



**When someone has suspected or confirmed COVID-19:  
Quick Guide for Schools, Childcares, and Programs for Children and Youth**

**November 29, 2020**

This guidance was developed by the San Francisco Department of Public Health (SFDPH) for local use. It will be posted at <http://www.sfdcp.org/CovidSchoolsChildcare>.

**Summary of Changes from the 10/16/2020 Version**

- “Close contact” definition updated to be a total of 15 minutes or more in a 24 hour period
- All children and staff under 18 in a pod/cohort are considered close contacts.
- Sample templates of advisory letters are now separate documents. Links to templates added to grid.

**Steps to take for COVID-19 symptoms, close contact or confirmed COVID-19**

	Scenario	Action	Communication
<b>1</b>	Child or staff has <b>symptoms</b> of COVID-19	Send home. Request COVID-19 test. For children with symptoms, send family <a href="#">“Parent Handout: COVID-19 Health Checks/If your child is sick”</a>  <b>Cohort remains OPEN.</b>	None needed.
<b>2</b>	Child or staff had <b>close contact</b> with someone with confirmed COVID-19.	Send home with <a href="#">instructions to quarantine</a> for 14 days after the last exposure. Request testing for child or staff (will not shorten quarantine)  <b>Cohort remains OPEN.</b>	Optional: <a href="#">Notification letter</a> to staff and families of children at the school or program.
<b>3</b>	Child or staff has <b>confirmed COVID-19 infection</b>	Notify the <b>SFDPH Schools/Childcare Hub</b> at (628) 217-7499 or <a href="mailto:Schoolschildcaresites@sfdph.org">Schoolschildcaresites@sfdph.org</a> Send home with <a href="#">instructions to isolate</a> at home for at least 10 days after symptoms started.  Identify close contacts, likely including the entire cohort of the person with COVID-19.  Send close contacts home to quarantine for 14 days after the last date the person with COVID-19 was at the school/program. Request testing for close contacts (will not shorten quarantine).  Clean and disinfect spaces where the person with COVID-19 spent significant time.  <b>Cohort CLOSED for 14 days after last exposure. Non-exposed cohorts remain open.</b>	Staff and children identified as close contacts: <ul style="list-style-type: none"> <li>• Inform staff and families of children who are close contact in person or by phone.</li> <li>• <a href="#">Quarantine instructions</a></li> <li>• <a href="#">Close Contact Advisory - Children under 18</a> or <a href="#">Close Contact Advisory - Adults</a>.</li> </ul> All other staff and families: <ul style="list-style-type: none"> <li>• <a href="#">General Exposure Advisory - Children Under 18</a> or <a href="#">General Exposure Advisory - Adults</a>.</li> </ul>



## Definition of close contact

A close contact is anyone who

- Was within 6 feet of the person with COVID-19 for a total of 15 minutes or more in a 24 hour period, even if both people were wearing masks, while the person with COVID-19 was contagious.
- Attended or worked in the same cohort of children and youth under 18 as the person with COVID-19 while the person was contagious.

People with COVID-19 are considered contagious starting 2 days before their COVID-19 symptoms first appeared until at least 10 days after their symptoms began. If the person with COVID-19 did not have symptoms, then they are considered contagious starting 2 days before their positive test was collected.

## Definition of cohort

A cohort is a stable group with fixed membership that stays together for all activities (e.g., lunch, recess, etc.) and avoids contact with other persons or cohorts.



**Criteria for children or youth to return to school, childcare, or other programs after COVID-19 symptoms, close contact, or confirmed COVID-19**

Scenario	Return when all of the following are true:
<p>Child has a <b>negative test after symptoms</b> of COVID-19</p>	<ul style="list-style-type: none"> <li>• Symptoms are improving</li> <li>• No fever for 24 hours, without using fever-reducing medicines such as acetaminophen (Tylenol), ibuprofen (Motrin, Advil) or naproxen (Aleve)</li> </ul> <p>The parent/guardian must show documentation of the child’s negative test, for example, a copy of the result or a message from the clinic or test site that the test was negative. This may be in electronic form. A separate doctor’s note is not needed.</p>
<p>Child had <b>symptoms</b> of COVID-19 and</p> <ul style="list-style-type: none"> <li>• had a <b>positive test/confirmed COVID-19, OR</b></li> <li>• <b>was not tested, OR</b></li> <li>• is still <b>waiting for the test result</b> (*)</li> </ul>	<ul style="list-style-type: none"> <li>• 10 days have passed since symptoms began</li> <li>• Symptoms are improving.</li> <li>• No fever for 24 hours, without using fever-reducing medicines such as acetaminophen (Tylenol), ibuprofen (Motrin, Advil) or naproxen (Aleve)</li> </ul> <p>A doctor’s note is not needed.</p>
<p>Child had <b>close contact</b> with someone with confirmed COVID-19.</p>	<ul style="list-style-type: none"> <li>• 14 days have passed after the last close contact, even if the child tests negative before 14 days.</li> <li>• No symptoms have developed since the last close contact.</li> </ul> <p>A doctor’s note is not needed.</p> <p><i>If the child has ongoing close contact with the person with COVID-19 (for example, a parent or caregiver), the child must quarantine for <u>14 days after the person with COVID-19 is no longer infectious</u>. In most cases, this is a total of 24 days after the person with COVID-19 first developed symptoms, or if asymptomatic, had a positive test.</i></p>
<p>Child had a <b>positive test but never had symptoms</b></p>	<ul style="list-style-type: none"> <li>• 10 days after their positive test was collected (not 10 days after the result was received)</li> </ul> <p>A doctor’s note is not needed.</p>

(\*) During test shortages, test results from commercial labs may take more than 10 days to return. If a child receives a positive test result more than 10 days after the test was collected and has been allowed to return, they may stay in school, childcare or program. Contact the SFDPH Schools/Childcare Hub for guidance on how to proceed.



## **Exceptions: Doctor's Note or Clinic Note**

If a child had COVID-19 symptoms and has a note from a doctor or clinic saying that the child may return, the school, childcare or program should accept the note, even if the child was not tested. The note may be an email, electronic message or part of an after-visit summary. This is not common.

Sometimes a child's symptoms are clearly due to another cause, such as strep throat or hand-foot-and-mouth disease. In these situations, the provider may clear a child to return to school, childcare, or another program. This does not mean that the child does not have COVID-19. Many children with COVID-19 do not have any symptoms. It only means that a definitive cause other than COVID-19 was found for the symptoms that kept the child out of the program.

## **Staff Return to Work**

Refer to "*Leaving Isolation or Returning to Work for Those Who Have Confirmed or Suspected COVID-19*" at [www.sfgdcp.org/CovidRTW](http://www.sfgdcp.org/CovidRTW).