to vaccination](#).
- For operational considerations on how to prevent COVID-19 in Youth Settings, please refer to: [CDC Operational Guidance for K-12 Schools and Early Care Center](#)

# School Exclusion Recommendations

## Definitions:

- **Isolation** is used to separate people **infected** with SARS-CoV-2, the virus that causes COVID-19, from people who are not infected. These individuals can have symptoms or no symptoms (asymptomatic). People who are in isolation should stay home and be excluded from school until they can no longer spread COVID-19 to others. In the home, anyone sick or infected should separate themselves from others by staying in a specific “sick room” or area and using a separate bathroom (if available).
- **Symptoms of COVID-19:** Symptoms may appear 2-14 days after exposure to the SARS-CoV-2 virus but are most likely to occur within the first 5 days after exposure. Symptoms can include:
  - Fever (100.4°F or higher) or chills
  - Cough
  - Shortness of breath or difficulty breathing
  - Fatigue from unknown cause
  - Muscle or body aches
  - Headache
  - New loss of taste or smell
  - Sore throat
  - Nausea or vomiting
  - Diarrhea

This list does not include all possible symptoms and children and youth with SARS-CoV-2 infection may experience any, all, or none of these symptoms.

**Individuals with respiratory illness such as influenza or RSV can present similar symptoms as COVID-19 and may require testing for diagnosis.**

## For students or staff with symptoms suggestive of respiratory illness (including COVID-19):

- Schools and local health departments should exercise their longstanding authority, including as described in the **Communicable Disease Code** and according to schools’ infectious disease policies, to address all infectious disease cases among students and staff.
- Staff and students with new onset of respiratory symptoms should test themselves for COVID-19.
  - Instruct staff members or students to isolate if they test positive for COVID-19 (see “[For students or staff with a positive test](#)” section below).
  - Instruct staff members or students to stay home from school until they have been fever-free (<100.4F) for at least 24 hours (without fever-reducing medication), even if their COVID-19 test was negative.
  - Encourage staff members or students who develop severe illness or who are not improving, they [should visit their healthcare provider for diagnosis and treatment](#), even if their COVID-19 test was negative.
  - Encourage masking for staff or students who have symptoms of respiratory illness but who have had a negative COVID test and do not meet the [exclusion criteria](#).

## For student or staff with a positive test:

- Clear guidance should be provided to parents and staff about acceptable methods of reporting COVID-19 lab results or diagnosis to the school as soon as possible.
- Interview the staff member or student's parent/guardian by telephone as soon as you receive a verbal or written report that they tested positive. Questions to ask include:
  - What was the test date?
  - What was the last day they were at school? (Please confirm by looking at attendance files.)
    - If symptoms, please ask the first day of their symptoms.
    - If NO symptoms, confirm the test date again.
- Ensure the positive individual is aware that they should isolate, meaning stay home and away from others, until it has been at least 5 days (return day 6 or after) since their symptoms first appeared (or for asymptomatic individuals, from their test date) AND at least 24 hours with no fever (without using fever-reducing medications) AND symptoms have improved. Day 0 is date of symptom onset (or positive test, if asymptomatic).
  - After isolation period, individuals may return to school but must continue to wear a well-fitting mask through day 10, when around others.
    - If masks need to be removed (e.g., for lunch), individuals should ensure they wear their masks when not actively participating in these activities.
    - **Schools/ECEs may continue to use the 10 day isolation protocol if the individual cannot mask due to medical or age considerations, such as those that serve the population of 2 and younger for whom masking is not recommended.**
    - To shorten masking time upon return from isolation, individuals who are without a fever for  $\geq 24$  hours may present two negative rapid antigen tests  $\geq 48$  hours apart, with the first test taken no sooner than day 6 post symptom onset.
      - If either test result is positive, the individual must continue to wear a mask until they can present 2 consecutive negative tests taken  $\geq 48$  hours apart
      - A positive result on any viral test [antigen, rapid antigen, molecular (Nucleic Acid Amplification Test (NAAT) such as an RT-PCR] should be considered positive for public health purposes. A confirmatory test is not needed.

## School/ECE Cohort Identification and Notification

### Determining Who Is Part of a Cohort

- Depending on the classroom structure selected by the individual school, all students and staff within the positive individual's grade may be considered part of the same cohort, if the students within this grade mix classes and have the same exposures.
- Assess whether there were any other staff members not assigned to the classroom/cohort or students in other classrooms/cohorts with whom the positive individual had close contact (e.g., substitute teachers). Communications and public health actions for the affected cohort should include notification of these individuals as well.
- Include any extracurricular activity groups (e.g., sports, music, before- and after-school programs) and shared transportation in the assessment.
- In general, CDPH supports a broad definition of cohorts to facilitate timely communication public health action and reduce transmission. This should be balanced against educational and practical considerations.

### **Notification of students or staff within the defined cohort:**

- Schools should clearly state their policies at the start of the school year for when students or staff will be notified of COVID-19 exposure in their facility. Above all, ensure the identity of the positive individual is protected. Cohort notification should always be performed in accordance with applicable privacy and other laws.
- Students or staff that share a cohort with a person testing positive for COVID-19 should be:
  - Notified of their exposure by the school, **ideally no later than 24 hours** after identification of the positive case,
  - Encouraged to monitor their symptoms for 10 days following the exposure.
  - Encouraged to test on day 5 after exposure and follow isolation guidance if the test is positive.
  - Encouraged to mask for 10 days after the exposure occurred (date of exposure is day 0).
  - **If individuals are unable to mask due to age or underlying medical conditions, a consecutive testing strategy (such as daily testing with a rapid antigen test) is appropriate to identify cases quickly following an exposure.**
  - If an individual develops symptoms suggestive of COVID-19 (above), they should test themselves. If an individual has a positive test result, they should also stay home and isolate from others and can return if they are without a fever for  $\geq 24$  hours.
  - Sample notification letters can be found on the [CDPH COVID-19 School HAN page](#).

## **COVID-19 Reporting to CDPH**

- While schools do not have to report individual cases to CDPH, it can be helpful to keep track of who has tested positive within the school community so that appropriate public health action can be taken and so that additional follow up can be performed if clusters/ outbreaks occur.
- Clusters/ outbreaks can be reported to CDPH by uploading a Line List to: <https://redcap.link/SchoolECEDiseaseReport>
- To complete the form, you will need the following information about the classroom(s) impacted:
  - Total number of classrooms/cohorts that have a cluster (5+ cases or 20% or more of cohort)
  - Total number of students and staff that have tested positive within each classroom/ cohort being reported
  - Total number of students and staff that are in the classroom/cohort
  - The first positive individual in each classroom/cohort's reported or observed symptom onset date
  - The last positive individual in the classroom/cohort's last date at school
  - The positive individuals' test dates

### **What Schools Can Expect After Reporting a Cluster of 5+ Cases in the Same Cohort or Classroom**

- CDPH's Youth Settings team reviews cluster reports.
- CDPH will follow up to ensure that [appropriate control measures](#) have been put into place and that outbreak/ cluster is under control.
- CDPH will also follow up with your school in approximately 7-10 days, to determine whether additional cases have been identified within the same cohort.
- **During times of high COVID-19 transmission, CDPH and school investigations will prioritize cohorts in which 40% of the classroom (10 cases) or higher has been affected.**

## Outbreak mitigation (For checklist see [Appendix A](#))

- Suspected outbreak/cluster status occurs in a Pre-K-12 school, Early Childhood Education facility, or University setting when **at least 20% of a defined group (ie classroom or extracurricular activity) OR at least 5 cases** (including those identified via home testing), among individuals (whichever is lower) with symptom onset **within 7 days** of each other, irrespective of whether the cases are linked via in-school or out of school exposure
- While a classroom, cohort, or entire facility is under investigation for an outbreak, CDPH will advise that schools/ECEs adopt additional layers of mitigation as needed to contain further spread of the outbreak. Such measures may include:
  - **Recommend masking for all members** of the core group until 10 days have passed from the onset date of the most recent case with no new cases in the cohort. **(date of exposure = day 0)**.
  - Notify workers/students/parents/caregivers of the outbreak and encourage them to:
    - **Test themselves at least twice per week** for at least two weeks following the last case in the outbreak.
    - If asymptomatic and masking, use home antigen testing kits every other day prior to entering the facility and only enter if testing negative (isolate if positive)<sup>2</sup>.
    - If asymptomatic and not masking, use home antigen testing kits daily and only enter the facility if testing negative<sup>2</sup> (isolate if positive).
  - Increase physical distance in indoor spaces where possible and consider [activities that reduce risk](#).
  - Improve [ventilation](#) (for example moving school activities outdoors, opening windows and doors, using air filters, upgrading HVAC systems).
    - Apply [School Ventilation tool](#) to minimize transmission
- **If routine outbreak mitigation measures are insufficient to control the cluster/outbreak:**
  - CDPH will collect additional information from school staff or parents to understand a possible source of the case increase. This may include information about positive case potential exposures (household contact with positive case, social gatherings, recent travel), testing type (rapid antigen vs PCR).
  - Pending further CDPH evaluation, public health actions may be recommended to control further spread in schools. These actions may include:
    - suspending or requiring masking at high-risk activities such as extracurricular activities (e.g., band, chorus, indoor sports or events with close contact (e.g., dances),
    - further increasing physical distancing in indoor spaces,
    - increasing the size of a cohort that needs to be masked, or requiring for a longer duration,
    - and/or increasing ventilation.

## Appendix. Checklist for COVID-19 Mitigation in Youth Settings (K-12, ECE/Daycares, IHE)

Checklist Actions	Complete?
<b>Response to a Single Case in a Cohort</b>	
Ensure exclusion of individuals who have tested positive for five days or until symptoms improve, whichever is longer.* Day 0 = date of symptom onset or positive test.	<input type="checkbox"/>
If symptoms have improved, ensure positive individual returns wearing mask days 6-10 post symptom onset or positive test date.*	<input type="checkbox"/>
If individual cannot mask, either exclude days 6-10 OR require two NEGATIVE rapid tests 48 hours apart to return. Tests can occur NO SOONER than day 6.	<input type="checkbox"/>
Notify exposed classroom/cohort(s) of case via parent letter.	<input type="checkbox"/>
Encourage masking of individuals in exposed cohort for 10 days post exposure. †	<input type="checkbox"/>
Encourage testing (rapid antigen) exposed cohort/classroom at day 3 and day 5, if available. Supply tests if resources allow.**	<input type="checkbox"/>
Maintain awareness of any additional cases that arise in the same cohort within next seven days.	<input type="checkbox"/>
<b>Response to Five Cases or 20% of a Cohort</b>	
Ensure exclusion of individuals who have tested positive for five days or until symptoms improve, whichever is longer.* Day 0 = date of symptom onset or positive test.	<input type="checkbox"/>
Ensure positive individuals return wearing mask days 6-10 post symptom onset or positive test date.*	<input type="checkbox"/>
Ensure individuals are not coming to school/ ECE with symptoms.	<input type="checkbox"/>
Notify classroom/ cohort(s) of outbreak via parent letter.	<input type="checkbox"/>
Enforce masking of individuals in exposed cohort for 10 days after last case. †	<input type="checkbox"/>
Recommend testing every other day for seven days after last case in the cohort (or daily if cohort cannot mask).** Supply tests if feasible.	<input type="checkbox"/>
Increase ventilation by holding class outside, opening windows, or adding HEPA purifier.	<input type="checkbox"/>

Encourage and promote vaccinations/booster vaccines for staff and children's ages 6 months and up for COVID-19 vaccinations.	<input type="checkbox"/>
Report cases to CDPH. Schedule follow up meeting with CDPH in 7-10 days to report any additional cases and to receive further guidance. Reporting tool: <a href="https://redcap.link/SchoolECEDiseaseReport">https://redcap.link/SchoolECEDiseaseReport</a>	<input type="checkbox"/>
Maintain awareness of any additional cases that arise in the same cohort within next seven days.	<input type="checkbox"/>
<b>If Cases Continue to Escalate</b>	
Continue to follow the guidelines for 20% attack rate.	<input type="checkbox"/>
Conduct case interviews to evaluate for common source of exposure.	<input type="checkbox"/>
Use targeted messaging to focus on activities that are increasing risk.	<input type="checkbox"/>
Consider requiring two negative tests 48 hours apart to return.	<input type="checkbox"/>
Consider site visit to determine areas for improvement on infection prevention.	<input type="checkbox"/>
Consider pausing extracurricular activities or events until no new cases have been identified in the cohort for at least 14 days.	<input type="checkbox"/>

\*Recommend exclusion of all children under 2 yrs. who have tested positive for 10 days, since they can still spread COVID days 6-10 and cannot mask safely.

‡In classrooms serving children under age 2, only encourage masking for exposed staff and students who are 2 and over. If students are too young to mask, physically distance exposed students as much as possible and ensure that students and staff from affected classroom/ cohort are not mixing with other classrooms/cohorts.

\*\*Rapid Antigen testing kits are not approved via Emergency Use Authorization (EUA) for those <2 yrs. old. Test all students and staff who are 2 and older.



## Resources

Refer to the following resources for further information:

- a. [www.chicago.gov/coronavirus](http://www.chicago.gov/coronavirus)
- b. [CDC:Operational Guidance for K-12 Schools and Early Childcare Settings](#)
- c. [ISBE: School Wellness- Coronavirus](#)