



**KCHD COVID-19 INTERIM SCHOOL AND EARLY
CHILDHOOD EDUCATION CENTER GUIDANCE**

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Introduction

Greetings,

COVID-19 continues to circulate in our community as we enter the 2022-2023 school year. The availability of improved therapeutic treatments and effective vaccination campaigns have dramatically reduced hospitalizations and deaths from the disease, but rapidly emerging variants require continued vigilance. The Kane County Health Department (KCHD) is dedicated to working with educators to create a safe learning environment for continued in-person learning.

This guidance is designed to support all Kane County public and private schools and Early Childhood Education (ECE) centers to:

- Maintain a safe environment in Kane County utilizing guidance from the Illinois Department of Public Health (IDPH), the Illinois State Board of Education (ISBE), the Department of Child and Family Services (DCFS) and the Centers for Disease Control and Prevention (CDC).
- Guide the implementation of measures to reduce COVID-19 transmission in school and ECE settings, while meeting the educational needs of all students.
- Help personnel to understand what processes to follow to report potential COVID-19 outbreaks to the KCHD.

To protect students and staff, layering multiple prevention strategies, as described in this guidance, will continue to be the best way to reduce disease transmission.

Thank you for partnering with KCHD to provide a safer learning environment for children in Kane County.

Michael Isaacson, MPH

Executive Director

Kane County Health Department



CDC COVID-19 Community Levels

CDC COVID-19 Community Levels

COVID-19 Community Levels are a new tool to help communities decide what prevention steps to take based on the latest data. Levels are updated weekly, and can be low, medium, or high and are determined by looking at hospital beds being used, hospital admissions, and the total number of new COVID-19 cases in an area.

Administrators can use the CDC COVID-19 Community Levels to make decisions to add or remove mitigations.

[Kane County COVID-19 Community Levels](#)

What Prevention Steps are Recommended Based on COVID-19 Community Levels?

LOW

- Stay [up to date](#) with COVID-19 vaccines
- [Get tested](#) if you have symptoms

MEDIUM

- If you are [at high risk for severe illness](#), talk to your healthcare provider about whether you need to wear a mask and take other precautions
- Stay [up to date](#) with COVID-19 vaccines
- [Get tested](#) if you have symptoms

HIGH

- Wear a [mask](#) indoors in public
- Stay [up to date](#) with COVID-19 vaccines
- [Get tested](#) if you have symptoms
- Additional precautions may be needed for people [at high risk for severe illness](#)



Strategies for Everyday Operations

Strategies for Everyday Operations



KCHD encourages schools and ECE centers to adopt a layered approach to COVID-19 mitigation. Multiple layers of protection slow the spread of COVID-19.

Schools and ECE centers should closely monitor [community transmission](#) of COVID-19, vaccination coverage, screening testing and outbreaks to lead their decisions about the implementation of layered prevention strategies for in-person learning as outlined in the [IDPH & ISBE Joint Guidance for COVID-19 Prevention in Schools](#) and [DCFS Licensed Daycare Guidance](#).

Strategies for Everyday Operations, continued

Vaccines

Staying up to date on [routine vaccinations](#) is essential to prevent illness from many different infections. Vaccines reduce the risk of infection by working with the body's natural defenses to help safely develop immunity to disease. For COVID-19, staying up to date with COVID-19 vaccinations is the leading public health strategy to prevent severe disease.

CDC recommends COVID-19 primary series vaccines for everyone ages 6 months and older, and COVID-19 boosters for everyone ages 5 years and older, if eligible. It is important to note that those who are up to date with vaccines are not considered [close contacts](#) of COVID-19 positive individuals and do not need to quarantine. To maintain in-person learning and keep ECE centers open, it is beneficial to promote [COVID-19 vaccination](#).

Masking and Testing

The following IDPH/ISBE chart summarizes [masking](#) and testing recommendations at the three Community Levels. Masks continue to be federally required in healthcare settings and for healthcare personnel, including school nurse offices.

COVID-19 Community Level	Prevention Strategy for Masking	Prevention Strategy for Testing
Low	Support those who choose to continue to mask.	Ensure access to diagnostic testing for symptomatic persons and those exposed, and for continuity, schools may choose to continue to implement screening testing.
Medium	Persons who are immunocompromised, at high risk for severe disease or have household or social contacts at high risk for severe disease, should be encouraged to talk to their healthcare providers about whether they need to wear a mask.	Ensure access to diagnostic testing for close contacts and those exposed. For continuity, schools may choose to continue to use screening testing.
High	Universal masking indoors in public, regardless of vaccination status, should be promoted. Persons who are immunocompromised should be encouraged to wear a mask or respirator that provides greater protection.	Ensure access to diagnostic testing for close contacts and those exposed, and for continuity, schools may choose to continue to use screening testing.

Strategies for Everyday Operations, continued

Educating Staff and Parents

Provide encouragement to stay home if they or a household member have symptoms or do not feel well. Test within 48 hours of symptom onset. Find free testing sites at:

<https://dph.illinois.gov/covid19/testing.html>

Screening Testing

Screening testing identifies people with COVID-19 who do not have symptoms or known or suspected exposures, so that steps can be taken to prevent further spread of COVID-19.

At medium and high COVID-19 Community Levels, consider implementing screening testing in schools and ECE programs. Schools can also consider implementing screening testing for high-risk activities such as indoor sports and extracurricular activities, returning from breaks (for example, holidays, spring break, at the beginning of the school year), and for those serving students who are at risk for getting very sick with COVID-19, such as those with moderate or severe immunocompromise or complex medical conditions.

Buses

- Assigned seating with seating chart readily available.
- Household members should be seated together.
- Keep windows down whenever possible, weather permitting.

Breakfast/Lunch

- Encourage outdoor dining when weather permits.
- Assigned seating with seating chart readily available.
- Staggered seating at tables, thus allowing more space at the table. Lowering student:table ratio with staggered seating.
- Sanitize eating area after meal.

Recess

Utilizing a rotating schedule of playground areas and equipment for classes or groups can help reduce exposure. For example, on Tuesday, classroom A is assigned swings, classroom B is playing at basketball court while classroom C is using the merry-go-round.

Hand Hygiene

Reminder announcement (and monitoring) to wash hands both before and after meals/snack, recess and bathroom breaks.



National, State and Local Guidance

National, State and Local Guidance

[Operational Guidance for K-12 Schools and Early Care and Education Programs to Support Safe In-Person Learning](#)

- Presents best practices for reducing the spread of COVID-19 in schools and ECE centers. IDPH/ISBE, DCFS, and the KCHD have adopted the CDC guidance.

[IDPH & ISBE Joint Guidance for COVID-19 Prevention in Schools](#)

- [Decision Tree for Symptomatic Individuals in Pre-K, K-12 Schools and Day Care Programs](#)
- [Post-Vaccination Considerations for P-12 Schools](#)
- [Interim Guidance on Testing for COVID-19 in Community Settings and Schools](#)

[DCFS Licensed Daycare Guidance](#)

[Section 690.30, Control of Communicable Disease Code](#) - The Joint Committee on Administrative Rules details implementations required to control the spread of communicable diseases in section 690.30 part C:

Schools, Child Care Facilities, and Colleges/Universities

- 1. Except in an emergency, the occurrence of a case of a communicable disease in a school, child care facility or college/university should not be considered a reason for closing the school, facility or college/university.*
- 2. Persons suspected of being infected with a reportable infectious disease for which isolation is required, or persons with diarrhea or vomiting believed to be infectious in nature, shall be refused admittance to the school or child care facility while acute symptoms are present.*
- 3. School, child care facility, and college/university authorities shall handle contacts of infectious disease cases as prescribed in this Part, or as recommended by the local health authority.*
- 4. When outbreaks of disease occur in any child care facility, staff and attendees of the facility may be considered to be contacts to cases and may be required by the local health authority to submit specimens for testing*

[Kane County Health Department](#) - Resources for schools, links to relevant research and more.

Responding to Positive COVID-19 Cases

Schools and ECE centers should respond to positive COVID-19 cases per the CDC guidelines for [Responding to COVID-19 Cases in K-12 Schools: Resources for School Administrators](#).

To prevent the spread of COVID-19, it is important to follow the [CDC guidelines for isolation and quarantine](#), including masking on days 6-10. CDC continues to recommend indoor masking in K-12 schools for all individuals ages 2 years and older, including students, teachers, staff, and visitors, regardless of vaccination status.

Individual COVID-19 cases are still reportable, but the priority is reporting outbreaks. See details on how to identify and report COVID-19 outbreaks on page 14.

Contact Tracing

Contact tracing is used to provide instructions and support to people who have COVID-19 and their close contacts. For contact tracing to be effective, schools need protocols to quickly identify people with COVID-19 and determine their close contacts. The process requires timely action and cooperation by everyone involved in the confidential investigation of cases of COVID-19 and notification of their close contacts.

If case investigation and contact tracing are done in school, investigations should focus on people who started having symptoms or tested positive for COVID-19 in the last 5 days. Schools should ensure that people identified with COVID-19 are isolated per the [CDC guidelines for quarantine and isolation](#). Notification of close contacts should focus on those who were exposed in the last 5 days. A template letter for notifying parents of contact with a positive COVID-19 case is in the Resources section.

To determine which students and staff are close contacts of a COVID-19 positive case, see the CDCs [Steps for Determining Close Contact and Quarantine in K-12 Schools](#).

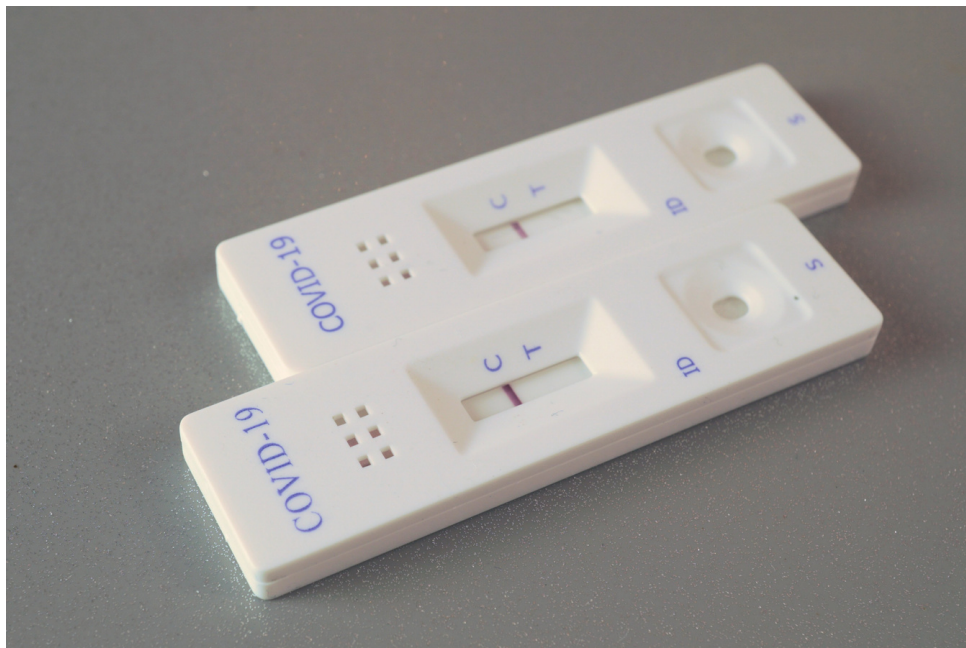
Test to Stay

Test to Stay is an alternative to exclusion for individuals who are close contacts. Schools and ECE centers may permit close contacts without symptoms of COVID-19 who were exposed in the school or ECE center setting during the school day and would otherwise need to quarantine to remain in school. This includes people who are a school-associated close contact, are not up to date on their COVID-19 vaccines, do not test positive for SARS-CoV-2, and have no symptoms. TTS participants should get tested at least upon notification of their close contact and again within 5-7 days after their last close contact with someone with COVID-19. The CDC provides more information on [COVID testing in schools and ECE centers](#).

At home tests may be used for Test to Stay. Schools and ECEs can determine their own method for the submission and documentation of home test results.

KCHD Role

The KCHD is available to consult with and support schools and ECE centers in slowing the spread of COVID-19 by adhering to the CDC, IDPH, ISBE and DCFS guidelines, assist in the investigation and management of COVID-19 outbreaks, and reporting COVID-19 outbreaks to IDPH.





Managing COVID-19 Outbreaks

Outbreak Criteria

K - 12 School Outbreak Criteria

A school outbreak is defined as :

A. “multiple cases comprising at least 10% of students, teachers, or staff within a specified core group” (e.g., extracurricular activity, cohort group, classroom, before/after school care, etc.)

OR

B. “at least three cases within a specified core group that meets criteria for a probable or confirmed school-associated COVID-19 case (laboratory-positive by PCR or antigen testing) with symptom onset or positive test within 14 calendar days of each other; who were not identified as close contacts of each other in another setting outside of the school setting (e.g., household); and that are epidemiologically linked in the school setting or a school-sanctioned activity.”

Example of Criteria A

- A high school has a junior varsity wrestling team with 20 athletes. The school nurse notices that 4 of the team members have tested positive in the past few days. None of the athletes report household exposure. Since >10% of this group are cases, this meets outbreak criteria A.

Example of Criteria B

- An elementary school has 4 cases in the same 5th grade classroom. Three of the students had known exposure to one another within the classroom. None of the students had household exposure or known social activity outside of the classroom.

ECE Center Outbreak Criteria

An outbreak at an ECE center is defined as:

- Two or more individuals who are laboratory positive for COVID-19 by antigen or PCR testing.

AND

- Are epidemiologically linked to the outbreak setting,
- Have onsets of illness or positive COVID-19 test (if asymptomatic) within a 14- day period,
- Do not share a household,
- Are not listed as a close contact of each other outside of the outbreak setting,

Identifying Outbreaks

1. Review cases regularly.
2. Determine if there has been a sudden increase in the number of cases.
3. Look for links in the cases:
 - Same classroom(s)/office space(s) (e.g., the math department has 6 teachers who recently tested positive).
 - Review seating charts for proximity in the main classroom and specials (e.g., cases don't sit near each other in the main classroom but they do during art class).
 - Band/orchestra/choir (e.g., multiple cases are in the same 4th period choir class).
 - Sports (e.g., multiple cases on a swimming team).
 - Extracurricular activities (e.g., multiple cases are reported on the varsity cheer squad).
 - Bus routes (e.g., multiple cases are identified as riding on bus route 123).



Reporting a Potential Outbreak

School or ECE center personnel should promptly report a potential outbreak to KCHD by phone or electronically at:

redcap.link/kaneoutbreakreport

Once the KCHD receives the REDCap Potential Outbreak report, the Outbreak team will review the report and confirm the outbreak. If the KCHD Outbreak Investigator has determined the cases to be an outbreak, we will follow up by email with resources and next steps.

The KCHD will then report the outbreak to IDPH and monitor the outbreak, providing support to the school or ECE center. The school or ECE center point of contact will receive a REDCap survey via email each Monday through Friday asking if any new cases have been identified. Please ensure the survey is completed each day. New cases should be added to the line list. The line list is continuous and school or ECE center personnel will continue to add additional cases to the line list and upload the updated line list for each new case in the survey throughout the outbreak.

For example, three cases are initially reported as part of an outbreak. Two days later, there are two additional cases identified. Those two cases will be added to the original line list with three cases and the updated line list will then be uploaded with that day's survey.

Outbreak Closure

The outbreak will be closed by the Kane County Health Department once the outbreak site has gone two incubation periods, or 28 days, from the most recent case's symptom onset date (or the testing date, if asymptomatic), without identifying any new cases linked to the outbreak.

Prevention Strategies During Outbreaks

If a school or ECE center is experiencing a COVID-19 outbreak, they should consider adding prevention strategies regardless of the COVID-19 Community Level. For example, those with an existing screening testing program may increase the frequency of testing, regardless of the vaccination status of the population. They may also put in place prevention strategies recommended at medium and high COVID-19 Community Levels (for example, masks) even if the community the school or ECE center is located in is at a lower COVID-19 Community Level.

Outbreak Testing

Outbreak testing is strongly recommended for staff and students in schools and ECE centers in outbreak status, and twice weekly testing of school personnel who are not fully vaccinated and linked to an outbreak is required. Additionally, schools should conduct twice weekly testing of students linked to the impacted classroom(s), grade(s), extracurricular participants, or entire student body, depending on the circumstances. Students who have been identified as part of an outbreak should not participate in extracurricular activities unless participating in outbreak testing.

If screening testing is not already in place, schools and ECE centers should make plans to deploy outbreak testing when needed. Implementation of outbreak testing should begin as soon as possible from the date the outbreak is identified and at least within three days. Testing should continue until the school or ECE center has gone two incubation periods, or 28 days, from the most recent case's symptom onset date (or the testing date, if asymptomatic), without identifying any new cases.

Individuals who tested positive for COVID-19 within the prior 90 days and are currently asymptomatic may be exempted from testing during outbreaks, unless otherwise directed.

- A list of free testing sites is available at: dph.illinois.gov/testing
- Shield testing is available to public and private K-12 schools. IDPH has made Shield testing available for public schools at no charge. Learn more and sign up at: shieldillinois.com/for-school/
- Midwest COVID-19 Testing Coordination Center (MCC)- A partnership between IDPH and the U.S. Department of Health and Human Services that provides private schools and ECE centers with testing assistance at no cost. Register at: testedandprotected.org
- Public and private schools, and ECE centers may be able to receive rapid antigen test kits from IDPH by emailing: dph.antigentesting@illinois.gov

A young boy with dark, curly hair is sitting at a desk in an office or computer lab. He is wearing a light blue button-down shirt and is looking off to the side with a slight smile. In the background, there are several computer monitors. One monitor to the right shows a desktop with several application icons. The scene is brightly lit, suggesting a window is nearby.

Resources

Definitions

- **Asymptomatic:** An individual who does not report or appear to have any symptoms or signs of illness. To be responsible, everyone should act as if they are carriers of COVID-19. (CDC)
- **Close contact:** Whether one is designated a close contact depends on their distance from an individual with COVID-19, masking, vaccination status, and history of COVID-19 infections. [How to determine close contacts in school and ECE settings.](#)
- **Community spread:** The spread of a contagious disease to individuals in a particular geographic location who have no known contact with other infected individuals. (CDC)
- **Disease cluster:** An increased incidence of a disease occurring around the same time, and in the same geographic area. (CDC)
- **Face coverings:** To prevent infection, it is recommended that the nose and mouth be covered with a mask or cloth face covering. Face coverings slow the spread of COVID-19 by limiting the release of the virus into the air.
- **Fully Vaccinated:** The term "up-to-date" is preferred when referring to vaccination status. For the criteria for an individual to be up-to-date on vaccinations, see [vaccination information from the CDC.](#)
- **Handwashing guidelines:** Proper handwashing reduces the spread of COVID-19. Hands should be washed frequently with soap and water for at least 20 seconds. If soap and water are not readily available, use of a hand sanitizer that contains at least 60% alcohol is appropriate. Hand sanitizer should be applied to all surfaces of both hands and rubbed together until they feel dry. (CDC)
- **Higher risk populations:** Individuals who are at a higher risk for developing severe illness from COVID-19 include those with underlying conditions such as cancer, chronic kidney disease, lung disease, serious heart conditions, sickle cell disease, diabetes, obesity, hypertension, or those who are immunocompromised. (CDC)
- **Infectious Period:** The period of time when an infected person can spread SARS-CoV-2 to others. The infectious period starts from 2 days before onset of symptoms (or 2 days before the positive specimen collection date, if asymptomatic) until they meet criteria for discontinuing home isolation. (CDC)

Definitions

- **Immunocompromised:** Individuals with a weakened immune system. Immunocompromised individuals “have a reduced ability to fight infections and other diseases” and are more likely to experience severe illness from COVID-19. (NIH)
- **Incubation period:** The time from exposure to when the first symptoms develop. Recent studies have found the incubation period of COVID-19 to be 2-14 days and is most commonly around 5 days. (CDC)
- **Isolation:** The separation of a person or group of people known or reasonably believed to be infected with a communicable disease and potentially infectious from those who are not infected to prevent spread of the communicable disease. Isolation for public health purposes may be voluntary or compelled by federal, state, or local public health order. (CDC)
- **Outbreak:**
 - **School outbreak:** 10% or three or more individuals who are laboratory positive for SARS-CoV-2 by antigen or PCR testing AND are epidemiologically linked to the outbreak setting, have onsets of illness or positive SARS-CoV-2 test (if asymptomatic) within a 14 day period, do not share a household, and are not listed as a close contact of each other outside of the outbreak setting. (IDPH)
 - **ECE Center outbreak:** Two or more individuals who are laboratory positive for SARS-CoV-2 by antigen or PCR testing AND are epidemiologically linked to the outbreak setting, have onsets of illness or positive SARS-CoV-2 test (if asymptomatic) within a 14 day period, do not share a household, and are not listed as a close contact of each other outside of the outbreak setting. (IDPH)
- **Pandemic:** A global spread of disease to several countries or continents, usually affecting a large number of people. A pandemic affects a greater geographical area and a greater number of people than an outbreak or epidemic. (WHO)
- **Quarantine:** The separation of a person or group of people reasonably believed to have been exposed to a communicable disease but not yet symptomatic, from others who have not been so exposed, to prevent the possible spread of the communicable disease. (CDC)
- **Underlying conditions:** Individuals with serious pre-existing medical conditions, as well as older adults, are more at risk of developing serious illness from COVID-19 than others. Serious underlying health conditions that make a person more at risk for developing severe illness include: chronic lung disease, moderate to severe asthma, heart disease with complications, hypertension, diabetes, BMI > 30, renal disease, liver disease, or those who are immunocompromised due to conditions such as receiving cancer treatment. (CDC)

Useful Links

[CDC General COVID-19 Information](#)

[CDC COVID-19 Community Levels](#)

[CDC COVID-19 Data Tracker](#)

[CDC COVID-19 Testing Guidance for Schools](#)

[CDC Print Resources for Schools](#)

[CDC Travel Guidance](#)

[CDC Up-To-Date Vaccination Definition](#)

[CDC Vaccination Frequently Asked Questions](#)

[Cleaning and Disinfecting Public Spaces for COVID-19](#)

[Coronavirus Testing Basics](#)

[COVID-19 County & School Metrics](#)

[COVID-19 Travel Recommendations by Destination](#)

[Myths and Facts About COVID-19 Vaccine](#)

Rapid Test vs RT-PCR (how to read results):

- [Interim Guidance for Rapid Antigen Testing for SARS-CoV-2 \(CDC\)](#)
- [Guidance for SARS-CoV-2 Point-of-Care Testing \(CDC\)](#)

["What Mask Should I Wear" Sharable Graphic](#)

Sample Letter to Parents in Response to Single Case - Free Home Tests

Dear Parents,

This letter is to inform you that a case of COVID-19 has been reported from *[enter name of school and additional details about the cohort; e.g., 7th grade or baseball team]*. We are following guidance from the Illinois Department of Public Health and the Centers for Disease Control and Prevention (CDC) to protect the health and safety of our students and staff. This includes recommending that any staff or student exposed to the case wear a mask when around others for the next [X] days (*enter 10 days from date of last exposure*).

To identify additional COVID-19 cases among those exposed and prevent further spread of the disease, we are providing you with home testing kits as your child had potential exposure to the case. The home testing kits are free, quick, and easy to use. Parents should assist their child and follow the instructions provided with the test kit. The test involves gently swabbing the inside of the lower nostril and is not painful. The CDC has recommended that exposed persons be tested two times over the next seven days with the second test performed 24-48 hours after the first.

If the test is positive, please inform the school and isolate for five days. If symptoms improve and your child is fever-free for 24 hours without taking fever-reducing medicine, they may return wearing a mask for days 6 through 10. If they are unable to wear a mask, they should stay home for an additional five days.

As always, everyone should monitor their health and stay at home if they develop symptoms and get tested. Anyone who develops severe symptoms should seek medical care immediately.

We are committed to providing your child and our staff with a safe and healthy environment. Thank you for your ongoing cooperation with our COVID-19 mitigation policies and procedures.

For any questions or concerns, please contact *[designated contact person]*.

Resources:

<https://www.cdc.gov/coronavirus/2019-ncov/your-health/quarantine-isolation.html>
<https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/k-12-childcare-guidance.html>

Sample Letter to Parents in Response to Outbreak - Free Home Tests

Dear Parents,

This letter is to inform you that [enter name of school and additional details about the cohort; e.g., 7th grade or baseball team] is responding to a COVID-19 outbreak in consultation with the Kane County Health Department. We are following guidance from the Illinois Department of Public Health and the Centers for Disease Control and Prevention (CDC) to protect the health and safety of our students and staff. This includes recommending that your child wear a mask when around others for the next [X] days (enter 10 days from date of last exposure).

To identify COVID-19 cases and prevent further spread of the disease, we are providing you with home testing kits as your child had potential exposure to the outbreak cases. The home testing kits are free, quick, and easy to use. Parents should assist their child and follow the instructions provided with the test kit. The test involves gently swabbing the inside of the lower nostril and is not painful. The CDC has recommended that exposed persons be tested two times over the next seven days with the second test performed 24-48 hours after the first.

If the test is positive, please inform the school and isolate for five days. If symptoms improve and your child is fever-free for 24 hours without taking fever-reducing medicine, they may return wearing a mask for days 6 through 10. If they are unable to wear a mask, they should stay home for an additional five days.

As always, everyone should monitor their health and stay at home if they develop symptoms and get tested. Anyone who develops severe symptoms should seek medical care immediately.

We are committed to providing your child and our staff with a safe and healthy environment. Thank you for your ongoing cooperation with our COVID-19 mitigation policies and procedures. For any questions or concerns, please contact [designated contact person].

Resources:

<https://www.cdc.gov/coronavirus/2019-ncov/your-health/quarantine-isolation.html>
<https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/k-12-childcare-guidance.html>





Next Steps for Parents/Caregivers

If your child has tested positive for COVID-19, has symptoms of COVID-19 or was a close contact of someone with COVID-19:

1

For those with a **positive test or COVID-like symptoms**, regardless of vaccination status, keep the child home for 5 days (isolate) with day 0 being the date of the test specimen collection or symptom onset. Notify your child's school of the positive test or COVID-like symptoms.

2

For those who have been **exposed to someone with COVID-19 and are asymptomatic**, keep the child home 5 days (quarantine) with day 0 being the date of the last exposure. Children who are both asymptomatic and are up-to-date with vaccinations, or are both asymptomatic and have had confirmed COVID-19 within 90 days do not need to quarantine. Ask your school or early childhood education center if Test to Stay is an option.

3

Keep any COVID-19 positive family members or close contacts masked and separated from other family members as is reasonable. See [CDC instructions for quarantine and isolation](#).

4

After isolation or quarantine, the child may return to school or ECE center after 5 days if fever free without the use of fever reducing medication for 24 hours and other symptoms have improved, and if they over age 2 and are able to correctly and consistently mask for an additional 5 days. If not, they should stay home the full 10 days.

Questions?

Call us at 630-208-3801 or visit kanehealth.com

When can my child return to daycare?

ISOLATION

If your child has tested positive for COVID-19 or has COVID-19 or flu symptoms:

- Test immediately after symptoms develop
- Stay home for 5 days
- Stay away from other people as much as possible
- Return after 5 days if:
 - older than age 2, and
 - can correctly and consistently wear a mask, and
 - fever-free for 24 hours without the use of fever-reducing medication and other symptoms have improved.
- Age 2 or younger, and all children who cannot correctly and consistently mask should isolate for 10 days.



QUARANTINE

If your child has been exposed to someone with COVID-19, has not had confirmed COVID-19 within the last 90 days, and is ineligible or not up-to-date with vaccinations:

- Stay home for 5 days
- Stay away from other people as much as possible
- Test on day 5 or immediately if symptoms develop.
- Return after 5 days if:
 - older than age 2, and
 - can correctly and consistently wear a mask, and
 - fever-free for 24 hours without the use of fever-reducing medication and other symptoms have improved.
- Age 2 or younger, and all children who cannot correctly and consistently mask should quarantine for 10 days.
- Children who are up-to-date on vaccines and do not develop symptoms after exposure do not need to quarantine.
- Children who have tested positive for COVID-19 within the last 90 days and do not have symptoms do not need to quarantine.

COUNTING DAYS OF ISOLATION OR QUARANTINE

Day 0 is the first day of symptoms or the last day of exposure to someone with COVID-19, OR for people who do not have symptoms, the specimen collection date of the positive viral test. Example below is for a child with COVID-19 symptoms who is over 2 years of age with symptoms improved by day 5 who can correctly and consistently mask while at daycare.



SCENARIOS

Scenario 1:

Valerie, age 4, has a fever and sore throat (day 0 is the first day of symptoms). She has gotten better and by day 4, she was fever-free for 24 hours. Even though she feels almost back to normal, she needs to wait until day 6 (5 full days) before she returns to school, if she can wear a mask consistently and correctly.



Scenario 2:

Marco, age 2, has a cough and tested COVID-19 positive (day 0 is the day the test sample was collected). He must stay home for 10 full days, and may return if his symptoms have improved and he has been without a fever for 24 hours.



Scenario 3:

Sadie, age 2, is Marco's classmate. She has no symptoms, but was in class with Marco on his last day of daycare. Because she is a close contact of Marco, she must quarantine for 10 full days, and should get tested for COVID-19 on day 5. If positive, she must isolate for 10 days, with day 0 being the day the test sample was collected. If negative, she may return to daycare after day 10 if she has no symptoms.



The Kane County Health Department supports the [DCFS Licensed Daycare Guidance](#). For more information, visit: www.kanehealth.com/Pages/COVID-Schools.aspx

¿Cuándo puede mi hijo regresar a la guardería?

AISLAMIENTO

Si su hijo ha dado positivo por COVID-19 o tiene síntomas de COVID-19 o gripe:

- Hacerse la prueba inmediatamente después de que se desarrollen los síntomas
- Quédese en casa durante 5 días
- Manténgase alejado de otras personas tanto como sea posible
- Regrese después de 5 días si:
 - mayor de 2 años, y
 - puede usar una máscara de manera correcta y consistente, y
 - Sin fiebre durante 24 horas sin el uso de medicamentos para reducir la fiebre y otros síntomas han mejorado.
- A los 2 años o menos, y todos los niños que no pueden enmascararse correcta y consistentemente deben aislarse durante 10 días.

CUARENTENA

Si su hijo ha estado expuesto a alguien con COVID-19, no ha confirmado COVID-19 en los últimos 90 días y no es elegible o no está al día con las vacunas:

- Quédese en casa durante 5 días
- Manténgase alejado de otras personas tanto como sea posible
- Pruebe el día 5 o inmediatamente si se desarrollan síntomas.
- Regrese después de 5 días si:
 - mayor de 2 años, y
 - puede usar una máscara de manera correcta y consistente, y
 - sin fiebre durante 24 horas sin el uso de medicamentos para reducir la fiebre y otros síntomas han mejorado.
- A los 2 años o menos, y todos los niños que no pueden enmascararse correcta y consistentemente deben ponerse en cuarentena durante 10 días.
- Los niños que están al día con las vacunas y no desarrollan síntomas después de la exposición no necesitan ponerse en cuarentena.
- Los niños que han dado positivo por COVID19 en los últimos 90 días y no tienen síntomas no necesitan ponerse en cuarentena.



CONTANDO LOS DÍAS DE AISLAMIENTO O CUARENTENA

El día 0 es el primer día de síntomas o el último día de exposición a alguien con COVID-19, O para las personas que no tienen síntomas, la fecha de recolección de la muestra de la prueba viral positiva. El siguiente ejemplo es para un niño con síntomas de COVID-19 que tiene más de 2 años de edad con síntomas mejorados para el día 5 que puede enmascararse de manera correcta y consistente mientras está en la guardería.



ESCENARIOS

Escenario 1:

Valerie, de 4 años, tiene fiebre y dolor de garganta (el día 0 es el primer día de síntomas). Ella ha mejorado y para el día 4, estuvo libre de fiebre durante 24 horas. A pesar de que se siente casi de vuelta a la normalidad, necesita esperar hasta el día 6 (5 días completos) antes de regresar a la escuela, si puede usar una máscara de manera consistente y correcta.



Escenario 2:

Marco, de 2 años, tiene tos y dio positivo en la prueba de COVID-19 (el día 0 es el día en que se recolectó la muestra de prueba). Debe quedarse en casa durante 10 días completos y puede regresar si sus síntomas han mejorado y ha estado sin fiebre durante 24 horas.



Escenario 3:

Sadie, de 2 años, es la compañera de clase de Marco. Ella no tiene síntomas, pero estaba en clase con Marco en su último día de guardería. Debido a que es un contacto cercano de Marco, debe ponerse en cuarentena durante 10 días completos y debe hacerse la prueba de COVID-19 el día 5. Si es positivo, debe aislarse durante 10 días, siendo el día 0 el día en que se recolectó la muestra de prueba. Si es negativo, puede regresar a la guardería después del día 10 si no tiene síntomas.



Contact Us

Visit us at:

kanehealth.com/Pages/COVID-Schools.aspx

01



Reporting potential outbreaks
redcap.link/kaneoutbreakreport

02



Questions or concerns
school@co.kane.il.us

03



Kane County
Health Department
(630) 208-3801