STAY SAFE MN

Handling a Suspected or Confirmed Positive Case of COVID-19: Information for Schools

This guidance is a supplement to 2020-2021 Planning Guide for Schools: Health Considerations for Navigating COVID-19 (www.health.state.mn.us/diseases/coronavirus/schools/k12planguide.pdf) for the COVID-19 program coordinator and other designated staff who will be responsible for responding to COVID-19 concerns (e.g., school nurse, public health nurse) and coordinating with the Regional Support Team (RST), the Minnesota Department of Health (MDH), local public health (LPH), and Tribal Health regarding positive COVID-19 cases. All school and school-associated program staff and families should know who is the COVID-19 program coordinator and other designated staff responsible for responding to COVID-19 concerns and how to contact them. Schools play a key role in identifying close contacts of a positive case within a school building and school programs.

This document offers detailed guidance to answer the following questions:

- What should a district do if they are notified of a symptomatic person (e.g., student, teacher, or staff) at home, on transportation, or at school?

- What should a district do if someone (e.g., student, teacher, or staff) in the school community or one of their household members or close contacts tests positive for COVID-19?

- When does someone need to quarantine or isolate for COVID-19?

Key terms

Case: A person who has tested positive for COVID-19.

Case investigation: A trained worker calls the person who tests positive for COVID-19 to ask about their symptoms, how they may have been infected, and who they may have infected.

Close contact/close contact exposure: Close contact means being within 6 feet of another person for 15 minutes or more. In the context of COVID-19, a close contact exposure means that a person either lives with or was within 6 feet or more of someone with lab-confirmed COVID-19 for 15 minutes or longer while the person was infectious (regardless of whether either person wore a cloth face covering or face shield). Close contact may also occur when people have repeated exposure (even less than 15 minutes) over the course of time. For example, a classroom that has been together for 6 hours, even if sitting at 6 feet apart, could be considered to be close contacts because of the amount of time spent in a room

together. The case investigation staff will take into consideration types of activities and interactions, the setting, and things like whether the positive person was actively coughing and/or sneezing.

Community spread: Community spread means people have been infected with the virus within a local community, including some people who are not sure how or where they became infected.

Contact tracing: This is the work of talking with people who are infected and notifying people they may have been in close contact with and infected. Contact tracing is a key element in stopping or limiting the spread of COVID-19. For more information on contact tracing at MDH, visit Tracing COVID-19 (www.health.state.mn.us/diseases/coronavirus/tracing.html).

Exposed: This means coming in contact with the virus. The virus is thought to spread when someone who is infected coughs, sneezes, or exhales. This is why people should stay at least 6 feet from each other.

Incubation period: This is the time from close contact exposure to development of infection. For COVID-19, the incubation period ranges from two to 14 days.

Infectious period: This is the period of time a person with COVID-19 can spread the virus to others. It includes the 48 hours before a person experiences symptoms, and at least 10 days after symptom started. For a person without symptoms, the infectious period is 48 hours before the date the person is tested and at least 10 days after.

Isolation: Isolation is an infection prevention tool for a person who has tested positive for COVID-19, and requires the person to stay away from others, even those living in same home. For COVID-19, the isolation period is at least 10 days from start of symptoms or test date if the person does not have symptoms, 24 hours without fever, and improvement of symptoms. The isolation period could be longer if a person does not see improvement in their symptoms.

Quarantine: Quarantine is an infection prevention tool for a person who was in close contact with someone who has or is suspected to have COVID-19, and requires the person to stay away from others for 14 days. The quarantine period does not change with a negative test result since an infection could still develop after getting tested. Quarantine lasts for 14 days because COVID-19 has an incubation period that is between two to 14 days long.

Transmission: This is the term used to describe when an illness spreads between people.

Coronavirus Disease (COVID-19) Glossary of Terms (www.health.state.mn.us/diseases/coronavirus/materials/glossary.html)

Preparing to handle possible COVID-19 cases

Schools and school districts must have a system in place to allow staff and families to self-report to the school if they or their student have symptoms consistent with COVID-19, a positive test for COVID-19, or had close contact to someone with COVID-19. This system must be consistent with applicable law and

privacy policies, including but not limited to the Family Educational Rights and Privacy Act (FERPA), as applicable.

- Designate a person for both students and staff to contact and self-report. It may or may not be the same person.

- Determine how families, caregivers, students, and staff will communicate with the designated staff person (e.g., email, phone line).

- Determine how you will educate and communicate this new process to the school community.

Communicate to staff and families the importance of sharing this information to help limit COVID-19 transmission. There is an expectation that if the child or student is excluded from school they are excluded from participation in all other community-based activities (e.g., sports, clubs, dance, child care).

COVID-19 symptoms

Symptoms of COVID-19 can look like many other illnesses children get. The symptoms for children can look different than symptoms for adults. Symptoms consistent with COVID-19 fall into two groups:

- **More common symptoms are one or more of these:** fever of 100.4°F or higher, new onset and/or worsening cough, difficulty breathing, new loss of taste or smell.

- **Less common symptoms are two or more of these:** sore throat, nausea, vomiting, diarrhea, chills, muscle pain, excessive fatigue, new onset of severe headache, new onset nasal congestion or runny nose.

For more information, refer to the COVID-19 Decision Tree for People in Schools, Youth, and Child Care Programs (www.health.state.mn.us/diseases/coronavirus/schools/exguide.pdf).

Contact tracing, quarantine, and isolation

It is important to note that testing, combined with contact tracing and isolation, helps to control the spread of COVID-19. All positive test results are reported to MDH by the testing laboratory. When a person has a positive COVID-19 test, MDH, LPH, or Tribal Health will reach out to investigate where that person may have been and with whom they have come in contact, in addition to providing any needed support so that this person can remain safely in isolation at home.

It is imperative that people who are positive for the virus provide accurate information. Those who are identified as close contacts of the positive case will be notified by either MDH, LPH, Tribal Health, or their employer/school by phone and/or via a notification letter, email, or text. Close contacts can play an important role in stopping continued viral transmission by quarantining for 14 days, and not attending school, work, or other activities during the incubation period. By staying home, close contacts of a positive case can stop additional spread of the virus and help to protect their families, schools, and community.

Isolation and quarantine help stop the spread of the virus. The CDC's COVID-19: Quarantine vs. Isolation (www.cdc.gov/coronavirus/2019-ncov/downloads/COVID-19-Quarantine-vs-Isolation.pdf) provides a visual aid noting the difference between quarantine and isolation.

Isolation for people who test positive for COVID-19

People who test positive for COVID-19 must stay at home until all three of these things are true:

- They feel better. Their cough, shortness of breath, or other symptoms are better; and,

- It has been 10 days since they first felt sick; and,

- They have had no fever for at least 24 hours, without using medicine that lowers fever.

Repeat testing for COVID-19 prior to returning to work, school, or other activities is not recommended. Return to school or programming should be based on time (minimum 10 days), no fever, and improved symptoms.

Quarantine for close contacts of a confirmed case of COVID-19

MDH, LPH, or Tribal Health team members will help the school to identify the people who had close contact with each confirmed case and will provide guidance about quarantine to prevent further spread of illness.

Close contacts cannot return to school or other activities outside their home until they have completed the 14-day quarantine, even if they are tested and receive a negative test result before the 14 days have passed. The 14-day quarantine period is important because it can take between two to 14 days for someone who has been exposed to COVID-19 to become sick. People in quarantine who go on to develop symptoms and/or test positive for COVID-19 must isolate for a minimum of 10 days from the start of symptoms OR from the date they tested positive if they do not have symptoms and until at 24 hours have passed with no fever (without the aid of medication) and improvement in symptoms.

More information on the importance of quarantine is available at CDC: When to Quarantine (www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/quarantine.html).

Special considerations when identifying close contacts

Classroom setup

- If desks are placed 6 feet apart, students remain at their desks throughout the duration of class, and the teacher remains at the front of the class at least 6 feet away from any students, there may be no close contacts in the classroom.

- If desks are placed less than 6 feet apart, students remain at their desks throughout the duration of class, and the teacher remains at the front of the class at least 6 feet away from any students, those students within the 6-foot radius of the person with COVID-19 could be close contacts.

- If the classroom is arranged such that students are moving freely throughout the classroom without maintaining 6-foot distance and interacting with the teacher, it is likely that all students and the teacher would be close contacts.

Student population

A student's ability to maintain social distance in a classroom and avoid other forms of close contact with students, teachers, and staff could vary considerably with age and developmental status, which would be considered when identifying close contacts within a classroom or school setting.

Cohorts

When working to identify close contacts, consider whether students and staff were kept in a single cohort during classes, lunch periods, recess, parent pick-up and drop-off, bus stops and busing, carpools, sports teams, extracurricular activities, and social groups outside of school. If students are kept in a consistent cohort that does not intermix with other cohorts, close contacts could be limited only to members of the cohort. Specialist teachers who come into the classroom may or not be considered close contacts, depending on their involvement with a class and individual students, the activities conducted, and the structure of the lesson. Specialists should keep daily records of their level of interaction with students.

Cafeteria

Social distancing practices should be maintained for lunch, and seating assignments should be documented daily.

- Students are not socially distanced (within 6 feet), then contacts would include the entire lunch table or a 6-foot radius around the positive case.

- Students are socially distanced (greater than 6 feet), then there would be no contacts.

Transportation

- Consider the following for rides 15 minutes or longer (and any combination of rides that add up to 15 minutes or longer):

  - If bus seating is not assigned and documented on a daily basis, all riders would be considered contacts.

  - If bus seating is assigned and documented, daily riders in the same row as the case, the two rows ahead, and the two rows behind would be considered contacts.

  - Drivers who are consistently spaced at least 6 feet away from all passengers (with the exception of students entering/exiting) would not be considered a close contact.

- If the bus ride is longer than 30 minutes all people (students and driver) on the bus, even those greater than 6 feet from the positive case, would be considered close contacts.

Handling a confirmed case of COVID-19

A designated staff person (e.g., school nurse, director, and coordinator) must be responsible for responding to COVID-19 concerns and coordinating with the RST, MDH, LPH or Tribal Health regarding positive COVID-19 cases. All staff and families should know who the school's designated person is and how to contact them to report a positive test result.

School staff may hear about a positive result from a staff member or parent/guardian before MDH is notified. It is important to report when you know it is a lab-confirmed positive COVID-19 test result. Do not report suspected cases of COVID-19 until you know of a confirmed positive lab report. School staff only need to report a positive case of persons (student or staff) who are attending or working in their school. If the school's learning model is distance learning, schools only need to report the person (student or staff) if they were in the school within the previous two-week timeframe.

When you know of a lab-confirmed positive COVID-19 result in a student or staff member, please reach out to the MDH follow-up team by completing this form: COVID-19 Information Submission Form for K-12 Schools, Childcare, or Youth Camps (redcap.health.state.mn.us/redcap/surveys/?s=79FPADEAMF). This is a secure system to report information such as names, addresses, and phone numbers. MDH monitors this report system seven days a week and provides timely guidance.

Complete the form even if you do not have all the information or if you are working with LPH. The name and phone number of the person who tested positive for COVID-19 is always needed. The form will ask for the following information:

- Contact information for the facility (school) or the program's designated person.

- Facility name, address, city, ZIP code, phone, and type of school or program.

- Current learning model in place where the positive case works or attends.

- Current total enrollment in the facility or program.

- Current total number of staff at the facility or program.

- Total number of classrooms at the facility or program, if applicable.

- Whether the location has had previous cases.

- Whether the case is a child/student/attendee or staff member.

    - Work location of the staff member, if applicable (private office, shared office, classroom, other).

    - The number of people in a shared classroom or shared office with the case.

- The full name and phone number of the case.

- The onset date of symptoms.

- Whether the person worked or attended the program or facility when they had symptoms.

- Whether the person worked or attended the program or facility in the 48 hours before the onset of symptoms or a positive test.

- Date(s) the person worked or attended in the 14 days before symptom onset or date of positive test.

After MDH receives your online COVID-19 Information Submission Form, MDH, LPH, or Tribal Health will reach out to you to discuss this situation. In the meantime, it will be important for staff to take the following steps to identify those who might be close contacts. Schools should ensure that they have up-to-date contact information for students and staff to conduct any necessary follow-up.

- Gather and review the student or staff member's activity. This should look back 48 hours prior to the date symptoms started or the date of the positive test if there are no symptoms. Consider:

    - Arrival and departure time (include all locations worked or attended).

    - Bus route information and transportation attendance, carpool, and safe route walkers.

    - Class or work schedule, rosters, and seating charts.

    - Lunchtime, recess, extracurricular, and other activities.

    - The length of time the case was on-site while potentially infectious.

    - The case's close contacts.

    - The classroom environment and the case's activities (e.g., was the case in a cohort or class, were the classes or groups intermixing).

- Evaluate whether cleaning and disinfecting of spaces visited by the case is necessary.

    - Review cleaning guidance at COVID-19 Cleaning and Disinfecting Guidance for Schools and Child Care Programs (www.health.state.mn.us/diseases/coronavirus/schools/clean.html).

    - As long as routine cleaning and disinfecting have been done regularly, additional cleaning measures may not be necessary.

    - Depending on when the person with COVID-19 was last on-site, it may be difficult to know what areas they were in and what objects or surfaces they may have touched after they became sick.

Once the survey is completed and submitted, MDH, LPH and/or Tribal Health will reach out to discuss the situation. After this consultation to identify close contacts and determine next steps, the school designated staff will notify the close contact(s) using the suggested language provided in the Sample Notification Language section of this document.

Basic actions for COVID-19 events

Event	Location of Event	Response/Action for Positive Test Result *(see Handling positive cases of COVID-19)*
Event #1: Child, student, or staff member (person) is experiencing symptoms consistent with COVID-19	If a person has symptoms and **at home:** • Stay home. • Monitor at home or seek medical evaluation and/or testing. • Siblings and household members should remain at home until person who is ill is evaluated and/or tested. If a student has symptoms **on the bus or at school:** • Ensure face covering is worn. • Isolate student who has symptoms from others. • Evaluate symptoms and use COVID-19 Decision Tree for People in Schools, Youth, and Child Care Programs (www.health.state.mn.us/diseases/coronavirus/schools/exguide.pdf). • Send home as appropriate following the COVID-19 Decision Tree and ensure the student does not ride on a bus with others. • Seek medical evaluation and testing or monitor at home. • Follow COVID-19 Decision Tree for People in Schools, Youth, and Child Care Programs for return to school or program. If a **staff member** has symptoms **at school**: • Notify school leadership. • Go home. • Seek medical evaluation and testing or monitor at home. • Follow COVID-19 Decision Tree for People in Schools, Youth, and Child Care Programs for return to work.	• Gather information needed, contact LPH and/or RST. • Complete the online case submission form. • Evaluate cleaning and disinfection needs. • Identify close contacts, consult with MDH, LPH and/or Tribal Health. • Notify close contacts.
Event #2: Child, student, or staff member (person) is a close contact of someone who is positive for COVID-19 in school, community activity, or in their household.	If a person is **at home** when they learn they were a **close contact**: • Stay at home. • Seek testing 5-7 days after they last had contact with the person. • Siblings and household members do not need to stay home unless they are also a close contact. • Follow COVID-19 Decision Tree for People in Schools, Youth, and Child Care Programs for return to school or program. If a person is **at school** when they learn they were in **close contact** with a person who tested positive for COVID-19: • Check if person has symptoms. • Ensure face covering is worn. • Isolate from others. • Send home, ensuring students who are close contacts do not ride on a bus with others. Stay at home and/or seek testing 5-7 days after they last had contact with the person. • Follow COVID-19 Decision Tree for People in Schools, Youth, and Child Care Programs for return to school or program.	This section does not apply to the event.

Sample notification language

Schools can use the following language to notify staff and families or caregivers whose child was identified as a close contact of someone who tested positive for COVID-19. In addition, there is sample language schools to make a general notification of a positive person to the broader school community. To protect the privacy of the confirmed case, any notification should avoid using any potentially identifying information. Districts may choose how to send the notification (e.g. letter, email, and phone). When using this language be sure to customize it by including the pertinent information related to the case (e.g., school name, dates, and contact information).

Suggested language for families or caregivers of students who are close contacts

[Add school name, date, and name of child]

The Minnesota Department of Health (MDH) in partnership with [include name of school] has identified your child [add name of child] as a close contact of a positive case of COVID-19. Your child was exposed at [insert child care/school name] on [insert date or dates] and per MDH recommendations your child will need to stay home from school and all community activities until [insert the end date of exclusion] (14 days from the last contact with the positive person). For privacy reasons, we cannot share details about the status of the person. At this time, they have been advised to stay home and away from other people (isolate).

MDH also recommends your child be tested for COVID-19 even if they are not showing any symptoms. It is best to wait until at least five to seven days after their last contact with the person who has COVID-19. This is how long it usually takes after being exposed to COVID-19 before someone shows they are infected. Please contact your health care provider about getting them tested or visit Find Testing Locations (mn.gov/covid19/for-minnesotans/if-sick/testing-locations/index.jsp).

If your child's test results are positive, notify [insert designated school staff]. Should this occur, your child may need to remain at home longer than 14 days, and when you reach out we will discuss this further. If your child's results are negative, they still need to stay home until [insert end date of exclusion] when the quarantine and exclusion period ends. People who have been exposed to COVID-19 may still get sick with the virus for up to 14 days.

If your child starts feeling ill, isolate them at home and away from other household members as much as possible right away.

If you have questions, contact [insert school contact person and contact information].

Thank you for helping to keep our school community safe.

Suggested language for staff who are close contacts

[Add school name and date]

The Minnesota Department of Health (MDH) in partnership with [insert school name] has identified you as a close contact of a positive case of COVID-19. You were exposed at [insert child care/school name] on [insert dates], and per MDH recommendations you will need to stay home until [insert end date of exclusion]. For privacy reasons, we cannot share details about the status of the person. At this time, they have been advised to stay home and away from other people (isolate).

MDH also recommends you be tested for COVID-19 even if you are not showing any symptoms. It is best to wait until at least five to seven days after your last contact with the person who has COVID-19. This is how long it usually takes after being exposed to COVID-19 before someone shows they are infected. Please contact your health care provider to see about getting tested or visit Find Testing Locations (mn.gov/covid19/for-minnesotans/if-sick/testing-locations/index.jsp).

If your test results are positive, notify [insert name of designated school staff]. Should this occur, you may need to remain at home longer than 14 days, and when you reach out we will discuss this further. If your results are negative, you still need to stay home until [insert end date of exclusion] when the quarantine and exclusion period ends. People who have been exposed to COVID-19 may still get sick with the virus for up to 14 days.

If you start feeling ill, isolate at home and away from other household members as much as possible right away.

If you have questions, contact [insert school contact and contact information].

Thank you for helping to keep our school community safe.

Suggested language for a general notification to school community regarding a positive case

We were notified by the Minnesota Department of Health (MDH) of a lab-confirmed case of COVID-19 in a member of the [insert child care/school name] community with exposure date(s) of [insert date]. For privacy reasons, we cannot share details about the status of the person. At this time, they have been advised to stay home and away from other people (isolate).

We have worked with MDH to identify and notify those who had close contact with the person who has COVID-19. The risk of exposure for other people present in the building on that date is no greater than the risk of contracting the virus in the general community.

If you or your child were not notified that you had close contact with the person, you should still monitor for symptoms of illness, but do not need to stay home unless symptoms develop. If symptoms develop, stay home and consult with your health care provider to determine if medical evaluation is needed.

We are working closely with MDH to monitor the situation.

If you have questions, contact [insert school contact name and contact information].

Thank you for helping to keep our school community safe.

Consider providing these resources when making notifications

- Coronavirus Disease 2019 (COVID-19) (www.health.state.mn.us/diseases/coronavirus/index.html)
- If You Are Sick: COVID-19 (www.health.state.mn.us/diseases/coronavirus/sick.html)
- Coronavirus (COVID-19) (www.cdc.gov/coronavirus/2019-ncov/index.html)

Resources related to employment concerns

- U.S. Department of Labor: Families First Coronavirus Response Act: Employee Paid Leave Rights (www.dol.gov/agencies/whd/pandemic/ffcra-employee-paid-leave)
- Minnesota Department of Labor and Industry: Worker protections related to COVID-19 (www.dli.mn.gov/sites/default/files/pdf/MN_worker_protections_related_to_COVID_19.pdf)
- Employers should be aware that Minnesota state law (Minnesota Statutes: 144.4196 Employee Protection [https://www.revisor.mn.gov/statutes/cite/144.4196]) provides employment protections when a person is in isolation for public health purposes.

Resources

The COVID-19 program coordinator, school nurse, or designated staff can use the resources below to support their communication with children, students, attendees, parent/caregivers, and staff about COVID-19. These resources can be used to prepare to handle a positive case of COVID-19 within the school or program to work with their RST and/or LPH.

- Materials and Resources for COVID-19 Response (www.health.state.mn.us/diseases/coronavirus/materials/index.html) – Video PSAs, print materials, and translated documents to assist with preparing for and responding to COVID-19.

- COVID-19 Decision Tree for People in Schools, Youth, and Child Care Programs (www.health.state.mn.us/diseases/coronavirus/schools/exguide.pdf)

- What to Do if You Have Had Close Contact With a Person With COVID-19 (www.health.state.mn.us/diseases/coronavirus/contact.pdf)

- What to Do While You Wait for a COVID-19 Test Result (www.health.state.mn.us/diseases/coronavirus/waiting.pdf)

- CDC: COVID-19 Contact Tracing Communications Toolkit for Health Departments (www.cdc.gov/coronavirus/2019-ncov/php/contact-tracing-comms.html)

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