



**Public Health**  
Prevent. Promote. Protect.

**Champaign-Urbana Public Health District**



## **Guidance Document and Best Practice Recommendations for Pre-K -12 Grade**

Champaign-Urbana Public Health District (CUPHD) developed this document to provide pre-K through grade 12 (K-12) school leaders, families, teachers and staff guidance around policies, practices, and strategies that districts and schools must implement and recommendations they should consider to optimize education and promote health and safety, while mitigating risk throughout the school year. Use this guidance document in combination with the additional guidance provided by the [Illinois State Board of Education](#), which includes both strategies for implementation of health guidance in schools, as well as other non-health related considerations for the 2020-21 school year.

This guidance document will likely be revised as the COVID-19 response evolves throughout the summer and into the fall/winter.

Ideally schools will offer a variety of options for students, teachers and staff so that individual decisions can be made related to risk tolerance (personal health concerns/household health concerns and school-specific plans).

**CUPHD's COVID-19 Hotline: 217-239-7877 [coronavirus@c-uphd.org](mailto:coronavirus@c-uphd.org)**

## DEFINITIONS

**Best Practice:** These practices are foundational to minimizing the risks of exposure to COVID-19 for students, staff, and families. These practices are considered the minimum level of implementation, and schools may not be less restrictive to prevent an outbreak of COVID-19 within the schools (ie Spacing people within 6 feet of others, even while masked, will not prevent exposure. If persons are within 6 feet of a positive case, they will be excluded from school and quarantined).

**Recommended:** health practices are additional strategies that schools may choose to use to minimize the spread of COVID-19. We recognize there are diverse learning environments that will require teams to use thoughtful strategies when applying guidance to meet the health and safety needs of all students and staff. Not all recommended practices will be possible in all settings, and therefore should be tailored as appropriate.

**Case:** A person with a laboratory-confirmed COVID-19 infection.

**Close Contact:** A person who was within 6 feet, for at least 15 minutes, of the case during their infectious period.

**Case Investigation:** The process of interviewing the case, gathering demographic information and determining close contacts during the infectious period.

**Isolation:** Isolation is used to separate people who have tested positive for COVID-19 (those who are sick and those with no symptoms) from people who are not currently infected. People who are in isolation are required to stay home until they are no longer infectious and CUPHD has released them from isolation.

**Quarantine:** The practice of isolating individuals who have had an exposure (close contact with a COVID-19 case) to determine whether they develop symptoms of the disease. For COVID-19 this period is 14 days.

**Contact Tracing:** The practice of notifying all persons who have been listed as “close contacts” so they can get tested and quarantine. This will be conducted by CUPHD employees. All personal information is confidential.

**Symptomatic:** Exhibiting signs of illness (fever, shortness of breath, fatigue, loss of taste or smell, etc.).

**Asymptomatic:** Not exhibiting signs of illness. COVID-19 can be transmitted up to 48 hours before a person shows symptoms.

**Local Health Authority:** Champaign-Urbana Public Health District & Champaign County Public Health Department. <https://ilga.gov/commission/jcar/admincode/077/077006900113100R.html>

**The more people a student or staff member interacts closely with, and the longer that interaction, the higher the risk of COVID-19 spread. It is important for teachers and staff to not gather together for meetings, trainings etc. without social distancing and masks.**



**Risk of COVID-19 spread increases in school settings as follows:**

- **No risk:** Students and teachers engage in online-only, virtual classes, activities, and events.
- **Minimal Risk:** Combination of virtual and small, in-person classes, activities, and events. Students and teachers with underlying health conditions are not physically in school. Maintain social distancing and masking at all times. Activities that take place outdoors are generally safer than indoor activities.
- **Moderate Risk:** Small to medium in person classes. Groups of students stay together and with the same teacher throughout/across school days and groups do not mix. Students remain at least 6 feet apart, wear face coverings and do not share objects
- **Highest Risk:** Full sized, in-person classes, activities, and events. Students are not spaced apart, not masked, share classroom materials or supplies, and mix between classes and activities.

**CUPHD IS YOUR BACK-TO-SCHOOL PARTNER!**

## Best Practices:

1. Everyone must maintain AT LEAST 6 feet minimum distance from others at all times:
  - a. Transportation
  - b. Classrooms
  - c. Bathrooms
  - d. Lunch
  - e. Recess
  - f. Hallways
  - g. Resource Classes
  - h. Emergency Drills
  - i. Special consideration should be made for discipline—what happens when a student needs to be removed from a class setting?
  
2. Masks/face coverings do not replace social distancing. Face coverings must be worn at all times—even when social distancing is being maintained. Teach and reinforce use of cloth face coverings. Face coverings may be challenging for students (especially younger students) to wear in all-day settings such as school. Face coverings should be worn by staff and students (particularly older students) as feasible, and are most essential in times when physical distancing is difficult. Individuals should be frequently reminded not to touch the face covering and to wash their hands frequently. Information should be provided to staff, students, and students’ families on proper use, removal, and washing of cloth face coverings.
  - a. Note: Cloth face coverings should **not** be placed on:
    - i. Children younger than 2 years old
    - ii. Anyone who has trouble breathing or is unconscious
    - iii. Anyone who is incapacitated or otherwise unable to remove the cloth face covering without assistance
  
  - b. Cloth face coverings are meant to protect other people in case the wearer is unknowingly infected but does not have symptoms. Cloth face coverings are not surgical masks, respirators, or other medical personal protective equipment.
  
  - c. Face shields may be used by teachers that are teaching at the front of the class, at least 6 feet away from students or by children that cannot medically tolerate a face covering.
  
3. Some children and staff may be at higher risk for severe illness because of underlying health conditions or a weakened immune system. Public Health advises implementation of e-learning plans for these individuals. Students and staff who have, or live with someone who has, the following high risk medical conditions should strongly consider not returning to in-person school and use e-learning services to the greatest extent possible:

- a. Older adults (65+)
- b. People of any age with the following conditions are at increased risk of severe illness from COVID-19:
  - i. Cancer
  - ii. Chronic kidney disease
  - iii. COPD (chronic obstructive pulmonary disease)
  - iv. Immunocompromised state (weakened immune system) from solid organ transplant
  - v. Obesity (body mass index [BMI] of 30 or higher)
  - vi. Serious heart conditions, such as heart failure, coronary artery disease, or cardiomyopathies
  - vii. Sickle cell disease
  - viii. Type 2 diabetes mellitus
- c. Children who are medically complex, who have neurologic, genetic, metabolic conditions, or who have congenital heart disease are at higher risk for severe illness from COVID-19 than other children.
- d. Based on what we know at this time, people with the following conditions might be at an increased risk for severe illness from COVID-19:
  - i. Asthma (moderate-to-severe)
  - ii. Cerebrovascular disease (affects blood vessels and blood supply to the brain)
  - iii. Cystic fibrosis
  - iv. Hypertension or high blood pressure
  - v. Immunocompromised state (weakened immune system) from blood or bone marrow transplant, immune deficiencies, HIV, use of corticosteroids, or use of other immune weakening medicines
  - vi. Neurologic conditions, such as dementia
  - vii. Liver disease
  - viii. Pregnancy
  - ix. Pulmonary fibrosis (having damaged or scarred lung tissues)
  - x. Smoking
  - xi. Thalassemia (a type of blood disorder)
  - xii. Type 1 diabetes mellitus

***Individuals should consult their healthcare provider for additional guidance on specific risks.***

COMPLETE LIST: This may change as information evolves.

[https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-with-medical-conditions.html?CDC\\_AA\\_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fneed-extra-precautions%2Fgroups-at-higher-risk.html](https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-with-medical-conditions.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fneed-extra-precautions%2Fgroups-at-higher-risk.html)

4. Designate a person or team of people responsible for symptom checking. All students, staff, and essential visitors should self-certify that they are symptom free. This should be done BEFORE they enter the building.
5. If a student/staff exhibits symptoms during the school day, they should be immediately removed from class and placed somewhere completely away from other people. A place to isolate a student or staff needs to be identified prior to classes starting. Consider how you would monitor the child safely. Students should remain there until they are able to be transported home by their parent/guardian. Communicate with the parents by phone and limit time they are in the school. Suggest only one parent, wearing a mask, enter the school for pick up.
6. Ensure handwashing strategies include handwashing with soap and water for at least 20 seconds or using a hand sanitizer that contains at least 60% alcohol if soap and water are not available. Encourage frequent handwashing. *Germ Buster* DVDs (for pre-K-5) are available from CUPHD by calling 217-239-7877.
7. CUPHD must have contact information (email & 24/7 phone number) for at least 2 district staff—preferably the district Nurse and Superintendent or their designees to contact for COVID -related questions and to report cases.

## Recommended Health & Safety Practices

- Consider encouraging families that have the ability to keep their child at home where they can participate in successful e-learning to choose this option in order to free-up room for students who cannot as easily learn at home.
- Emphasize common-sense preventative actions for students and staff. For example, emphasize staying at home when sick; appropriately covering coughs and sneezes; washing hands routinely; social distancing and wearing face coverings.
- Students, teachers or staff who have traveled outside of Illinois, or to areas in IL with increased COVID transmission, should go for testing the day they return and 4 days after the first test.
- Strongly encourage influenza (flu) vaccines for all persons over 6 months of age.
- Limit all non-essential persons from entering the facility (e.g., interns, volunteers, presenters, etc.)
- Consider cancelling extracurricular group activities and large events of more than 50 people.
- Cohorting Students:
  - Group students into smaller cohorts and keep these same groups together every day. This will help reduce the number of exposures if one student does contract COVID.

- If possible, keep cohorts separated in separate rooms. These groups should stay together for meals, snacks, rest and play periods.
- Staff should stay with the same cohort of children.
- Students in a cohort should still maintain a 6-foot distance from each other, mask, and should keep entirely separate from other cohorts.
- Keep recesses, lunch and snack breaks, and other group activities separated by cohort, and keep children 6 feet apart.

**Prevention is key for containing COVID-19.**

**Schools cannot prevent a teacher, staff, student, parent or vendor with COVID from coming into your school, but you CAN prevent an outbreak. Make sure to always insist on face coverings and distancing of at least 6 feet at all times, even after school hours.**

**What happens if a student, staff or teacher tests positive for COVID-19?**

Champaign-Urbana Public Health District will have a staff person, a *School COVID Liaison*, designated to work with all schools in Champaign County. Following the case investigations, CUPHD’s school COVID liaison will reach out to the school district’s point of contact. Guidance and assistance will be provided specific to each case and situation. The following is a general description of how CUPHD investigates and mitigates a case of COVID-19.

**Case Investigation:**

All positive COVID-19 test results of individuals living in Champaign County are reported by laboratories to the Champaign-Urbana Public Health District. Each person who tests positive is a COVID-19 “case.” One of CUPHD’s Case Investigators reaches out to each case by phone for a detailed interview. In the case of minors, CUPHD will reach out to their parent or guardian.

During the interview, we ask questions including age, gender-assigned-at-birth, racial identity, the course of the disease so far, and all possible sources of exposure within the 14 days prior to becoming ill and while symptomatic. The interview also focuses on working with the case to determine any other people who may have been exposed by the case during their infectious period. These people are called “close contacts” and will be placed in quarantine. The case may have had contact with these people at home, at work, or in the community. A close contact is someone a case reports spending 15 or more minutes within 6 feet of the case during the two days before they became ill or while symptomatic.

Cases are put into Isolation. Isolation is used to separate people who have tested positive for COVID-19 (those who are sick and those with no symptoms) from people who are not currently infected. People who are in isolation are required to stay home until it's safe for them to be around others and CUPHD has released them from isolation. They should not leave their home

for any reason except to seek emergency medical care. Confirmed cases must be isolated for a minimum of 10 days after symptom onset (or testing date if they are asymptomatic). This timeframe could be extended depending on their symptoms. CUPHD follows each case daily during their isolation to determine if isolation should be extended.

CUPHD discusses the medical situation with the individual, provides information about how to safely isolate at home, and links them to care if needed. Confirmed cases and close contacts are offered wrap around services (groceries, masks, thermometers, prescription drug pick-up, etc.) so they can successfully remain in isolation and prevent transmission to others.

### Contact Tracing:

Anyone who was identified as being in close contact with a confirmed case is now considered a “contact.” The number of close contacts a person has depends on what type of activities they do and their household size. A member of our Contact Tracing team then uses the phone (and other means if available) to reach each of those contacts. Public Health notifies the close contacts of their potential exposure and refers them to get tested, even if they don’t have symptoms. If their test result comes back positive, they will then be switched to a positive case and be put in isolation. If their test is negative, they still need to remain in quarantine for the entire 14 days.

For the next two weeks, the contact needs to quarantine. Public Health has a system through which a Contact Tracer will call or text each contact daily to monitor how they are doing medically, if they are staying in quarantine, and to see if they need anything like groceries to help them stay at home.

## Considerations for preparing for a COVID-19 case in your school

- Communicate with students, families and staff that any individual who tests positive or shows any signs of symptoms or illness should **stay home**. Known symptoms of COVID include:
  - Fever, cough, shortness of breath or difficulty breathing, chills, fatigue, muscle/body aches, headache, sore throat, new loss of taste or smell, congestion, runny nose, nausea, vomiting, or diarrhea.
- CUPHD will notify the Point of Contact (see #6 under “Best Practices”) if there is a student/staff who is a positive case who attended school during their infectious period. If the student/staff did not attend school during their infectious period, you will not be contacted.
- Close off any of the areas previously used by the sick person, and do not use until after proper cleaning and disinfection procedures have been completed. List of Approved disinfectant : <https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2-covid-19>

Open windows to increase air circulation in the area. Wait 24 hours before cleaning and disinfecting. Clean and disinfect all areas such as offices, bathrooms, common areas, shared equipment, etc. Vacuum space with a vacuum that has a HEPA filter. Temporarily turn off room fans and the central HVAC system that services the room/spaces so that particles will not circulate throughout the facility.

- Communicate with your staff, students/families; let them know there was a positive case and that CUPHD is investigating to identify possible exposures (close contacts). We may ask you for help with this—class lists, attendance, etc. *Please have these ready as speed is crucial to contact tracing and containment.*
- If a student/faculty/staff is identified as a close contact, they will be contacted by CUPHD and placed in quarantine.
- CUPHD will communicate with the school district's Point of Contact as to when students/staff in isolation and quarantine can return to school. CUPHD needs TWO contacts per school district. We need cell phone numbers and emails for the person(s) responsible for contacting the relevant people in each school. These calls may come on evenings or weekends.

### Resources

See ISBE's FAQs: <https://www.isbe.net/Documents/FAQ-Part-3-Transition-Guidance.pdf>

CUPHD-Guidance and local case data: [www.c-uphd.org](http://www.c-uphd.org)

IL Department of Public Health Regional metrics: <https://dph.illinois.gov/regionmetrics>

IL Department of Public Health County metrics: <https://dph.illinois.gov/countymetrics>

CDC Communication Resources: <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/index.html>

CUPHD Germ Busters: <https://www.c-uphd.org/germ-busters.html>

