December 11, 2020

Ulster County School District COVID-19 Mitigation Guidance and Testing and Tracing Plan (Revision 3)

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Note, kindly direct any questions or comments regarding this document to Dan Proctor, Director UCDOH COVID-19 Operations. He can be reached via email at dpro@co.ulster.ny.us or via phone: (917) 796-5390.

Background
On March 13, 2020 Ulster County Executive Patrick Ryan joined the Executives from Orange and Duchess County ordering all schools in those counties to close for two weeks. On March 17, 2020 Governor Andrew Cuomo closed all schools in New York, and on May 1, 2020 he ordered further closures through June and called for school districts to create school re-opening plans for the Fall. On Friday, August 7, 2020 Governor Cuomo announced that all school districts in New York are permitted to re-open pending approval of their re-opening plan by New York State Education Department. The Governor required each
district to post their plans on testing, contact tracing and distance learning. On Tuesday, August 11, 2020 Ulster County Executive Ryan met with school district superintendents and agreed that the Ulster County Department of Health will assist in drafting county-wide plans for testing and contact tracing.

Pursuant to the Interim Guidance for In-Person Instruction at Pre-K to Grade 12 Schools during the COVID-19 Public Health Emergency (https://forward.ny.gov/phase-four-industries) developed by the New York State Department of Health, this document contains the required Testing and Contact Tracing plans for each school district in Ulster County (“Responsible Parties”).

This document was originally released to Ulster County School Districts as a draft for comment in August 2020 and received widespread scrutiny and comment from District Superintendents and school medical professions. Their comments were carefully reviewed and were used to inform the final version of the plan, which was released on October 26, 2020 to the district. Since that date the County has received new information on COVID-19 mitigation strategies from the state and obtained useful feedback from the schools and the community on how to adjust the plan to better fit the needs of the District. This 2nd version of the plan incorporates the latest state guidance and many of the recommendations provided by the district and the community.

Document Scope
This version of County guidance to District Schools includes updates on testing and tracing protocols and guidance as well as additional comment to facilitate the maturing on District COVID-19 Mitigation Plans. The document includes attachments as noted in the table of contents.

Ulster County Support for District Schools During the COVID-19 Pandemic
The Executive for Ulster County as well as the Ulster County Commissioner of Health and Mental Health, Dr. Carol Smith, stand ready to provide the District support necessary to mitigate the impact of COVID-19 on our schools. The Primary point of contact to coordinate that support will be Dan Proctor our Director of COVID-19 Operations for the Ulster County Department of Health (UCDOH). He can be reached at dproctor@co.ulster.ny.us or at any time via phone: (917) 796-5390.

Alternatively, feel free to reach out to Marc Rider our Deputy County Executive mrid@co.ulster.ny.us or to Commissioner Dr. Carol Smith csmi@co.ulster.ny.us: In addition, Ulster County will have individuals in the Recover Service Center (RSC) well-versed in the guidance promulgated in this document that will be able to address routine questions. They can be reach at (845) 443-8888 or https://covid19.ulstercountyny.gov/

Finally, NYS has provided the County a State employee to work as a liaison between the UCDOH and District schools to help ensure the County and the State understands and best meets District needs. The liaison is Samantha Mercado and she can be reach at (845) 283-3733 or samantha.mercado@health.ny.gov Her role will be developed thorough discussion with the District and UCDOH; however, at a minimum she will coordinate with the District on changes to NYS COVID-19 guidance, provide COVID educational service in person or virtually, participate in any meeting the District would like to have on the virus or mitigation strategies, and will coordinate with all parties (District health care stakeholders, LHD, LHD Recovery Service Center (RSC) operators, Case Investigators,
Contact Tracers, and CommCare supervisors) to ensure the fidelity of COVID-19 data shared by UCDOH, the State and the District.

In addition to COVID specific support, the UCDOH offers a variety of health education documents, webinars and instructions that can be tailored to the specific needs of the District. Point of contact for this service is Vin Martello, Director of Community Health Relations, vmrt@co.ulster.ny.us. Phone: O: 845.334.5585/ M: 845.849.8120

Purpose of Testing and Tracing Plans
Containment of COVID-19 outbreaks is a key component in returning to school safely, since the alternatives – indefinite school closures or uncontrolled community spread – are unacceptably harmful to students, staff and our communities. In order to prevent and contain outbreaks, it is essential that schools have the means to quickly identify individuals who may be infectious and prevent them from spreading COVID-19 to others.

Ideally, containment strategies rely on rapid, frequent, and accurate diagnostic testing to identify positive cases, followed by identification of contacts who may have been exposed and containment of further spread through isolation and quarantine. Testing identifies positive cases who are quickly isolated and monitored, case investigation and contact tracing identifies and quarantines possible exposures to limit further spread.

However, while testing capacity in Ulster County is adequate to support current levels of social and economic activity, it is likely that the reintroduction of in-person learning at all ages and in all locations may cause testing demand to exceed capacity, severely reducing our ability to contain community spread through traditional contact tracing methods. Ulster County is working with all testing partners to monitor and improve turnaround time, with a goal of reducing it to 48 hours or less in order to facilitate a testing-based protocol for case identification in the County’s school districts.

Until testing capacity increases and test turnaround times fall, our interim strategy to allow schools to reopen relies on pre-emptive screening to identify suspected COVID-19 cases, so that appropriate steps may be taken to isolate infectious individuals, identify potential exposures, and pre-emptively limit further exposures through targeted quarantines.
District Testing Plan

**NYSDOH Plan Requirements**
The plan needs to include where the testing will take place and who will be providing the testing and what circumstances the testing will occur and describe how the district will work with local departments of health. Schools are responsible to provide appropriately trained staff to conduct the testing. School nurses conducting the testing can operate under the LHD’s LSL or an alternate LSL via partnership with a community partner.

Each District will implement a testing protocol and procedure that is designed to prevent outbreaks while supporting in-person learning to the greatest extent possible. This requires districts to:

- Establish and implement a screening process for all students, staff, faculty and visitors (including vendors and contractors).
- Identify where testing will take place, who will provide testing, and under what circumstances individuals will be tested (please refer to Ulster County Department of Health (UCDOH) COVID-19 Testing Guidance and Plan for County Combined School Districts released to the District December 11, 2020).
- Describe how these protocols and procedures will be coordinated with the efforts of the UCDOH.

**After Reopening**
Upon the resumption of in-person instruction, whether for the entire district student population or a subset of students, the District will implement a screening process consistent with the process described in this plan. The screening process will remain active until such time as the NYSDOH or UCDOH approves changes to the screening process.

The purpose of the Screening Process will be to proactively identify potential cases prior to the confirmation of positive cases through testing. This will enhance containment of spread of the virus to supplement ‘normal’ Contact Tracing of laboratory-confirmed cases.

**Screening Process to Identify Suspected Cases**
Each District must implement mandatory health screenings, including temperature checks, of students, faculty, staff, and, where applicable, contractors, vendors, and visitors to identify any individuals who may have COVID-19 or who may have been exposed to the COVID-19 virus.

Specifically, all individuals must have their temperature checked each day. If an individual presents a temperature of greater than 100.0°F, the individual must be denied entry into the facility or sent directly to a dedicated area prior to being picked up or otherwise sent home.

UCDOH recommends that Districts also implement a remote health screening procedure, which is to be self-administered and self-reported prior to an individual’s entry into school facilities. As appropriate these remote screenings may be performed via electronic survey, digital application, telephone or other means, and may involve the parent/legal guardian.

The District will also designate one or more qualified individuals to conduct a secondary screening process for any student, staff, contractor, vendor, or visitor who presents with symptoms consistent
with COVID-19 or who has reason to believe they may have been exposed to someone with COVID-19 (See Model Screening Questionnaire in Attachment 1).

If a student, faculty member or staff fail to report to school as requested and are absent for more than one day, the team screening the returning individual must ascertain whether the individual manifested any COVID-19 associated symptoms during their absence.

Guidance for schools that use buses to convey students to school
Consistent with State-issued public transit guidance, schools must develop protocols and procedures, which include a requirement for individuals to wear acceptable face coverings at all times on school buses (e.g., entering, exiting, and seated), and that individuals should maintain appropriate social distancing, unless they are members of the same household. “Further, responsible parties must ensure operator compliance with Executive Order 202.18 which requires that employees operating public transit vehicles must wear face covering or masks which cover the nose and the mouth when passengers are present.”

Managing Ill Students, Staff and Faculty
There are three general scenarios schools will face regarding the management of ill or potentially ill students, staff or faculty: The first is an individual presents with non-COVID-19 related symptoms, e.g. earache or muscular skeletal injury. In these cases where there are no COVID-19 symptoms the school health care team can use their standard medical protocols. In the case of individuals with COVID-19 associated symptoms, a history of contact with positive COVID-19 or an individual that has a positive test, the school should follow the recommendations released in the NYSDOH Pre-K to GR 12 COVID Tool Kit as identified in the following 8 charts. For questions regarding quarantining of Proximate contacts please refer to Attachment 3 to this document.
**NYSDOH COVID-19 In-Person Decision Making Flowchart for Student Attendance**

**Can My Child Go To School Today?**

1. In the past 10 days, has your child been tested for the virus that causes COVID-19, also known as SARS-CoV-2?
   - **YES**
   - **NO**
   - **Was the test result positive OR are you still waiting for the result?**

2. In the last 14 days, has your child:
   - **YES**
   - **NO**
   - Traveled internationally to a CDC level 2 or 3 COVID-19 related travel health notice country or
   - Traveled to a state or territory on the NYS Travel Advisory List or
   - Been designated a contact of a person who tested positive for COVID-19 by a local health department?

3. Does your child currently have (or has had in the last 10 days) one or more of these new or worsening symptoms?
   - **YES**
   - **NO**
   - A temperature greater than or equal to 100.0°F (37.8°C)
   - Feel feverish or have chills
   - Cough
   - Loss of taste or smell
   - Fatigue/feeling of tiredness
   - Sore throat
   - Shortness of breath or trouble breathing
   - Nausea, vomiting, diarrhea
   - Muscle pain or body aches
   - Headaches
   - Nasal congestion/runny nose

**Your child cannot go to school today.**
They must stay in isolation (at home and away from others) until the test results are back and are negative OR if positive, the local health department has released your child from isolation.

**Your child cannot go to school today.**
They must stay at home until your local health department releases your child from quarantine, at least 14 days.
A negative diagnostic COVID-19 test does not change the 14-day quarantine requirement.

**Your child cannot go to school today.**
Your child should be assessed by their pediatric healthcare provider (HCP). Call your child's HCP before going to the office or clinic to tell them about your child's COVID-19 symptoms. If your child does not have a HCP, call your local health department.

**Your child CAN go to school today.**
Make sure they wear a face covering or face mask, practice social distancing, and wash their hands!

**Seek Immediate Medical Care If Your Child Has:**

- Trouble breathing or is breathing very quickly
- Prolonged fever
- Is too sick to drink fluids
- Severe abdominal pain, diarrhea or vomiting
- Change in skin color - becoming pale, patchy and/or blue
- Racing heart or chest pain
- Decreased urine output
- Lethargy, irritability, or confusion

Report absences, symptoms, and positive COVID-19 test results to your child's school.

September 2020 | A-1
My child has COVID-19 symptoms. When can they go back to school?

**HEALTHCARE PROVIDER (HCP) EVALUATION FOR COVID-19 (can be in-person or by video/telephone as determined by HCP)**

1. **HCP Recommends COVID-19 Diagnostic Test**
   - **OR**
   - **HCP Gives Alternate Diagnosis**

2. **COVID-19 Diagnostic Test Recommended but Not Done and No Alternate Diagnosis**

3. **Child is Not Evaluated by HCP**

   **STAY OUT OF SCHOOL and in isolation until test result is back**

   **Positive Test Result**
   - Your local health department will contact you to follow up.
   - Your child must remain in isolation (at home and away from others) until your local health department has released them from isolation, which is typically:
     - 10 days after symptom onset; **AND**
     - Child’s symptoms are improving; **AND**
     - Child is fever-free for at least 72 hours without use of fever reducing medicines.
   - While your child is in isolation, all members of the household must quarantine at home until released by the local health department, typically 14 days.
   - Note: A repeat negative COVID-19 test is not required for return to school.

   **Negative Test Result**
   - If your child’s symptoms are improving **AND** they are fever-free for at least 24 hours without the use of fever reducing medicines, your child may return to school with:
     - A note from HCP indicating the test was negative **OR**
     - Provide a copy of the negative test result.
   - If your child’s HCP provides a diagnosis of a known chronic condition with unchanged symptoms, or a confirmed acute illness (examples: laboratory-confirmed influenza, strep-throat) **AND** COVID-19 is not suspected, then a note signed by their HCP explaining the alternate diagnosis is required before your child will be allowed to return to school. They may return to school according to the usual guidelines for that diagnosis.
     - Note: a signed HCP note documenting unconfirmed acute illnesses, such as viral upper respiratory illness (URI) or viral gastroenteritis, will not suffice.

   **Your child must remain in isolation at home and is not able to go back to school until your local health department has released them from isolation, which is typically:**
   - At least 10 days have passed since date of first symptoms; **AND**
   - Child’s symptoms are improving; **AND**
   - Child is fever-free for at least 72 hours without use of fever reducing medicines.
**NYSDOH COVID-19 In-Person Decision Making Flowsheet for Staff To Go To Work**

**Can I Go To Work at the School Today?**

**In the past 10 days, have you been tested for the virus that causes COVID-19, also known as SARS-CoV-2?**
- **YES:** You cannot go to work at the school today and must stay in isolation (at home and away from others) until your test results are back and are negative OR if positive, the local health department has released you from isolation.
- **NO:** Was the test result positive OR are you still waiting for the result?

**In the last 14 days, have you:**
- Traveled internationally to a CDC level 2 or 3 COVID-19 related travel health notice country; or
- Traveled to a state or territory on the NYS Travel Advisory List; or
- Been designated a contact of a person who tested positive for COVID-19 by a local health department?

**Do you currently have (or have had in the last 10 days) one or more of these new or worsening symptoms?**
- Temperature greater than or equal to 100.0°F (37.8°C)
- Feel feverish or have chills
- Cough
- Loss of taste or smell
- Fatigue/feeling of tiredness
- Sore throat
- Shortness of breath or trouble breathing
- Nausea, vomiting, diarrhea
- Muscle pain or body aches
- Headaches
- Nasal congestion/runny nose

**You can go to work at the school today!**
Make sure you wear a face covering or face mask, practice social distancing, and wash your hands frequently.

**Seek Immediate Medical Care If You Have:**
- Trouble breathing or are breathing very quickly
- Are too sick to drink fluids
- Severe abdominal pain, diarrhea or vomiting
- Change in skin color - becoming pale, patchy and/or blue
- Racing heart or chest pain
- Decreased urine output
- Lethargy, irritability, or confusion

*September 2020 | 8-1*
I have COVID-19 symptoms. When can I go back to work at the school?

**HEALTHCARE PROVIDER (HCP) EVALUATION FOR COVID-19 (can be in-person or by video/telephone as determined by HCP)**

- **HCP Recommends COVID-19 Diagnostic Test**
- **OR**
  - **HCP Gives Alternate Diagnosis**
  - **COVID-19 Diagnostic Test Recommended but NOT Done and No Alternate Diagnosis**
- **NOT Evaluated by HCP**

**Positive Test Result**

Your local health department will contact you to follow up. You must remain in isolation (at home and away from others) until your local health department has released you from isolation, which is typically:
- 10 days after symptom onset; **AND**
- Your symptoms are improving; **AND**
- You are fever-free for at least 72 hours without the use of fever-reducing medications.

While you are in isolation, all members of the household must quarantine at home until released by the local health department, typically 14 days.

Note: A repeat negative COVID-19 test is not required for return to school.

**Negative Test Result**

If your symptoms are improving **AND** you are fever-free for at least 24 hours without the use of fever-reducing medications, you may return to school with:
- A note from HCP indicating the test was negative **OR**
- Provide a copy of the negative test result.

If your HCP provides a diagnosis of a known chronic condition with unchanged symptoms, or a confirmed acute illness (examples: laboratory-confirmed influenza, strep-throat) **AND** COVID-19 is not suspected, then a note signed by your HCP explaining the alternate diagnosis is required before you will be allowed to return to school. You may return to school according to the usual guidelines for that diagnosis.

Note: A signed HCP note documenting unconfirmed acute illnesses, such as viral upper respiratory illness (URI) or viral gastroenteritis, will not suffice.

You must remain in isolation at home and are not able to go back to work at the school until your local health department has released you from isolation, which is typically:
- At least 10 days have passed since date of first symptoms; **AND**
- Your symptoms are improving; **AND**
- You are fever-free for at least 72 hours without the use of fever-reducing medicines.

Note: You may not qualify for Paid Sick Leave benefits due to COVID-19 without a confirmed COVID-19 diagnosis.

*COVID-19 diagnostic testing includes molecular (e.g., PCR or antigen testing for SARS-CoV-2, the virus that causes COVID-19). Diagnostic testing may be performed with a nasopharyngeal swab, nasal swab, or saliva samples, as ordered by the health care provider and per laboratory specifications. At times, a negative antigen test will need to be followed up with a confirmatory molecular test. Serology (antibody testing) cannot be used to rule in or out acute COVID-19.*
NYS DOH COVID-19 Guide for School Administrators and Schools Nurses

COVID-19 Screening Flowsheet for Students and Staff

In the past 10 days, has the student or staff been tested for the virus that causes COVID-19, also known as SARS-CoV-2?

- **YES**
- **NO**

Was the test result positive or are they still waiting for the result?

- **YES**
- **NO**

The student or staff **cannot** go to school today.

They must stay in isolation (at home and away from others) until the test results are back and are negative **or** if positive, the local health department has released the individual from isolation.

In the last 14 days, has the student or staff:

- **YES**
- **NO**

1. Traveled internationally to a CDC level 2 or 3 COVID-19 related travel health notice country;
2. Traveled to a state or territory on the NYS Travel Advisory List;
3. Been designated a contact of a person who tested positive for COVID-19 by a local health department?

Does the student or staff currently have (or has had in the last 10 days) one or more of these new or worsening symptoms?

- **YES**
- **NO**

1. A temperature greater than or equal to 100.0°F (37.8°C)
2. Feel feverish or have chills
3. Cough
4. Loss of taste or smell
5. Fatigue/feeling of tiredness
6. Sore throat
7. Shortness of breath or trouble breathing
8. Nausea, vomiting, diarrhea
9. Muscle pain or body aches
10. Headaches
11. Nasal congestion/runny nose

The student or staff **cannot** go to school today.

They should be assessed by their health care provider (HCP). If they do not have an HCP, they should call their local health department. If they do not receive COVID-19 testing, or are not cleared to return to school by their HCP, then they are required to be isolated at home. See next page for more information.

Students or staff **cannot** go to school today.

They must stay at home until the local health department releases the individual from quarantine (at least 14 days from the date of their return from travel or last exposure). A negative diagnostic COVID-19 test does not change the 14-day quarantine requirement.

School staff are not essential workers and must quarantine.

Communicate to your students and staff that they must report absences, symptoms, and positive COVID-19 test results to your school.

**CALL 911 IF A STUDENT OR STAFF HAS:**

- Trouble breathing or if breathing very quickly
- Severe abdominal pain, diarrhea or vomiting
- Change in skin color - becoming pale, patchy and/or blue
- Racing heart or chest pain
- Lethargy, irritability, or confusion

Make sure they wear a face covering or face mask, practice social distancing, and wash their hands frequently.

September 2020 | C-1
COVID-19 Flowsheet for Student or Staff with COVID-19 Symptoms

Student/staff has symptoms consistent with COVID-19:
- Student/staff member should keep face mask on.
- Staff members should be sent home immediately.
- Students awaiting transport home by the parent/guardian must be isolated in a room or area separate from others, with a supervising adult present using appropriate personal protective equipment (PPE).
- School administration and the parent/guardian should be notified.
- Provide instructions that the individual must be seen by an HCP for evaluation and have COVID-19 testing (unless determined not necessary by HCP). If they do not have an HCP they should call their local health department.
- Schools should provide a list of local COVID-19 testing locations.
- Clean and disinfect area where the student/staff member was located.

**HEALTHCARE PROVIDER (HCP) EVALUATION FOR COVID-19 (can be in-person or by video/telephone as determined by HCP)**

**HCP Recommends COVID-19 Test**

- **STAY OUT OF SCHOOL**
- and in isolation until test result is back

**Positive Test Result**

- The local health department will contact you to follow up.
- The ill person must remain in isolation at home and away from others until the local health department has released them from isolation, which is typically:
  - 10 days after symptom onset; AND
  - Child/staff's symptoms are improving; AND
  - Child/staff is fever-free for at least 72 hours without use of fever reducing medications.
- While the ill person is in isolation, all members of the household must quarantine at home until released by the local health department, typically 14 days.
- Note: A repeat negative COVID-19 test is not required for return to school.

**Negative Test Result**

If symptoms are improving **AND** there are fever-free for at least 72 hours without the use of fever reducing medications, student/staff may return to school with:
- A note from HCP indicating the test was negative **OR**
- Provide a copy of the negative test result.

**HCP Gives Alternate Diagnosis**

If the HCP provides a diagnosis of a known chronic condition with unchanged symptoms, or a confirmed acute illness (examples: laboratory-confirmed influenza, strep-throat) AND COVID-19 is not suspected then a note signed by their HCP explaining the alternate diagnosis is required before the student/staff will be allowed to return to school. They may return to school according to the usual guidelines for that diagnosis.
- A signed HCP note documenting unconfirmed acute illnesses, such as viral upper respiratory illness (URI) or viral gastroenteritis, will not suffice.

**COVID-19 Diagnostic Test Recommended but Not Done and No Alternate Diagnosis**

The person must remain in isolation at home and is not able to go back to school until the local health department has released them from isolation, which is typically:
- At least 10 days have passed since the day symptoms started **AND**
- Symptoms are improving **AND**
- They are fever-free for at least 72 hours without use of fever reducing medications.

COVID-19 diagnostic testing includes molecular (e.g., PCR) or antigen testing for SARS-CoV-2, the virus that causes COVID-19. Diagnostic testing may be performed with a nasopharyngeal swab, nasal swab, or saliva sample, as ordered by the health care provider and per laboratory specifications. If there is a high suspicion of COVID-19 based on symptoms or circumstances, the HCP or public health should consider following up a negative antigen test with a molecular test which is more sensitive, particularly when there are important clinical or public health implications. Serology/antibody testing cannot be used to rule in or out acute COVID-19.
COVID-19 exclusion protocol for contacts of symptomatic students and staff

Symptomatic student/staff must be evaluated by a health care provider (HCP) within 48 hours of symptom onset.

- **Evaluation occurs within 48 hours**
  - HCP gives alternate diagnosis:
    - No exclusions required
  - COVID-19 diagnostic test NOT done (for example, guardian refuses):
    - Follow protocols on the following page to assist the LHD with a full case investigation and contact tracing
  - COVID-19 diagnostic test performed:
    - Positive result:
      - Follow protocols on the following page to assist the LHD with a full case investigation and contact tracing
    - Negative result:
      - No result within 48 hours:
        - No exclusions required
    - No result within 48 hours:
      - No exclusions required

- **Does NOT occur within 48 hours**
  - After 48 hours, deem the symptomatic student/staff positive:
    - Ensure the symptomatic student/staff remains in isolation at home
    - Follow the protocols for positive students/staff on page C-2
    - Notify and begin communicating with the local health department (LHD)

Follow protocols on the following page to assist the LHD with a full case investigation and contact tracing.
Guidance for handling Contacts to Students, Faculty or Staff that Have COVID-19 like Symptoms

The incubation period for COVID-19 is 2 days to 14 days from exposure, therefore it is important for school personnel to ascertain when the individual first had symptoms. During the first 48 hours from symptom onset the district is not required to send home contacts of the individual with symptoms but should direct the symptomatic individual to quarantine and contact their healthcare provider for further evaluation and testing. During these 48 hours the district should work with the Ulster County Health Department (UCDOH) to identify contacts to the symptomatic individual and wait for test results, or an alternative diagnosis from the healthcare provider.

If no results or alternative diagnosis are received within 48 hours, the school and UCDOH will consider the individual as a positive case and will quarantine and isolate contacts accordingly. If negative results are received sometime after the 48 hours, contacts will be treated as recommended on page C-3 of the NYSDOH Pre-K to GR 12 COVID Tool Kit.

If the symptomatic individual fails to provide the schools with a negative test result or a note from their Health Care Provider (HCP), all Close Contacts to the symptomatic individual from 48 hours prior to the development of his or her symptoms until exclusion of the symptomatic individual will be required to
quarantine. A Close Contact is anyone who was within 6 feet of a suspected or confirmed case for a continuous period of 10 minutes or more. The decision on whether to quarantine Proximal Contacts (individuals who have had brief close encounters or extended encounters at a distance greater than 6 feet with a suspected or confirmed case) to an individual displaying COVID-19 like symptoms will be made by the school heath care staff in consultation with the UCDOH. To assist in the evaluation of proximate contacts and risk they may create to school students and personnel, UCDOH has generated a set of criteria which is contained in Attachment 3 to this document.

Alerting the Community to Students, Faculty or Staff that have been exclude and required to Quarantine or Isolate

We recommend that the school make every effort to inform the community within 24 hours when a school member is required to exclude due to positive COVID-19 results or suspicion of COVID. The community is usually frightened of the ramifications of an outbreak of the virus in school. Parents are concerned about the impact an outbreak could have on their jobs and are worried for the safety of their children that remain in school. It is important to release details of a COVID event immediately, failing to do so creates rumors that can quickly create a sense of panic. The more details that can be released helps better manage perceptions in the community. The County understands how it is difficult it may be for school staff to weigh the needs of the individual’s privacy, concerns for district operations and the desire not to create negative perceptions or panic in the community. Generating communiques to the public must balance all these concerns, which is not an easy task. Here are a couple of samples that could be used to facilitate message preparation.

Suggested Messaging Content for Public Notification of COVID Outbreaks

**Message Sample One:**...would like to inform you that our school had an individual that presented with COVID-19 like symptoms and was sent home to be evaluated by his family Health Care Provider (HCP). This individual will be required within 48 hours to obtain either a note from their HCP which states that they have an alternate (non COVID) diagnosis and can return to school; or the individual must provide a negative COVID-19 PCR test report to our health care staff before they can resume in-person education. If unable to provide such then the symptomatic individual will have to remain excluded from school and quarantine under UCDOH monitoring for 14 days.

The school in coordination with the UCDOH has evaluated the situation and identified and excluded students or staff that had contact with the symptomatic individual. These contacts must quarantine for 14 days or until the symptomatic individual obtains a note from their HCP or a negative PCR test. Parents or guardians of student contacts have been informed of their child’s status and the requirement for re-admittance to in-person learning.

The school has, in accordance with NYSOH standards, cleaned and ventilated the facilities used by the student and will continue to provide in-person learning.

**Message Sample Two:**...would like to inform you that our school had an individual that tested positive for COVID-19 and has been excluded from school to isolate at home under UCDOH monitoring until released from isolation. All contacts to the individual have been identified and evaluated. Those requiring quarantine have been notified and have been excluded and will be under UCDOH monitoring until their 14-day quarantine period has expired.
The school has, in accordance with NYSDOH standards, cleaned and ventilated the facilities used by the student and will continue to provide in-person learning.

**Reporting Cases or Suspected Cases**

The District will provide timely notifications within 1 hour to the Ulster County Department of Health (UCDOH) whenever the school receives a positive test report on a student, faculty or staff member (reporting instructions are provided in the following paragraph).

If an individual is suspected of having COVID-19 and has not received, within 48 hours of the onset of their symptoms, a neg COVID-19 test report or a note from their HCP identifying an alternative diagnosis, the school must notify the UCDOH. Notifications should be accomplished using the UCDOH Case/Suspected Case notification form which is online here: [UCDOH Case or Suspected Case Reporting Form](#). The schools should fill out the form with as much information, including a list of contacts, as possible and then click the submit button at the bottom of the form. Doing so allows the data to populate a spread sheet used to ensure the Dept has an accurate understanding of Covid-19 activity at the school.

The information submitted must include at a minimum the date of the positive test and the laboratory that reported the results, or the date that a symptomatic individual becomes a suspected case (again, after 48 hours since the onset of symptoms); the name and contact information of the individual, the role of the individual (student, faculty or staff) and, in the case of minors, their parent/guardian (including a valid phone number); and the district building/facility at which the individual works or attends instruction.

**UCDOH Reporting to the District Schools**

Governor Cuomo signed an executive order on September 9 that requires all schools update the NYSDOH COVID-19 Report Card. The COVID-19 Report Card will provide parents, teachers, students and all New Yorkers with comprehensive data updated on a daily basis, including: Positive infections by date of students and staff by school and school district whether school/district (and student and staff) are remote, in-person, or hybrid; Number of students and staff on-site; Percentage of on-site students & staff who test positive; Number of tests administered by the school, test type, lab used and lag time Date of last submission/update

As the school medical staff may not be aware of all COVID-19 testing results, Local Health Departments (LHD) are required to assist in the reporting by ensuring all schools have accurate records of all cases that have been reported during the last 24 hours. The LHD will consolidate the positive test reporting for the district from the state and include any test results that are presented to the district by individuals that have obtained rapid tests (or other test results that the State may not be aware of) and subsequently reported to the LHD via the [UCDOH Case or Suspected Case Notification Form](#). The Ulster County Health Department will provide the school district by 2 PM daily a consolidated list of Positive infections by date of students, faculty and staff by school.

Students or staff who have been identified as suspected of COVID-19 or who are identified as close or proximate exposures to a suspected or confirmed case will be referred to their primary care physician or to one of the County’s testing partners to receive a COVID-19 diagnostic test. The District will not
directly provide testing to students and staff but will make referrals through the individual’s primary care physician or the UCDOH.

There are several privately-operated testing sites throughout Ulster County, and more information can be found by calling (845) 443-8888 or at https://covid19.ulstercountyny.gov/get-tested/

Any individual who is suspected of COVID-19 will be ordered by the UCDOH to quarantine pending the results of testing. The District will require a note from their primary care physician that they are medically cleared to return to school or a negative COVID-19 test, with a specimen collection date on or after the date they have been identified as a suspected case, in order to return prior to the completion of the quarantine. If they test positive for COVID-19 they will need to go through the UCDOH isolation protocol and be released from isolation by the UCDOH prior to returning to in-person learning.

The district will not mandate testing in order to return to school, but if a test is refused, the person suspected of being COVID-positive will need a note from their primary care physician that they have a diagnosis that is not COVID and that they are medically cleared to return to school, or they must quarantine for 14 days.

Testing of Travelers and Contacts to Confirmed Cases
Students or staff who are exposed to COVID-19 confirmed individuals, whether outside or within a school facility, or who have traveled for a duration of more than 24 hours to a travel-restricted state, are required to quarantine for 14 days following the date of last exposure or travel. However, the state has provided travelers the ability to opt out of the 14 day quarantine. Those procedures can be found here: https://coronavirus.health.ny.gov/covid-19-travel-advisory Districts will encourage these individuals to report their exposure or travel to the UCDOH by calling (845) 443-8888.

If symptoms develop, these direct contacts will be considered to be positive pending verification by a test; testing will be strongly encouraged during routine contact monitoring performed by the UCDOH. These individuals may not be permitted to return to school facilities until their quarantine period has concluded, as verified by documentation from the UCDOH.

Testing -- NYS New cluster action Initiative
On October 6, 2020, Governor Cuomo implemented a new cluster action initiative to address COVID-19 hot spots. This science-based approach will focus on addressing these clusters and aims to prevent further transmission of the virus, and includes new rules and restrictions directly targeted to areas with the highest concentration of COVID19 cases and surrounding communities. The initiative divides clusters and the areas around them into three categories – the cluster itself (red zone), a warning zone (orange zone), and a precautionary zone (yellow zone). As the level of positive tests have grown substantially over the past several weeks, there is a strong potential for the County to be designated a “yellow zone.” The requirements for testing in this zone are summarized below. Please see New Cluster Action Initiative and Schools for details as well as requirement for Orange and Red zones.

Yellow Zone Testing Requirements
Under the New York State Cluster Action Initiative, the New York State Department of Health (NYSDOH) has determined that schools open to in-person instruction in yellow zones are required to test 20% of in-person students, teachers and staff. If the results of the testing reveal that the positivity rate among the 20% of those tested is lower than the yellow zone’s current 7-day positivity rate, testing at that school
will no longer be required to continue. A positivity rate in a school that is lower than in the yellow zone is a sufficient demonstration that in-person instruction is not a significant driver of local viral spread. The current positivity rate for zones can be found at [https://forward.ny.gov/percentage-positive-results-county-dashboard](https://forward.ny.gov/percentage-positive-results-county-dashboard). However, if the results of the testing over the first two weeks reveal that the positivity rate among in-person student, staff and faculty is higher than the Yellow Zone’s current 7-day positivity rate, the school will be required to continue to test 20% of the in-person population on a bi-weekly basis for as long as the school remains in a designated yellow zone.

NYS DOH will provide rapid testing kits to local health departments (LHDs), hospitals, pharmacies, and other health care providers. These resources should be utilized as necessary to assist schools in a designated yellow zone with the surveillance testing requirement. These tests will be offered at no cost to students and staff. Schools, particularly those in a yellow zone, should contact their LHDs, and other local health care partners to establish partnerships and make arrangements for deployment of these tests in their school setting to facilitate the required testing of students, teachers, and staff attending in-person. To be eligible for the free testing, schools must be current with their daily reporting as required under E.O 202.61. LHDs have been advised to request enough testing resources to support weekly testing of 20% of the in-person student, staff, and teacher population within the yellow zone in their area for as long as such schools remain in the yellow zone. See the following site for additional information [Supplemental guidance to support yellow zone school testing 11.12.2020_0.pdf](https://covid19.ulstercountyny.gov/wp-content/uploads/2020/12/UCDOH-COVID-19-TestingGuidance.pdf)

UCDOH Plan for Support of Yellow Zone Testing in Ulster School District


Contact Tracing of Suspected Cases

Contacts (close contacts and select proximal contacts) of a suspected case will be ordered to quarantine at the end of a 48-hour period after exposure to a symptomatic individual if the suspected case:

- fails to provide the district with a note from a qualified medical professional indicating the suspected case does not have COVID-19 related symptoms
- fails to provide the district with a negative test report obtained after the exposure to District students or personnel.

If the suspect individual’s test comes back (within the 48 period) negative, contacts can remain in class or on district property and the individual can return to class if asymptomatic. If the individual obtains a negative test result or a note from a HCP that indicates the individual does not have COVID-19 after the 48 hour window, then the individual can return to school if asymptomatic and the contacts quarantined after 48 hours, can return to school or work. If the test comes back positive, close contacts must go on a mandatory quarantine as ordered by the UCDOH, and they must continue to quarantine for a period of 14 days from last exposure even if they receive a negative test. Students and staff identified as proximate contacts will be reviewed by the school health care team in consultation with the UCDOH
and MAY be required to quarantine if requested by the UCDOH. However, there is no need to inform or separate contacts of a symptomatic student or staff during the 48-hour waiting period.

**District Contact Tracing Plan**

### NYSDOH Plan Requirements

Provide details about how each school will work with, support, and supplement the contact tracing efforts of their local health department. Plans must include protocols for symptomatic individuals and positive cases in school, and proximate contacts; and a determination for how students and or staff need to be tested to adequately isolate and mitigate additional exposure to COVID-19. The plan must also specify the roles will the Responsible Party’s staff will perform and who among the staff will perform these tests.

While the UCDOH has the primary responsibility for case investigation and contact tracing, effective contact tracing is a collaborative effort that requires the assistance of the District, schools, and families. The District is expected to cooperate fully with UCDOH by providing staff and student lists, schedules, and other information to identify suspected or confirmed cases and exposed individuals and to more efficiently and effectively contain the virus.

The District will work with the UCDOH to identify any contacts of all suspected or confirmed COVID-positive students and staff. In consultation with the UCDOH the school medical health staff will identify close and proximate contacts and will provide contact information to the UCDOH for each contact using the UCDOH Case or Suspected Case management form.

A close contact is anyone who was within 6 feet of a suspected or confirmed case for a continuous period of 10 minutes or more. Proximate contacts are individuals who have had brief close encounters or extended encounters at a distance greater than 6 feet with a suspected or confirmed case.

### Contact Tracing of Confirmed Cases

Any individual who has received notification from the UCDOH or a Health Care Professional (HCP) that they have tested positive for the virus will receive a phone call from a UCDOH Public Health Care (PHC) nurse. During the case investigation, PHC nurses will elicit contacts for further investigation.

Travelers returning from restricted areas are considered contacts and are expected to quarantine for 14 days from the date they arrived in New York State from a restricted area. However, based on recent guidance travelers can opt out of the 14 day requirement. Please see the information in this link [https://coronavirus.health.ny.gov/covid-19-travel-advisory](https://coronavirus.health.ny.gov/covid-19-travel-advisory)

Any individual identified as a close contact will:

- Be contacted by a NYS Contact Tracer
- Receive quarantine orders for 14 days from the County Health Commissioner
- Be monitored via phone or SMS by trained Contact Tracers
- Be provided support to facilitate their compliance with quarantine orders.
Information Sharing and Data Management

The UCDOH will provide the District with a standard format for sharing of information that maintains compliance with HIPAA, FERPA and other appropriate regulatory standards. The document will contain the names, date of birth, age, names and addresses of parents or guardians and contact information of anyone who is identified as a suspected case, a confirmed case, a close contact or a proximate contact, and exposure dates and locations of anyone who is suspected of having been exposed to a COVID-positive case.

The following is a list of actions to be taken by either the District or by the UCDOH as a means of successfully conducting contact tracing:

1. The District will ensure that contact records for all staff, contractor, student/family contact records are current and include email and cell phone information
2. The District will ensure student schedules are up to date
3. The District will maintain a log of any visitors, vendors, or contractors to the schools which includes date and time, and where in the school they visited, and who they interacted with.
4. The District will provide a current list of staff and students to the UCDOH, upon request, in order to facilitate identification of positive COVID-19 cases in the schools.
5. The District’s medical teams will notify the UCDOH using the UCDOH Case/Suspected Case Notification form within 1 hour of learning that a staff or student has been or may have been exposed to the virus.
6. The District’s medical teams will notify the UCDOH of any individuals directly exposed to the COVID-positive person, along with contact details and the date and nature of exposure.
7. The District Medical Team will consult with the UCDOH if uncertain about isolation and/or quarantine guidelines
8. The UCDOH will notify the District of any positive test results they receive for staff or students of the District, within 1 hour.
9. The UCDOH will coordinate Contact Tracing with neighboring counties’ Departments of Health, to identify any students or staff that live outside of Ulster County. This information will be shared with the District.
10. If the District is unable to obtain a timely response from the UCDOH, the District Medical Team will provide interim guidance to affected students or staff, until such time as the situation can be reviewed by the UCDOH

Ulster County will use the New York State’s Communicable Disease Case Management System (CommCare) to manage and monitor all individuals that are suspected or confirmed cases or have come into contact with a suspected or confirmed case. The CommCare system consists of an online application

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1 COVID-19 is a reportable communicable disease mandated under the New York State Sanitary Code (10NYCRR 2.10, 2.14), including reporting by school nurses (10NYCRR 2.12). While the Family Educational Rights and Privacy Act (FERPA) generally requires parental permission for school personnel to disclose personally identifiable information from a student’s education record (including health information). But the law provides exceptions allowing disclosure without consent.

2 As defined by CDC, NYSDOH
to manage case and contact data, trained Contact Tracers to monitor the individual via telephone and SMS, and a virtual set of tools to parse, analyze and report the data. The CommCare system is managed by the NYS DOH at the state level and the UCDOH at the county level.

District Rapid Response Plan
If any school in the district has more than 3% of their census (staff, students and faculty) COVID-19 positive they are required close and work with the UCDOH Rapid Response Team on mass testing of staff and students, subject to parent or guardian permission.

Testing will be conducted at one of Ulster County’s COVID-19 mobile testing sites or by members of the UCDOH Rapid Response team at a facility chosen in cooperation with the District. Anyone tested will be required to go on voluntary quarantine until they receive their test results, and the affected school building or facility will provide remote-only learning for two weeks.

The UCDOH will also work with the New York State Department of Health to manage the containment of any evolving outbreak. The District will ensure that all school spaces used by students and staff are cleaned in accordance with NYS requirements and that any space used by a COVID positive or suspected positive individual is decontaminated using the NYSDOH approved guidelines.
### Attachment 1: Model Screening Questionnaire

1. Have you (student or staff member) experienced a fever of 100.0 degrees F or greater, a new cough, new loss of taste or smell or shortness of breath within the past 10 days?

   **No**
   
   Go to the next question.

   **Yes**
   
   No further screening is needed. The individual must be sent home for follow up by their primary care physician health professional and a referral for a Covid-19 test should be made. Notify the Ulster County Health Department via fax to 845-340-3162.

2. In the past 10 days, have you received a positive result from a COVID-19 diagnostic test that was administered by a nose or throat swab? (not a blood test)

   **No**
   
   Go to the next question.

   **Yes**
   
   No further screening is needed. If ill, the individual must be sent home for follow up by their primary care physician health professional. The individual or family should be encouraged to follow Ulster County Health Department isolation guidance. Notify the Ulster County Health Department via fax to 845-340-3162.

3. To the best of your knowledge, in the past 14 days, have you been in close contact (within 6 feet for at least 10 minutes) with anyone while they had COVID-19?

   **No**
   
   If ill, the individual should be sent home. Regular illness protocols should be followed. Go to the next question.

   **Yes**
   
   No further screening is needed. If ill, the individual must be sent home for follow up by their primary care physician health professional. The individual or family should be encouraged to follow Ulster County Health Department quarantine guidance. Notify the Ulster County Health Department via fax to 845-340-3162.

3. In the past 14 days, have you returned from travel to one or more restricted states as identified by NYSDOH (https://coronavirus.health.ny.gov/covid-19-travel-advisory)?

   **No**
   
   If ill, the individual should be sent home. Regular illness protocols should be followed.

   **Yes**
   
   If ill, the individual must be sent home for follow up by their primary care physician health professional. The individual or family should be encouraged to follow New York State Traveler Guidance and to complete the Traveler Health Form (https://coronavirus.health.ny.gov/covid-19-travel-advisory) or call (845) 443-8888.
Q1: When and how should we report positive COVID-19 cases to UCDOH?
A: Immediately notify UCDOH if a student, faculty or staff member tests positive for COVID-19:

- Notifications should be accomplished using the UCDOH Case/Suspected Case notification form which is on line here: UCDOH Case or Suspected Case Reporting Form. The schools should fill out the form with as much information as possible and then click the submit button at the bottom of the form.
- Alternatively, the schools can provide the information requested in the form via secure fax to 845-443-8888, and/or tracing@co.ulster.ny.us

Q2. Are schools responsible for contact tracing for students, faculty and staff?
A: While UCDOH has the primary responsibility for contact tracing, effective contact tracing is a joint collaborative effort - UCDOH will need the assistance of schools in providing staff and student lists and schedules and other information to identify exposed individuals, arrange for testing, etc.

Q3. Will contact tracers release the name of the positive individual to their contacts?
A: No. Contact tracers will tell potentially infected persons that they were exposed – they will not disclose the identity of the person to whom they were exposed.

Q4. How long will contacts to positive COVID-19 cases be required to quarantine?
A: Individuals who are exposed to someone with COVID-19 will be required to quarantine for 14 days from the day they were last exposed. Please note that a negative test does not release an individual from quarantine.

Q5. What resources will an isolating or quarantined person require?
A: An isolating or quarantined person will need access to a private room and a private bathroom. Individuals will also need access to food, medications and other essential items that will allow them to remain in quarantine. People who need assistance during quarantine or isolation can call 845-443-8888.

Q6. When should an exposed individual get tested for COVID-19?
A: Testing should be conducted approximately 5 days after exposure. Exposed individuals must remain on quarantine until being tested and must immediately return to quarantine following such testing. If a person tests positive, they will be placed in isolation (for a period determined by the UCDOH). Even if the test is negative, the individual must continue to quarantine for the full 14 days.

Q7. Where can students, faculty and staff get tested for COVID-19?

A: A list of testing sites can be found on the Ulster County COVID-19 website https://covid19.ulstercountyny.gov/get-tested/

Students, faculty and staff can also call the Ulster County Hotline (Recovery Service Center) at 845-443-8888, or the NYS COVID-19 hotline at 1-888-364-3065 for assistance locating a testing site.

Q8. Is there a charge for COVID-19 tests?

A: Charges may vary. Testing is covered by most insurance companies and will have zero patient cost or a standard co-pay. The most reliable way is to get tested for free is at a state-run test site, which is available at the mobile testing site at Anthony Wayne Recreational Area in Harriman State Park; for appointments and hours call (888) 364-3065.

Q9. When can a person who has tested positive return to school? Is it the same process for students, faculty and staff?

A: If the individual who tested positive has symptoms (Fever, Cough, Shortness of Breath/Difficulty Breathing, Chills, Repeated Shaking with Chills, Muscle Pain, Headache, Sore Throat, or New Loss of Taste or Smell) the Clearance Criteria for release from isolation are:

- It’s been at least 10 days since the individual first started experiencing symptoms; AND
- The individual hasn’t had a fever in at least 3 days, without taking fever-reducing medication (such as Tylenol); AND
- Any shortness of breath/coughing/difficulty breathing, chills, repeated shaking with chills, muscle pain, headache, sore throat, or new loss of taste or smell has improved.

If the individual who tested positive is asymptomatic the Clearance Criteria are:

- It’s been at least 10 days since the person’s first positive COVID-19 test was collected; AND
- The individual hasn’t had any subsequent illness

Q10. Can we assume that students with antibodies are safe from contracting COVID-19?

A: No, we do not have enough information about whether antibodies protect individuals from re-infection and how long antibodies may provide protection. Antibody tests also CANNOT diagnose if an
individual has active infectious COVID-19. A positive result can mean you had infection with COVID-19 in the past. A different test would be needed to determine active infection.

Q11. Are rapid tests (Antigen or Molecular) reliable?

A: Rapid tests provide results in under an hour, though they may have a high rate of false negatives. Rapid antigen tests which are the most commonly performed rapid COVID-19 test cannot rule out COVID-19 and should be followed up by a molecular test. Please see the FDA Coronavirus Testing Basics site, which includes a video.

https://www.fda.gov/consumers/consumer-updates/coronavirus-testing-basics

Q12. Do students coming back from vacation from states on Governor Cuomo’s travel advisory need to quarantine?

A: Yes, students who are coming to New York from any of the states on the travel advisory need to quarantine for 14 days. The most up-to-date list of states is available here. (https://coronavirus.health.ny.gov/covid-19-traveladvisory#restricted-states)

Q13. What qualifies as an exposure to COVID-19?

A: Close contact is defined as being within 6 feet of a person displaying symptoms of or testing positive for COVID-19 for 10 minutes or longer. Close contacts will be required to quarantine. Proximate contact is defined as being in the same enclosed environment such as a classroom or office, but greater than 6 feet from a person displaying symptoms of or testing positive for COVID-19. UCDOH will determine if a proximate contact should be under quarantine.

QUARANTINE & ISOLATION CLARIFICATIONS

Q14. Why is the isolation period for an infected person shorter than the quarantine period of a contact?

A: The time period for incubation is different from the time period of illness and infectiousness. When a person is exposed to COVID-19, it can take anywhere from 2-14 days for the person to develop the disease (incubation), hence the quarantine period is 14 days. Once the disease develops, a person is infectious from 2 days prior to symptoms appearing to, at minimum, 10 days after the symptoms develop, hence the isolation period is at minimum 10 days, but can be longer.
Q15. Can you leave quarantine for a Covid-19 test or does your quarantine start all over after you went out to get that test?

A: Yes, you can leave quarantine for a COVID-19 test; however, during travel to and from testing you should minimize contact with others, wear a mask/face covering, observe distancing and utilize private means for transportation. No, your quarantine period does not re-start. However, even if you test negative, you must continue to quarantine until the full 14 days from the last exposure to a COVID-19 positive individual.

CONTACT TRACING QUESTIONS:

Q16. In the event there is a large exposure, what is the plan if the DOH gets overwhelmed with the case load once school starts?

A: The Ulster County Department of Health has been working in conjunction with the New York State Department of Health on contact tracing, using a joint system for tracking cases and contacts, This system also allows for both the county and state to have increased capacity of contact tracing should it be needed.
Q17. How do those testing positive at sites or who live outside of Ulster County or New York State integrate into the NYSDOH systems?

A. Lab reports from ‘out of jurisdiction’ are transferred and reported to the state/county of residence (of record) of the individual. So for instance, if an Ulster County resident tests at a location in New Jersey, that lab result is reported to the New Jersey Department of Health, who transfers it to New York State Department of Health, and subsequently the Ulster County Department of Health. (Note: please make sure your current phone and address are correct at a testing location, so the results can be reported to the correct jurisdiction and local health department can follow up with communication). NYSDOH obtains lab reports on individuals who do not live (but work) in Ulster County and provides these to UCDOH. Likewise, if a school employee or student lives outside of Ulster County, we will notify the relevant County.

QUESTIONS RELATED TO HOUSEHOLD CONTACTS:

Q18. If a child tests positive and has a sibling in the school, should the school keep the sibling out of school?

A: Yes, unless the siblings reside in separate households, the sibling must be placed on quarantine which would mean that the sibling should not attend school during the required period for quarantine.

Q19. If a student/staff member is home on quarantine and then develops symptoms, please explain how that impacts attendance to school/work and what it means for the siblings that may have been continuing to go to school.

A: If a student or staff tests positive, their household members will likely be considered close contacts and will need to quarantine. Students or staff testing positive will require isolation for a minimum of 10 days

Q20. If someone has to quarantine and has a family member in isolation is it 10 days+14 for the quarantine. Or would it be 4 more days?

A: Determining quarantine periods can vary depending on the particular situation; the specifics will be determined in conversation with the Department of Health case investigators and contact tracers. Here are some sample scenarios (CDC: https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/quarantine.html):

Scenario 1: Close contact with someone who has COVID-19—will not have further close contact.

I had close contact with someone who has COVID-19 and will not have further contact or interactions with the person while they are sick (e.g., co-worker, neighbor, or friend). Your last day of quarantine is 14 days from the date you had close contact.
Scenario 2: Close contact with someone who has COVID-19—live with the person but can avoid further close contact

I live with someone who has COVID-19 (e.g., roommate, partner, family member), and that person has isolated by staying in a separate bedroom. I have had no close contact with the person since they isolated. Your last day of quarantine is 14 days from when the person with COVID-19 began home isolation.

Scenario 3. Under quarantine and had additional close contact with someone who has COVID-19

I live with someone who has COVID-19 and started my 14-day quarantine period because we had close contact. What if I ended up having close contact with the person who is sick during my quarantine? What if another household member gets sick with COVID-19? Do I need to restart my quarantine? Yes. You will have to restart your quarantine from the last day you had close contact.
contact with anyone in your house who has COVID-19. Any time a new household member gets sick with COVID-19 and you had close contact, you will need to restart your quarantine. Date of additional close contact with person who has COVID-19 + 14 days = end of quarantine

Scenario 4: Live with someone who has COVID-19 and cannot avoid continued close contact

I live in a household where I cannot avoid close contact with the person who has COVID-19. I am providing direct care to the person who is sick, don’t have a separate bedroom to isolate the person who is sick, or live in close quarters where I am unable to keep a physical distance of 6 feet. You should avoid contact with others outside the home while the person is sick, and quarantine for 14 days after the person who has COVID-19 meets the criteria to end home isolation. Date the person with COVID-19 ends home isolation + 14 days = end of quarantine

Q21. If a person travels to a state with a mandatory quarantine upon return to NY, but their child, who lives with them, did not travel, does the child also have to quarantine, or can they attend school?
A: No, the child can attend school as long as the traveler in the household remains asymptomatic and does not test positive for COVID-19.

Q22. Does the student have to quarantine if the parent had contact and is quarantining, but does not have symptoms?
A. If a member of the household is quarantining because of either a known exposure to a COVID-19 positive individual or because of travelling, other members of the household can leave the home if that person can quarantine properly from the household members. A quarantined person should:
   • Separate themselves from other members of the household
   • Use a separate bedroom and bathroom
   • Do not share linens, towels, eating utensils, cups and plates
• Limit time in common household areas, such as kitchens.

Q23. What is the timeframe for contract tracing? Will you work with the school immediately? What if we are notified in the evening and siblings may be at school in am.

A: UCDOH will notify relevant school staff upon learning of a positive test for COVID-19 at the school. UCDOH also verifies that individuals reporting a positive COVID test have a positive lab test result in order to proceed with further measures. Labs are required to report to New York State Department of Health any positive test results immediately, and local health departments aim to contact positive individuals within 24 hours of receiving that lab report. Schools should be conducting daily health screenings, including asking whether the child/staff has been in contact with a person who has tested positive.

SHARING OF MEDICAL INFO/PARENTAL PERMISSION

Q24. Do schools need parental permission to send COVID-19 related medical information to DOH?

A: COVID-19 is a reportable communicable disease mandated under the New York State Sanitary Code (10NYCRR 2.10, 2.14), including reporting by schools nurses (10NYCRR 2.12).

https://regs.health.ny.gov/volume-title-10/content/reporting-cases-records

While the Family Educational Rights and Privacy Act (FERPA) generally requires parental permission for school personnel to disclose personally identifiable information from a student’s education record (including health information). But the law provides exceptions allowing disclosure without consent. Under the “health or safety emergency” exception, even though a student’s positive COVID-19 test would be considered personal identifiable information, the school may report this information without parental consent to individuals whose knowledge of the information is necessary to protect the health or safety of students or other individuals. (See 20 U.S.C. § 6 1232g(b)(1)(I); 34 C.F.R. §§ 99.31(a)(10) and 99.36.) These may include public health officials, school administration, trained medical personnel, school staff, and parents. The “health or safety emergency” exception is limited in time to the period of the emergency and generally does not allow for a blanket release of personal identifiable information from student education records.

See also https://studentprivacy.ed.gov/

THRESHOLD QUESTIONS:

Q25. Is there a threshold of infections or absentee rates that would indicate a school should close?

A: The Ulster County Department of Health does not make the decision as to whether a school or classroom should be closed because of COVID-19. That decision rest solely with the school and school
Q26. What parameters/conditions/metrics should we use as an early warning sign that positive cases or absenteeism are increasing beyond an acceptable rate?

A: Generally, schools in regions in Phase IV (which the Mid-Hudson entered on July 7th) can reopen if daily infection rate remains below 5% using a 14-Day Average. Schools will close if regional infection rate raises over 9% after August 1st. (To see the regional rate, go to https://forward.ny.gov/early-warning-monitoring-dashboard)

Q27. With regards to screening, should it be prior to entering the building or before they leave their house?

A: School districts are required to have a protocol in place to perform temperature and health screenings for COVID symptoms. Screenings by the parent/guardian prior to school are preferred. (See the NYSED Reopening Guidance). Symptomatic individuals should not leave their households. Parents/guardians/students should be provided with information explaining the importance of monitoring for symptoms and remaining at home when ever symptoms are recognized.

Q28. Previously, if there was a case, we had to close a building for 24 hours. Is that still the case?

A: Typically, a 24-hour time period may be required for disinfection of an area or building. If disinfection can be conducted overnight or during a weekend disruption of classes could be minimized. The CDC and NYSDOH recommend:

- Closing off areas used by a sick person and not using these areas until after cleaning and disinfection has occurred;
- Opening outside doors and windows to increase air circulation in the area.
- Waiting at least 24 hours before cleaning and disinfection. If waiting 24 hours is not feasible, wait as long as possible;
- Clean and disinfect all areas used by the person suspected or confirmed to have COVID-19, such as offices, classrooms, bathrooms, lockers, and common areas

Q29. A student, faculty member or staff member fails to show up for work on the day scheduled.

A: The individual with an unexcused absence should be screened and asked if they had any COVID-19 like symptoms while absent. If so, they must be quarantined like other symptomatic individuals and contacts of the person absent must be gathered and forwarded to the UCDOH.

Go to the NYSED guidance for more information:
Attachment 3: Criteria for Quarantine of Proximate Contacts in Ulster Combined Schools

Ref: Ulster County School District COVID-19 Mitigation Guidance and Testing and Tracing Plan

Purpose

The purpose of this document is to provide Case Investigators and District Medical Staff with the criteria to determine when a proximate contact to a symptomatic case should be quarantined and the criteria to determine when a proximate contact to a confirmed COVID-19 positive case should be quarantined. The guidelines provide additional clarification to the information in the referenced document, and are based on a point system, where the greater the points the greater the risk to the proximate contact and the more likely the proximate contact will have to be quarantined.

This guidance is for proximate contacts only. Proximate contacts are defined as “being in the same enclosed environment such as a classroom, office, or gatherings but greater than 6 ft from a person displaying symptoms of COVID-19 or is confirmed as a COVID-19 positive case.”

Please note that the criteria for quarantining proximate contacts to a symptomatic case is different than the criteria for quarantining proximate contacts to a confirmed positive individual. This document is divided into two sections: Proximal contacts to a symptomatic or suspected case and Proximate contacts to a confirmed case.

Because quarantining excessive students, staff or faculty will severely degrade school operations unnecessarily, this document will provide guidance to quarantine proximate contacts based on levels of risk. See example.

Five scenarios are considered for determining whether a proximal contact should be quarantined:

1. Classroom setting
2. Bus setting
3. Cafeteria setting
4. Gym class
5. Choir practice

Proximal Contacts to a Symptomatic Case Scenarios

Classroom Setting

A symptomatic case was in classroom within 2 days of their symptom onset date. Proximate contacts to the symptomatic individual should be quarantined if they inhabited the same room during this timeframe and their situation was evaluated as having 4 or more points:
### Assessment Criteria to determine if proximate contact to a symptomatic case in classroom should quarantine

<table>
<thead>
<tr>
<th>Assessment Criteria</th>
<th>Number of Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Case had several events of coughing or sneezing</td>
<td>1 point</td>
</tr>
<tr>
<td>Case was unmasked for 30 minutes cumulative (within the 24-hour period before positive test results or onset of symptoms on a symptomatic individual not yet tested.)</td>
<td>1 (Over 30 minutes – 2 points)</td>
</tr>
<tr>
<td>Case was in the classroom from 30 minutes to an hour</td>
<td>1 point</td>
</tr>
<tr>
<td>Case was in classroom for greater than 90 minutes</td>
<td>2 points</td>
</tr>
<tr>
<td>Proximate contact was unmasked for 30 minutes in the room</td>
<td>1 point (Over 30 minutes – 2 points)</td>
</tr>
<tr>
<td>Proximate individual inhabited a space 6 to 12 linear feet from case for 10 minutes or longer</td>
<td>1 point</td>
</tr>
<tr>
<td>Proximate individual inhabited a space 6 to 12 linear feet from case for 10 minutes or longer but was in front of or behind a privacy guard</td>
<td>Subtract 1 point</td>
</tr>
<tr>
<td>Classroom was not well ventilated (below MER ventilation category 13/poor air exchange/windows or doors not open)</td>
<td>1 point</td>
</tr>
<tr>
<td>Room density less than ~50 ft² per person</td>
<td>1 point</td>
</tr>
<tr>
<td>Room Density greater than ~50 ft² per person</td>
<td>Subtract 1 point</td>
</tr>
</tbody>
</table>

#### Classroom Scenario Example:

Aaron was symptomatic in class for 60 minutes. While he sneezed several times during class, he always had a mask on and was always separated from other students by 6 feet. Ann was in the same class for 60 minutes and had a mask and maintained social distancing. Her desk was 15 linear feet from Aaron’s and the class was well ventilated. Does Ann have to quarantine?

- □ Aaron had several episodes of sneezing – 1 point
- □ Aaron in class for 60 minutes – 1 point
- □ Ann’s desk was 15 feet from Aaron – 0 points
- □ Class well ventilated – 0 points
- □ Total points: 2. Ann is a proximate contact that does not have to quarantine.
School Bus

Proximate individual was on the bus with symptomatic case within 2 days of symptom onset or positive test result. Proximate contacts should be quarantined if their situation was evaluated as having **4 or more points**:

<table>
<thead>
<tr>
<th>Assessment Criteria to determine if proximate contact should quarantine</th>
<th>Number of Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contact was unmasked or masks were not strictly enforced</td>
<td>1 point each</td>
</tr>
<tr>
<td>Case or symptomatic individual had several events of coughing or sneezing</td>
<td></td>
</tr>
<tr>
<td>Proximate Individual located less than 7’ from positive case or symptomatic individual</td>
<td></td>
</tr>
<tr>
<td>Bus windows were closed</td>
<td></td>
</tr>
<tr>
<td>Cumulative* duration (including time waiting on the bus) of bus ride was:</td>
<td>Between 30 – 90 minutes: 1 point 90 minutes or more: 2 points</td>
</tr>
</tbody>
</table>

*Cumulative: if student rides the bus to and from school with same group of people for 2 days while infectious, and the ride is 15 minutes in each direction, cumulative duration = 1 hour

Example of proximate quarantine bus scenario: Jack is symptomatic (coughing) and sits in the back of the bus. Jane sits across the aisle from Jack. Both are wearing masks and do not move around the bus. Bill also masked sits adjacent to Jack but 7 feet away. Bus driver and monitor remain in the front of the bus both masked. Bus ride over 48 hours takes 50 minutes cumulative and no windows were open. Which of the proximate contacts must quarantine?

- Driver/monitor? Bus window closed: 1 point; cumulative ride is 50 minutes - 1 point. Driver and monitor more than 8 feet away - 0 points. Jack was coughing --1 point. Total points 3. Neither driver nor monitor will have to quarantine.
- Bill? Same as above, 3 points. No quarantine.
- Jane? Siting within 7 feet of Jack - 1 point, windows closed – 1 point, cumulative time of ride: 50 minutes - 1 point, Jack coughing - 1 point. Total: 4 points. Jane must quarantine.
Lunchroom/Cafeteria/Eating in Classroom

Proximate individual was in the room with symptomatic case within 2 days of symptom onset for case. Proximate contact should be quarantined if their situation was evaluated as having **3 or more points**:

<table>
<thead>
<tr>
<th>Assessment Criteria to determine if proximate contact should quarantine</th>
<th>Number of Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Proximate individual was between 6 and 12 feet from the case or symptomatic individual for 10 minutes or longer</td>
<td>2 point</td>
</tr>
<tr>
<td>Case or symptomatic individual had several episodes of yelling, coughing, or sneezing with mask on</td>
<td>1 point</td>
</tr>
<tr>
<td></td>
<td>Without mask – 2 points</td>
</tr>
<tr>
<td>Proximate individual inhabited a space 6 to 12 linear feet from case for 10 minutes or longer but was in front of or behind a privacy guard</td>
<td>Subtract 1 point</td>
</tr>
<tr>
<td>Room Density greater than ~50 ft(^2) per person</td>
<td>Subtract 1 Point</td>
</tr>
<tr>
<td>Room Density less than ~50 ft(^2) per person</td>
<td>1 Point</td>
</tr>
<tr>
<td>Proximate individual remained in the room with the case or symptomatic individual for greater that 30 minutes</td>
<td>1 point</td>
</tr>
</tbody>
</table>

Gym Class

Proximate student was in gym class with a symptomatic individual within 2 days of symptom onset. Proximate contacts should be quarantined if their situation was evaluated as having **4 or more points**:

<table>
<thead>
<tr>
<th>Assessment Criteria to determine if proximate contact should quarantine</th>
<th>Number of Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Proximate individual shared a locker room or changing space with symptomatic individual</td>
<td>1 point</td>
</tr>
<tr>
<td>Proximate contact was within 6-12 linear feet of case or symptomatic individual for 10 minutes or more</td>
<td>1 point</td>
</tr>
<tr>
<td>Positive or Symptomatic individual was not wearing a mask</td>
<td></td>
</tr>
<tr>
<td>Proximate student was not wearing a mask</td>
<td></td>
</tr>
<tr>
<td>Positive or Symptomatic individual had several episodes of sneezing or coughing</td>
<td>1 point each</td>
</tr>
<tr>
<td>Proximate and positive case/symptomatic individual engaged in a high energy activity which lead to rapid, heavy breathing or perspiration</td>
<td></td>
</tr>
<tr>
<td>Proximal contact shared unsanitized gym supplies</td>
<td></td>
</tr>
</tbody>
</table>
Choir practice

Proximate student was in choir practice with a symptomatic individual within 2 days of symptom onset. Proximate contacts should be quarantined if their situation was evaluated as having **4 or more points:**

<table>
<thead>
<tr>
<th>Assessment Criteria to determine if proximate contact should quarantine</th>
<th>Number of Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Positive or symptomatic individual was not wearing a mask</td>
<td></td>
</tr>
<tr>
<td>Proximate student was not wearing a mask</td>
<td></td>
</tr>
<tr>
<td>Positive or symptomatic individual sneezed or coughed several times</td>
<td>1 point each</td>
</tr>
<tr>
<td>Choir practice lasted from more than 30 minutes</td>
<td></td>
</tr>
<tr>
<td>Choir members share equipment such as microphones</td>
<td></td>
</tr>
<tr>
<td>Poor ventilation</td>
<td></td>
</tr>
<tr>
<td>Choir members practiced singing face to face</td>
<td></td>
</tr>
<tr>
<td>Member practiced within 12 feet separation</td>
<td>2 points</td>
</tr>
</tbody>
</table>

**Proximate Contact to a COVID-19 Positive Case Scenarios**

Note, a proximate contact to an individual 48 hours or less before he or she is confirmed positive for COVID-19 will have to quarantine in both an indoor classroom setting and a bus setting.

Lunchroom/Cafeteria

Proximate individual was in the room within 2 days of symptom onset for the case, or with within 2 days of positive test if asymptomatic. Proximate contact should be quarantined if their situation was evaluated as having **3 or more points:**

<table>
<thead>
<tr>
<th>Assessment Criteria to determine if proximate contact should quarantine</th>
<th>Number of Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Proximate individual was between 6 and 12 feet from the case for 10 minutes or longer</td>
<td>2 point</td>
</tr>
<tr>
<td>Case or symptomatic individual had several episodes of yelling, coughing, or sneezing with mask on</td>
<td>1 point Without mask – 2 points</td>
</tr>
<tr>
<td>Proximate individual remained in the room with the case for greater that 30 minutes</td>
<td>1 point</td>
</tr>
<tr>
<td>Room density greater than ~50 ft$^2$ per person</td>
<td>Subtract 1 Point</td>
</tr>
<tr>
<td>Proximate individual inhabited a space 6 to 12 linear feet from case for 10 minutes or longer but was in front of or behind a privacy guard</td>
<td>Subtract 1 point</td>
</tr>
</tbody>
</table>
Gym Class

Proximate student was in gym class with positive case within 2 days of symptom onset, or within 2 days of positive test if asymptomatic. Proximate contacts should be quarantined if their situation was evaluated as having **4 or more points:**

<table>
<thead>
<tr>
<th>Assessment Criteria to determine if proximate contact should quarantine</th>
<th>Number of Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Proximate individual shared a locker room or changing space with symptomatic individual</td>
<td>1 point</td>
</tr>
<tr>
<td>Proximate contact was within 20 linear feet of case for 10 minutes or more</td>
<td>1 point</td>
</tr>
<tr>
<td>Room density less than ~200 ft² per person</td>
<td>1 point</td>
</tr>
<tr>
<td>Positive case was not wearing a mask</td>
<td>2 points</td>
</tr>
<tr>
<td>Positive had several episodes of sneezing or coughing</td>
<td>1 point</td>
</tr>
<tr>
<td>Proximate and positive case engaged in a high energy activity which lead to rapid, heavy breathing or perspiration</td>
<td></td>
</tr>
<tr>
<td>Proximal contact shared unsanitized gym supplies</td>
<td></td>
</tr>
</tbody>
</table>

Choir practice:

Proximate student was in choir practice with a positive case within 2 days of symptom onset or positive test. Proximate contacts should be quarantined if their situation was evaluated as having **4 or more points:**

<table>
<thead>
<tr>
<th>Assessment Criteria to determine if proximate contact should quarantine</th>
<th>Number of Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Positive or symptomatic individual was not wearing a mask</td>
<td></td>
</tr>
<tr>
<td>Proximate student was not wearing a mask</td>
<td></td>
</tr>
<tr>
<td>Positive or symptomatic individual sneezed or coughed several times</td>
<td></td>
</tr>
<tr>
<td>Choir practice lasted from more than 30 minutes</td>
<td></td>
</tr>
<tr>
<td>Choir members share equipment such as microphones</td>
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</tr>
<tr>
<td>Poor ventilation</td>
<td></td>
</tr>
<tr>
<td>Choir members practiced singing face to face</td>
<td></td>
</tr>
<tr>
<td>Member practiced within 12 feet separation</td>
<td></td>
</tr>
<tr>
<td>Positive or symptomatic individual was not wearing a mask</td>
<td>2 point each</td>
</tr>
<tr>
<td>Proximate student was not wearing a mask</td>
<td></td>
</tr>
<tr>
<td>Positive or symptomatic individual sneezed or coughed several times</td>
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<td>Choir practice lasted from more than 30 minutes</td>
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<td></td>
</tr>
<tr>
<td>Member practiced within 12 feet separation</td>
<td>2 points</td>
</tr>
</tbody>
</table>

Any questions or comments, please contact Dan Proctor, Director, UCDOH COVID-19 Operations Division dpro@co.ulster.ny.us or via cell: 917.796.5390.