

**Guidance for K-12 School Operations for In-Person Learning:  
Layered Prevention Strategies  
January 10, 2022**

Schools are an essential part of community infrastructure and the continuation of in-person instruction for K-12 students is a priority. The purpose of this document is to provide information on prevention strategies that help protect students, teachers, and staff and slow the spread of COVID-19 in K-12 schools based on updated [CDC guidelines](#). This guidance emphasizes the implementation of layered prevention strategies to protect students, teachers, and staff and is intended to help school administrators and local health officials select appropriate, layered prevention strategies in their communities.

Prevention strategies

SARS-CoV-2 transmission in K-12 schools is largely influenced by disease incidence in the community and evidence from the 2020-2021 school year suggests K-12 schools can safely open for in-person instruction when layered prevention strategies are implemented. Decisions around the implementation of layered prevention strategies in the school community should be made collaboratively by local public health officials and school administrators. Factors that should be considered include:

- Level of [community transmission of COVID-19](#) and occurrence of outbreaks in the school or community.
- [COVID-19 vaccination coverage in the community](#) and among students, teachers, and staff.
- Frequency and use of a SARS-CoV-2 testing screening program for students, teachers, and staff who are not fully vaccinated.
- Ages of children served by the schools and associated social and behavioral factors that may affect the risk of transmission and feasibility of different prevention strategies.

Full implementation of all layers of protection is recommended when sustained [incidence of COVID-19 in a community](#) is substantial or high (orange or red). If any of the prevention strategies are removed for a school based on local conditions, they should be removed one at a time and increases in COVID-19 cases should be closely monitored. Schools should clearly communicate their strategies and anticipated changes in plans. community. The recommended layered prevention strategies include:

1. Vaccination

- **Promote and offer vaccination** to help increase the proportion of students (5 years of age or older), teachers, staff, and family members who are vaccinated by:
  - Encouraging students, teachers, staff, and family members to stay [up-to-date](#) on COVID-19 vaccinations.
  - Providing on-site vaccination or [hosting vaccination clinics at schools](#).
  - Working with local partners to offer vaccination to eligible students and family members during pre-sport/extracurricular activity summer physicals.
  - Providing information to families about vaccine safety and availability in the community.

## 2. Masks

**All persons  $\geq 2$  years of age should wear masks or face coverings while indoors** in all classroom and non-classroom settings, including buses operated by public and private school systems, unless otherwise exempted (e.g., cannot wear a mask due to disability), regardless of COVID-19 vaccination status. Masks should be required in compliance with federal, state, local, and organization regulations, including the [CDC](#), the [Kentucky Department for Education](#) and the Kentucky Board of Education. Operators of school buses should refer to the [U.S. Department of Education's COVID-19 Handbook](#) for additional guidance. A driver does not need to wear a mask if they are the only person on the bus.

- **In general, people do not need to wear masks when outdoors**, though mask use may be considered in outdoor settings that involve sustained close contact with other people who are not up-to-date with vaccination.

## 3. Physical distancing

- **Physical distancing of at least 3 feet is recommended** between K-12 students in classrooms. To the greatest extent practicable, schools should reduce the number of students in each classroom, turn desks to face the same direction, utilize assigned seating, and remove nonessential furniture. Maximize physical distancing for unvaccinated persons who are eating meals indoors. Students should not be excluded from in-person learning to keep a minimum distance requirement.
- **Physical distancing of at least 6 feet is recommended between students and teachers/staff.**
- **Utilize cohorts or pods** (a stable group with fixed membership that stays together through activities) as an additional strategy that facilitates more efficient contact tracing and minimizes opportunities for transmission, especially when it is challenging to maintain physical distancing (e.g., young children) or when other layered prevention strategies are discontinued.

## 4. Screening testing

- **Implement screening testing** for unvaccinated students, teachers, and/or staff to help promptly identify and isolate cases and to guide the use of layered prevention strategies in the school. [Screening testing](#) can be considered for unvaccinated individuals participating in sports, extracurricular activities, or other activities with elevated risk of COVID-19 transmission (e.g., singing, shouting, playing wind instruments). Screening testing can also be implemented when known exposures to COVID-19 have occurred in the school setting. Regular use of a screening testing program should be considered when other layered prevention strategies are discontinued and/or when [community transmission of COVID-19](#) is substantial or high. In general, persons who are up-to-date with their COVID-19 vaccinations should be exempted from a screening testing program. Testing should be conducted with informed consent from the appropriate person or parent/guardian.

## 5. Ventilation

- **Improve facility ventilation** to the greatest extent possible to increase circulation of outdoor air and increase delivery of clean air. Utilize outdoor spaces, where possible.

## 6. Handwashing and respiratory etiquette

- **Teach and reinforce handwashing** with soap and water for 20 seconds or use of hand sanitizer containing at least 60% alcohol. Ensure adequate supplies and opportunities for hand hygiene.

## 7. Isolation

- **Ensure sick students, teachers, or staff stay home** if they have fever and/or symptoms of COVID-19, including:
  - Fever ( $\geq 100.4^{\circ}\text{F}$ ) or feeling feverish (e.g., chills, sweating)
  - New cough
  - Difficulty breathing
  - Sore throat
  - Muscle aches or body aches
  - Vomiting or diarrhea
  - New loss of taste or smell
- **Ensure persons who test positive for COVID-19 self-isolate** away from school for:
  - **At least 5 full days from the day that their symptoms started if they are experiencing symptoms of COVID-19.** The first day of symptoms is considered day 0. The individual may return to school after 5 days when their symptoms are fully resolved or after 10 days even if they have lingering symptoms. The individual must continue to wear a well-fitting mask for 10 full days at all times when around others indoors. If the individual is unable to wear a mask properly and consistently in indoor school settings, they should self-isolate from school for 10 full days.
  - **5 full days from the date of testing if they have never developed symptoms.** The day of testing is considered day 0. The individual must continue to wear a well-fitting mask for 10 full days at all times when around others indoors. If the individual is unable to wear a mask properly and consistently in indoor school settings, they should self-isolate from school for 10 full days. If the individual develops symptoms of COVID-19, they should follow the above isolation guidance for someone with symptoms.

COVID-19 test results that involve use of an “at-home” test kit and for which the specimen collection is not monitored by a trained healthcare provider and the test is not conducted by a CLIA-certified laboratory are not reportable to public health. Individuals who test positive for COVID-19 through an “at-home” test should be recommended to self-isolate and follow the above isolation protocols.

- **Direct sick persons to isolate at home away from school.** Sick students, teachers, or staff who are not tested for COVID-19 may return when their symptoms resolve. Consider implementing a program to offer on-site rapid COVID-19 testing for sick students, teachers, or staff.

## 8. Quarantine and contact tracing

- **In school settings with universal use of masking:**
  - Individuals do not need to quarantine following at-school exposures to a person diagnosed with COVID-19 if they are not experiencing symptoms, but are recommended to be tested 5-7 days after a known at-school exposure. Schools should notify families when a possible exposure to COVID-19 occurs in the classroom.
  - The following individuals should quarantine following an exposure to a person diagnosed with COVID-19 occurring outside of school (e.g., household member):
    - Persons of any age who have not completed their primary COVID-19 vaccine series  $\geq 14$  days prior to the exposure.
    - Persons 18 years of age and older who are not up-to-date with their recommended COVID-19 vaccinations.

- **In school settings without universal use of masking:**
  - Schools should identify individuals who have had close contact with a person diagnosed with COVID-19 in the school setting. A close contact is someone who was within 6 feet of an infectious person for a cumulative total of 15 minutes in a 24-hour period while the person was considered contagious.
    - **Exception:** In the K-12 indoor classroom setting, the close contact definition excludes students who were at least 3 feet away from an infected student if both students were engaged in consistent and correct use of masks and other K-12 prevention strategies were in place. This exception does not apply to teachers, staff, or other adults in the indoor classroom setting.
  - The following individuals should quarantine following an exposure to a person diagnosed with COVID-19 occurring at-school or outside of school (e.g., household member):
    - Persons of any age who have not completed their primary COVID-19 vaccine series >14 days prior to the exposure.
    - Persons 18 years of age and older who are not up-to-date with their recommended COVID-19 vaccination
- **Quarantine may be discontinued:**
  - After day 5 if the individual is 1) symptom-free and; 2) receives a negative COVID-19 test on day 5 or later after the last date of exposure to the case and; 3) is able to wear a well-fitting mask indoors and in public settings for 10 full days from the last exposure; or
  - After day 10 if the individual is symptom-free and does not receive COVID-19 testing. Individuals who cannot wear a well-fitting mask consistently and properly should quarantine for the full 10 days.

The last day of exposure to the case is considered day 0. If the individual is continually exposed to COVID-19 (i.e., a household member that they are unable to isolate away from) then the last day of exposure is the last day that the case is considered infectious (day 5-10, determined by the individual's last day of symptoms).

- **Modified quarantine using a “Test to Stay” strategy** may be an option available to individuals who are otherwise instructed to quarantine who 1) are asymptomatic; and 2) receive negative COVID-19 testing following the KDPH recommended protocol.
- **The following persons do not need to quarantine** following an exposure to a person diagnosed with COVID-19 if they are not experiencing symptoms, but are recommended to be tested 5 days or more after an exposure and to wear a well-fitting mask indoors for 10 full days:
  - Students 5-17 years of age who have completed their primary COVID-19 vaccine series >14 days prior to the exposure.
  - Persons 18 years of age and older who are up-to-date with their recommended COVID-19 vaccinations.
  - Persons who have documented COVID-19 illness in the 3 months prior to their exposure (with a positive COVID-19 PCR or antigen test). Antibody testing should not be used for determining need to quarantine; per the [FDA](#), results from currently-authorized SARS-CoV-2 antibody tests should not be used to evaluate a person's level of immunity or protection from COVID-19.

### 9. Cleaning and disinfection

- **Improve facility cleaning** to the greatest extent possible. In general, cleaning once a day is enough to sufficiently remove potential virus that may be on surfaces. Consider cleaning high-touch, shared surfaces more frequently.

### Additional recommendations

- Nonessential visitors, volunteers, and activities with people who are not fully vaccinated should be limited, particularly when there is moderate-to-high (orange or red) COVID-19 transmission in the community.
- Layered prevention strategies for school-sponsored sports and extracurricular activities should be implemented and continued from the 2020-21 school year based on guidance from the [KHSAA](#). Fully vaccinated persons do not need to physically distance but are recommended to wear a mask in indoor settings when [community transmission](#) is substantial or high (orange or red). Students who are not fully vaccinated and participate in indoor sports or other indoor higher-risk activities are recommended to continue wearing masks and keeping physical distance as much as possible. Schools should consider using screening testing for student athletes and adult participants who are not fully vaccinated.