August 2021

Dear Erie County School Leaders:

We all have words to describe what this last 18 months have meant to us… Challenging; Incredible; Painful. Now as we look to the start of another school year – the third school year impacted by COVID-19 – we do so locally with an eye towards ensuring the safe operations of Erie County schools. In a time of great uncertainty, please consider the Erie County Department of Health as your devoted partner in reducing the risks of COVID-19 among your students and staff.

Our department compiled the recommendations in this document to provide you and your administrative teams with credible, useful guidance as you develop plans and policies for the upcoming school year.

We greatly appreciate the suggestions that Erie County school leaders shared with our department as we assembled this guidance. As on-the-ground, educational experts, these insights were invaluable to us. This document reflects the information that we have available at the time of this writing. It also represents our most sincere effort to give schools and school leaders the tools to offer the children and youth in Erie County a safe, healthy learning environment.

As we have learned throughout the COVID-19 pandemic, guidance and recommendations may change as new data and information emerge. On behalf of our office of epidemiology and our entire department, thank you for all you do for the young people of Erie County.

Sincerely,

Gale R. Burstein, MD, MPH, FAAP
Erie County Commissioner of Health
The goals of the Erie County Department of Health (ECDOH) in issuing this guidance are to return all students to an in-person learning experience, while also ensuring the safety of all students, faculty, and staff by reducing the risks of COVID-19 disease transmission in school settings, and maximizing staff and student time in classroom settings and extracurricular activities during the 2021-2022 school year. This guidance applies to public and private elementary (including pre-kindergarten), middle, and high schools in Erie County. PK-grade 12 schools are also required to follow all applicable New York State guidance for their facilities and programs. This guidance is subject to change.

1. Masking

When teachers, staff, and students consistently and correctly wear a mask, they protect others as well as themselves. Consistent and correct mask use is especially important indoors and in crowded settings, when physical distancing cannot be maintained.

A. Indoors

ECDOH requires indoor masking for all individuals age 2 years and older, including students, teachers, staff, bus drivers, bus aides, vendors, and visitors, regardless of vaccination status. Appropriate masks must be worn at all times in all classroom and non-classroom settings, including but not limited to hallways, school offices, restrooms, gyms, locker rooms, auditoriums, etc. Students may remove their mask during meals as long as they sit 6 feet apart to the extent possible, but no less than 3 feet, and a seating chart is kept. Unvaccinated individuals who are within 6 feet unmasked at meals may be considered close contacts and would be subject to quarantine. Acceptable masks must be two layers of materials and may be cloth-based or surgical masks that cover both the mouth and nose. Bandanas, gators, and clear face shields are not considered acceptable face coverings.

B. Outdoors

ECDOH strongly recommends but does not require masks outdoors. However, protocols and procedures should be maintained for students, faculty, and staff to ensure maximized physical distancing to protect against the transmission of the COVID-19 virus on school grounds, especially when masks are not being worn outside.

C. Bus Transportation

ECDOH requires bus drivers, bus aides, staff, and students to wear a mask at all times while on school buses, including on buses operated by public and private school systems and private vendors, regardless of vaccination status.
D. Mask Breaks

Mask breaks may be taken by students once every hour for approximately 5 minutes. Students should be seated and stationary at their desks during mask breaks. If students are seated closer than 6 feet, stagger breaks so that students closer than 6 feet are not taking breaks at the same time.

E. Exceptions

Persons who cannot safely wear a mask because of a disability or medical condition should work with the school for a reasonable accommodation. Schools may require written documentation of a medical or physical condition from a physician or licensed medical provider before providing an exception.

Exceptions can be made for the following categories of people:

- A person who cannot wear a mask, or cannot safely wear a mask, because of a disability as defined by the Americans with Disabilities Act (ADA) (42 U.S.C. 12101 et seq.). Discuss the possibility of reasonable accommodation with workers who are unable to wear or have difficulty wearing certain types of masks because of a disability.
- A person for whom wearing a mask would create a risk to workplace health, safety, or job duty as determined by the relevant workplace safety guidelines or federal regulations.

2. Physical Distancing

Several studies from the 2020-2021 school year show low COVID-19 transmission levels among students in schools that had less than 6 feet of physical distance when the school implemented and layered other prevention strategies, such as the use of masks.

A. Students in Classroom Setting

ECDOH strongly recommends schools to maintain at least 3 feet of physical distance between students within classrooms combined with mask wearing, to reduce transmission risk, regardless of vaccination status. When determining close contact status following an exposure within a classroom, unvaccinated students within 3 feet from the positive COVID-19 case for a cumulative total of 15 minutes or more over a 24-hour period during a time the case was infectious will be quarantined regardless if masks were worn. As per Centers for Disease Control and Prevention (CDC) guidelines, fully vaccinated individuals who are identified as close contacts are not subject to quarantine.

B. Teachers/Staff

ECDOH strongly recommends schools to maintain at least 6 feet of physical distance between teachers/staff and students combined with mask wearing, to reduce transmission risk, regardless of vaccination status. ECDOH recognizes that distance may be harder to maintain in lower grade levels wherein personal instruction is often necessary. Teachers/staff should carefully monitor staff breaks and meetings, maintaining 6 feet of distancing and adhering to masking at all times, regardless of an individual’s vaccination status. Staff meetings should be held virtually whenever possible.
When determining close contact status following an exposure, unvaccinated teachers/staff within 6 feet from the positive COVID-19 case for a cumulative total of 15 minutes or more over a 24-hour period during a time the case was infectious will be quarantined regardless if masks were worn. As per CDC guidelines, fully vaccinated individuals who are identified as close contacts are not subject to quarantine.

C. Band, Chorus, and Orchestra

Practice and Lessons: ECDOH requires that individuals participating in activities which involve projecting the voice (e.g., singing) or playing a wind instrument must be 6 feet apart during practice and lessons and must wear a mask when not singing or playing.

Performances: ECDOH requires, to the extent practicable, that individuals participating in activities that involve projecting the voice (e.g., singing) or playing a wind instrument must be 6 feet apart during all performances and must wear a mask when not singing or playing. ECDOH further requires, without exception, at least 6 feet of distance between the performers and the audience during all performances.

D. Busing and Transportation

ECDOH strongly recommends:
- maintaining a daily seating and attendance chart for the identification of close contacts,
- keeping students from the same household in the same seats,
- students from different household should not share seats, and
- loading buses back to front.

E. Cohorting

Cohorting means keeping people together in a small group and having each group stay together throughout an entire day. Cohorting limits the spread of COVID-19 between groups.

ECDOH strongly recommends:
- cohorting students to limit potential exposure to the COVID-19 virus,
- taking measures to prevent intermingling between cohorts (e.g., separation by appropriate physical distancing, particularly if there are multiple cohorts in one area),
- making efforts to ensure that cohorts are fixed – meaning contain the same students, and
- maintaining seating charts and attendance for each cohort for the identification of close contact.

Faculty may instruct more than one cohort so long as appropriate physical distancing is maintained.

3. Health Monitoring

A. Screening

Upon school entry, ECDOH requires all students, staff, and faculty to participate in daily health screenings.
The health screening can be a daily in-person temperature and COVID-19 symptom check or a home health screening questionnaire (Appendix A) which can then be forwarded to the school by hand, electronically, or phone. All other school visitors, will be required to have an in-person temperature and symptom check before entering the school. School must confirm that a health screening is completed daily.

If an individual presents to the school with a temperature greater than 100.0°F, or reports one or more COVID-19 symptom, regardless of vaccination status, the individual must be denied entry into the facility or sent directly to a dedicated isolation area prior to being picked up or otherwise sent home.

COVID-19 symptoms include the following: fever, chills, rigors, muscle aches, headache, back pain, fatigue, runny nose, congestion, sore throat, loss of smell, loss of taste, shortness of breath, difficulty breathing, wheezing, chest pain, cough, abdominal pain, nausea, vomiting, diarrhea, dehydration, altered mental status/confusion, and seizures.

B. Developing Illness at School

ECDOH requires that if a student or staff member develops COVID-19 symptoms while at school, regardless of vaccination status, the ill person must immediately be placed in an isolation area/room at school and picked up by a parent/guardian if a student or sent home if a staff member.

C. Isolation Areas/Rooms

ECDOH requires schools to maintain isolation areas/rooms separated from others for students or staff who are exhibiting COVID-19 symptoms. These designated rooms should be monitored, overseen, and logged.

4. Returning to School Following Illness

A. COVID-19-Like Illness

ECDOH requires that in order for students or staff to return to school following a COVID-19-like illness, regardless of vaccination status, one of the following criteria must be met:

1. A negative FDA approved NAAT COVID-19 test result is provided to the school either by a parent/guardian or medical care provider. A NAAT test is a Nucleic acid amplification test, such as a polymerase chain reaction or PCR; OR
2. There have been at least 10 days since the onset of COVID-19 symptoms; OR
3. A Health Care Provider provides a signed note reporting a diagnosis of a known chronic condition with unchanged symptoms, or a confirmed acute illness (laboratory-confirmed influenza, strep-throat) and COVID-19 is not suspected. Such individuals may return to school according to the usual guidelines for that diagnosis. (Appendix B)

ECDOH offers free COVID-19 PCR testing to symptomatic Erie County residents and close contacts of confirmed cases by calling (716) 858-2929. Other local testing sites are listed at www.erie.gov/covidtestsites. COVID-19 diagnostic testing is fully covered by all health insurance plans per federal mandates.
A negative at-home COVID-19 test result will **NOT** be accepted to return a student to school or school staff to work.

**B. COVID-19 Positive Case**

ECDOH requires that students or staff must meet all the following criteria in order to return to school following testing positive for COVID-19:

1. At least 10 days after COVID-19 symptom onset or 10 days from their first positive test if asymptomatic **AND**
2. Fever-free for at least 24 consecutive hours without the use of fever-reducing medications **AND**
3. COVID-19 symptoms are improving.

**5. When the School Receives Notice of a COVID-19 Positive Case**

ECDOH requires schools to notify the ECDOH COVID-19 School Team of all positive COVID-19 cases reported by staff, students, or guardians. The school is required to prepare a list of classroom, bus, sports, and extracurricular activities close contacts. In general, a “close contact” is who was within 6 feet of an infected person for a cumulative total of 15 minutes or more over a 24-hour period. However, in the PK-12 indoor classroom setting, the CDC specifies that students who were within 3 to 6 feet of an infected student where both students were engaged in consistent and correct use of well-fitting masks are not considered close contacts. **This exception to the close contact definition applies to the classroom setting only and does not apply to teachers, staff, or other adults in indoor classroom settings.**

**6. Quarantine**

ECDOH uses the close contact definition along with the duration of exposure, proximity, and presence of symptoms to determine who is an exposed contact and therefore subject to quarantine. Schools are required to cooperate with contact tracers to determine close contacts and compile contact information. ECDOH will notify parents and staff who are considered to be contacts exposed to a COVID-19 case.

**Persons are considered fully vaccinated for COVID-19 ≥2 weeks after they have received the second dose in a 2-dose series (Pfizer-BioNTech or Moderna), or ≥2 weeks after they have received a single-dose vaccine (Johnson & Johnson [J&J]/Janssen).**

**A. Fully Vaccinated Close Contacts**

Per CDC guidelines, fully vaccinated individuals who are identified as close contacts are not subject to quarantine. However, these individuals should monitor for COVID-19 symptoms. Fully vaccinated persons who have a known exposure to someone with suspected or confirmed COVID-19 should get tested 3-5 days after exposure and should wear a mask in public indoor settings for 14 days or until they receive a negative test result. If they begin to experience COVID-19 symptoms, they must follow the “Returning to School Following Illness” protocol detailed above in Section 4.

**B. Unvaccinated Close Contacts**

In general, a “close contact” is who was within 6 feet of an infected person for a cumulative total of 15 minutes or more over a 24-hour period. However, in the PK-12 indoor classroom setting, the
CDC specifies that students who were within 3 to 6 feet of an infected student where both students were engaged in consistent and correct use of well-fitting masks are not considered close contacts.

This exception to the close contact definition does not apply to teachers, staff, or other adults in indoor classroom setting. If an individual is considered close contact, they will be quarantined for 10 days from the last day of exposure to the positive COVID-19 case.

Persons who are not fully vaccinated should be tested immediately after being identified, and, if negative, tested again in 5-7 days after last exposure or immediately if COVID-19 symptoms develop during quarantine.

Seating charts for classrooms, buses, and extracurricular activities should be kept in the event there is a case in a class. **If there is no seating chart, all unvaccinated individuals in the class will be considered unvaccinated close contacts and be quarantined for 10 days from the last day of exposure to the positive COVID-19 case.**

Regardless if a seating chart is maintained, **if there are two or more cases in a classroom during a 10-day period, all unvaccinated individuals in the class will quarantine for 10 days from their last exposure to the positive COVID-19 case, regardless if masks were worn.**

### 7. Youth Sports

The following guidelines apply to COVID-19 moderate and high-risk youth sports. Definitions for COVID-19 moderate and high-risk youth sports can be found at the NY Forward web site. (https://www.governor.ny.gov/sites/default/files/atoms/files/SportsAndRecreationMasterGuidance.pdf)

ECDOH requires schools to notify the ECDOH COVID-19 School Team of all youth sport positive COVID-19 cases reported by coaches, staff, students, or guardians.

ECDOH requires players, coaches, and staff to mask at all times, including during practice and play, for all indoor youth sport activities. For indoor sports and extracurricular activities in which masking is not possible (e.g., swimming), a minimum distance of 6 feet must be maintained.

ECDOH further requires players, coaches, and staff to mask at all times when not actively playing (i.e. sitting on the bench or sidelines) for all outdoor youth sport activities. Players may remove their masks during game play if they are unable to physically tolerate masking. Athletes and coaches who are not engaging in physical activity (i.e. sitting on the bench or sidelines) should maintain a distance of at least 6 feet.

If there is one COVID-19 case on a team that is present while infectious, all unvaccinated players and coaches/staff are required to pause for 10 days from the last exposure. Vaccinated players and coaches/staff may continue game play and team activities during a team pause. Pause means no practice, games, or team activities for the affected team, but players and coaches/staff not identified as unvaccinated close contacts are able to go to work and school.

If there are two or more players or coaches/staff who test positive during a 10-day period, all team activities must pause for 10 days from the last date of exposure to the first confirmed COVID-19 case. All unvaccinated players and coaches/staff are required to quarantine for 10 days from their last date of exposure to a COVID-19 case. Vaccinated players and coaches/staff can still go to work and school.
If a school or district shifts students to a full virtual learning model because of the number of COVID-19 cases in a building or district, all youth sports associated with the school are required to stop for the duration of the virtual learning period.

8. **COVID-19 Vaccination**

COVID-19 vaccination is strongly recommended for all eligible students and staff. Vaccination is currently the leading public health prevention strategy to end the COVID-19 pandemic. Promoting vaccination can help schools safely continue in-person learning as well as extracurricular activities and sports. Fully vaccinated individuals will not be subject to the same quarantine requirements as those who are not fully vaccinated in most circumstances.

9. **COVID-19 Screening Testing**

COVID-19 screening testing is recommended for students and staff who are not fully vaccinated at least once per week during moderate, substantial, and high transmission as per CDC guidance. Testing can provide an important prevention strategy and safety net to support in-person education in schools where the transmission risk is moderate, substantial or high. In addition, PCR tests are used for screening testing which are the most accurate COVID-19 tests available. Schools may consider multiple screening testing strategies, for example, testing a random sample of at least 10% of students and staff who are not fully vaccinated, or testing all students/staff who were in the same classroom as a COVID-19 case during their infectious period, regardless of their proximity in the classroom. ECDOH continues to work with schools to implement COVID-19 screening testing programs to those interested.

10. **Cleaning and Disinfection**

In general, cleaning once a day sufficiently removes potential virus that may be on surfaces. Disinfecting (using disinfectants on the U.S. Environmental Protection Agency COVID-19 list: [https://www.epa.gov/coronavirus/about-list-n-disinfectants-coronavirus-covid-19-0](https://www.epa.gov/coronavirus/about-list-n-disinfectants-coronavirus-covid-19-0)) removes any remaining germs on surfaces, which further reduces any risk of spreading infection.

If a facility has had a sick person or someone who tested positive for COVID-19 within the last 24 hours, clean AND disinfect the space.

11. **Ventilation**

Improving ventilation is an important COVID-19 prevention strategy that can reduce the number of virus particles in the air. Along with other preventive strategies, including wearing a well-fitting, multi-layered mask, bringing fresh outdoor air into a building helps keep virus particles from concentrating inside. This can be done by opening multiple doors and windows, using child-safe fans to increase the effectiveness of open windows, and making changes to the HVAC or air filtration systems. Keeping windows open a few inches improves air circulation.

During transportation, open or crack windows in buses and other forms of transportation, if doing so does not pose a safety risk. Keeping windows open a few inches improves air circulation.

ECDOH appreciates the feedback provided by Erie County’s school leaders as our department compiled this document.
Sources Consulted to Develop School Guidance:

1. New York State Interim Guidance for In-Person Instruction at Pre-K to Grade 12 Schools During the COVID-19 Public Health Emergency: [https://www.governor.ny.gov/sites/default/files/atoms/files/Pre-K_to_Grade_12_Schools_MasterGuidance.pdf](https://www.governor.ny.gov/sites/default/files/atoms/files/Pre-K_to_Grade_12_Schools_MasterGuidance.pdf)


Update Summary, 9/4/2021
Added: PK-grade 12 schools are also required to follow all applicable New York State guidance for their facilities and programs.

Amended: Masking at meals - Students may remove their mask during meals as long as they sit 6 feet apart to the extent possible, but no less than three feet, and a seating chart is kept.

Amended: Daily health screenings are required, with options for home health questionnaire or in-person screening.

Added: Return to school references to NAAT (Nucleic Acid Amplification Test) per NYS guidance.

Amended: Youth sports masking requirements updated per NYS guidance.
Appendix A: Health Screening Questionnaire

COVID-19 HEALTH QUESTIONNAIRE

DATE: ____________

NAME: _______________________________________________________

QUESTIONS:

1) Have you experienced symptoms of COVID-19 such as fever (temperature of 100°F or above) or chills, muscle or body aches, cough, shortness of breath or difficulty breathing, fatigue, headache, sore throat, nasal congestion or runny nose, nausea or vomiting, diarrhea, or new loss of taste and/or smell in the past 10 days?

   Please answer “yes” only if you are experiencing a new onset of symptoms OR you are experiencing a change in symptoms from your baseline if you have a known pre-existing medical condition (e.g. asthma, allergies).

   [ ] No  [ ] Yes

2) Is your temperature 100 degrees Fahrenheit or greater today?

   [ ] No  [ ] Yes

3) Have you tested positive for COVID-19 in the past 10 days?

   [ ] No  [ ] Yes

4) Have you had contact with anyone confirmed or suspected of having COVID-19 in the past 10 days?

   [ ] No  [ ] Yes

*If you checked YES to any of the above questions, please STOP and notify administration immediately*

SIGNATURE: _______________________________________________________

8/19/2021
Appendix B: Return to School Document

**Patient’s/Student’s Name:** __________________________
**DOB:** ____________

**Name of School District:** __________________________
**Name of School:** ____________________________

**Onset of Symptoms:** __________________________
**Last Day in School:** __________________________

**SYMPTOMATIC / NOT TESTED / NOT A CLOSE CONTACT¹ TO A POSITIVE CASE**

1.) Student found to have another source of symptoms, SARS-CoV2 testing was NOT done, and may return to school when they are 24 hours fever-free² with no antipyretic use and other symptoms are improving. *(The provider must be confident the illness is not COVID-19 and is required to provide a note explaining the alternate diagnosis).*

2.) Student NOT found to have another source of symptoms or they have a source for their symptoms but the provider is not confident that COVID-19 is excluded & SARS-CoV2 testing was NOT done. Patient may return to school after a MINIMUM of 10 days from the onset of symptoms with the last 24 hours fever-free² with no antipyretic use and other symptoms improving.

**SYMPTOMATIC / NEGATIVE COVID-19 TEST / NOT A CLOSE CONTACT¹ TO A POSITIVE CASE**

3.) Student had a NEGATIVE NAAT test for SARS-CoV2, as well as another source for symptoms, and may return to school when they are 24 hours fever-free² with no antipyretic use and other symptoms are improving.

4.) Student had a NEGATIVE NAAT test for SARS-CoV2, with high suspicion of possible false negative test based on provider’s judgement, so may return to school after a MINIMUM of 10 days from the onset of symptoms with the last 24 hours fever-free² with no antipyretic use and other symptoms improving.

**POSITIVE COVID-19 TEST WITH OR WITHOUT SYMPTOMS**

5.) Student had a POSITIVE test for SARS-CoV2 and must stay home for a MINIMUM of 10 days from the onset of symptoms with the last 24 hours fever-free² with no antipyretic use and other symptoms improving.

6.) Student is asymptomatic but had a POSITIVE test for SARS-CoV2 and must stay home for 10 days from the date of the test. If symptoms develop, the student must THEN stay home for a MINIMUM of 10 days from the onset of symptoms with the last 24 hours fever-free² with no antipyretic use and other symptoms improving.

**CLOSE CONTACT¹ TO A COVID-19 POSITIVE PERSON**

7.) Non-fully vaccinated student who is asymptomatic and has had close contact¹ to someone with COVID-19 must quarantine for 10 days from the date of the last exposure to the positive case. If the positive COVID-19 case is a household member and the student is unable to quarantine from the case, the student’s quarantine date will be extended 10 days past the last contagious day of the positive case.

*If symptoms develop, the student may return to school after a MINIMUM of 10 days from the onset of symptoms with the last 24 hours fever-free² with no antipyretic use and other symptoms improving.*

**Fully vaccinated students identified as close contacts as long as they are asymptomatic are not subject to quarantine.**

The **EARLIEST** this patient may return to school is: __________________________ (To be verified by ECDOH)

**Physician’s Name:** __________________________
**Signature:** __________________________
**Date:** __________________________

**Office name & phone:** __________________________________________________________

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1 Close contact is defined as students who are within 3 ft in the classroom setting or teachers/staff who are within 6 ft for ≥ 15 minutes in a 24-hour period regardless if masks were worn. Fully vaccinated asymptomatic individuals are not quarantined.

2 Fever is defined as ≥100.0°F. If fever was never present, the other guidelines must still be followed.

This statement is valid based on relevant information on the date above, but may change based on new symptoms, exposures, or results. The patient’s family has been instructed to notify the office for any changes. **Updated 9/4/2021**