Planning for a case of COVID-19 in your school will help ensure that everyone knows what to do if a case is identified. This document is meant to help your COVID-19 Coordinator and Workgroup think through what to include in your health and safety plan and protocols. It contains general guidance for considerations, but it is not comprehensive and will not have information for every situation that may arise. Schools should reach out to their school district’s school nurse leadership or COVID-19 Coordinator/Workgroup with any questions. The Vermont Department of Health has public health nurses available to schools to answer health related questions, call 802-863-7240 and select the option for “Schools and Childcare Providers.”

The Strong and Healthy Start document created as a collaborative effort between the Vermont Agency of Education and the Vermont Department of Health provides greater detail, information, and guidance to help schools prepare for the start of the school year.

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Staff training and education

Make sure staff are educated about general COVID-19 information. Provide resources or training to staff so they understand the basics of the disease.

- [www.healthvermont.gov/covid-19](http://www.healthvermont.gov/covid-19) is the most comprehensive source of COVID-19 information for Vermonters.
- Diagnosis is based on a [positive laboratory test](http://www.healthvermont.gov/covid-19). There are many other diseases that can have symptoms like COVID-19, but only those people who have received a positive laboratory test are considered to have COVID-19.
- Symptoms include fever or chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, diarrhea.
- Symptoms can range from mild or no symptoms to severe illness.
- Certain people are at increased risk for severe illness such as older adults and [people with underlying medical conditions](http://www.healthvermont.gov/covid-19).
- The virus is thought to be spread mainly from person to person by respiratory droplets created when an infected person coughs, sneezes, or talks. These droplets are most infectious between people who are in close contact with one another (within 6 feet for more than 15 minutes).
- People infected with COVID-19 are infectious (contagious) starting two days before they become symptomatic – or for people who didn’t have symptoms, two days before they got tested – and continues until they are recovered.
- The incubation period, or the time from when someone is exposed to the virus to when their symptoms begin, is 2 to 14 days.
- [The Health Department FAQ page](http://www.healthvermont.gov/covid-19) provides an easy way to search for information on a variety of topics related to COVID-19.
- If a student, staff member, or anyone else who visited the school tests positive for COVID-19 but was not in the school while they were infectious, no additional actions are necessary as others are not at risk of being exposed at the school.

Create a plan

Having a plan and related health and safety protocols will help keep everyone on the same page about what they can do. The plan and protocols should be distributed to staff and kept in a centralized location so it can easily be accessed and revised. The sections below can help you form a plan.

Make sure protective supplies are adequately stocked and accessible.

Guidance regarding Personal Protective Equipment (PPE) for school nurses and other health professionals in the school building is posted on the [Vermont Department of Health website](http://www.healthvermont.gov/covid-19). School nurses will need to determine appropriate PPE based on the care and tasks required.
Schools should make sure an adequate supply of the following:

- Soap
- Hand sanitizer (at least 60% alcohol)
- Paper towels
- Tissues
- Cleaning and disinfection supplies
- Masks/facial coverings (as feasible)
- No-touch/foot pedal trash cans
- No-touch soap/hand sanitizer dispenser
- Disposable food service items

**How will your school track protective supplies?**

- Create an easy way to track how many supplies you have and how many have been used or how often they need to be replaced. This can help you determine when to order more and help you have enough on hand as needed.

**How will your school order more supplies?**

- Include in your plan where you will obtain additional supplies. Including more than one source is helpful in case supplies are back ordered or out of stock.

**How will your staff know where to find supplies within the school if they need them?**

- If a staff member or student needs masks/facial coverings, gloves, or another protective item, make sure they know how to easily find them. Consider putting some stock in high traffic areas.

**Consider where to put hand sanitizer.**

Washing with soap and water for 20 seconds is the best method for cleaning hands, but it may not always be feasible. Place hand sanitizer that contains at least 60% alcohol in areas where hand washing is not readily available.

**Where should you put hand sanitizer?**

- Think about what places in your school are high traffic areas where people may be touching many surfaces, such as in a classroom or handrails in stairwells. Consider having sanitizer near doorways into classrooms and entrances to buildings. Hand sanitizer stations should be on/near playground equipment.

**Hang posters and signs.**

Having posters and flyers with messaging and pictures can help remind people what steps they can take and why they are being asked to take them. Take into account the reading level of those at the school so that the posters you choose are effective.

**Where should you put posters?**

- Place posters and flyers around the school reminding students and staff the importance of wearing a mask/facial covering, washing hands, and physically distancing themselves from others. Resources are available on the Vermont Department of Health and CDC websites.
Where should you put signs?

- Signs should be put up to clearly mark specific areas (isolation area, screening area, where to stand/sit to ensure appropriate physical distancing, etc.). They can also be put up to indicate areas where there is one-way traffic, such as in a hallway or on doors to indicate which doors are for entering and exiting.

Identify an isolation area.

If a student becomes sick while at school, they will need to be isolated away from others as soon as possible. Determine what can be used as a short-term isolation area.

For more information on natural ventilation see the Strong and Healthy Start Guidance.

What should the isolation area be?

- Schools must have separate isolation spaces (areas must be structured with a door and allow for ventilation to the outside) to serve as an extension of a Health Office to accommodate symptomatic students and staff. Isolate symptomatic students/staff as soon as possible. Set up separate, well-ventilated triage areas and place student/staff who becomes ill with fever, cough, sore throat, or other respiratory symptoms at school in an isolation room. Make sure that confidentiality is maintained for individuals who enter/depart the isolation room.
- Where feasible, the school nurse’s office/isolation room should:
  - Have a dedicated HVAC system
  - Have a dedicated restroom (ideal)
  - Have exhaust directly outdoors
  - Maintain negative pressure to adjoining spaces
  - Nurse office suite design should follow health care facilities design practices as described in standards such as ASHRAE Standard 170 and other applicable guidelines and design information.
  - For more information see ASHRAE Epidemic Taskforce Schools & Universities

How can you communicate to students and parents/caregivers about the area before it is used?

- Communicate with staff, students, and parents/caregivers the need for an isolation area and when it will be used. Go over the process of bringing a student to the area and what steps will be taken. To reduce stigma and panic, make sure that staff, students, and parents/caregivers know that if someone has been taken to the isolation area, they are there out of an abundance of caution, and they do not necessarily have COVID-19.

Work to keep COVID-19 from entering your school.

Schools may choose to ask students/staff to do symptom monitoring at home or upon boarding the bus or prior to entering the school building. In addition, a temperature check should be conducted when boarding the bus or entering the school.

Symptom checks can help identify possible cases early but may not keep COVID-19 out completely. Children are more likely than adults to be asymptomatic or pre-symptomatic (have not yet developed signs or symptoms) and to have mild symptoms. This means that some children who have COVID-19, who can potentially transmit it to others, may not be identified. This highlights the importance of
implementing prevention strategies such as wearing a mask/facial covering, physically distancing, and frequently washing hands.

Symptom screening will only identify that a person may have an illness, not specifically COVID-19. Many of the symptoms of COVID-19 are also common in other childhood illnesses, like the common cold, the flu, or seasonal allergies.

The Health Department has information and guidance on when and how long to exclude students and staff for common illnesses. See the Immunizations & Infectious Disease page.

When will you exclude staff or students from in-person school activities?

Students and staff should be excluded from in-person activities if they:

- Show symptoms of COVID-19, or
- Have been in close contact with someone with COVID-19 in the last 14 days, or
- Have a fever (temperature greater than 100.4°F)

Students and staff should be excluded from school until they are no longer considered infectious. The student or staff member’s health care provider may be consulted to help determine what medical course to take (e.g., whether or not they think COVID-19 testing may be necessary). The pediatric health care community is working with school nurses to determine return to school decision-making algorithms after illness and is working with adult health care providers to develop similar pathways.

What health screenings will you ask students and staff to have done and how will that information be communicated to your school?

- All students/their families and staff should conduct daily monitoring for COVID-19 exposure and symptoms. Schools may choose to ask students/staff to do symptom monitoring at home or when boarding the bus prior to entering the school building.
- Health screening questions to answer:
  - Has the student or staff member been in close contact with a person who has COVID-19 within the past 14 days? Close contact is being within 6 feet of an infected person for 15 minutes or more.
  - Does the student or staff member have any symptoms of COVID-19?
- Students who have COVID-19 exposure or signs/symptoms of COVID-19 must not come to school or must be returned to their parents/caregiver as soon as possible.
- Determine how your school will collect this information and what will be done to make sure all students attending school that day have had screening information sent to the school.

When will you perform temperature screenings?

- Schools should conduct temperature screening of students. This should occur at the first point of contact. If it is not feasible on the bus, then it should be conducted on entrance to the school. If staff conduct temperature screening at home, they should report this information daily. Estimate how many students, staff, parents/caregivers, or other individuals come to the...
school each day to determine how many thermometers are needed. Any staff taking temperatures should be trained on the process to ensure standardization. Consider where those waiting to enter the building will wait, keeping in mind physical distancing and weather concerns.

- Create a plan for documenting, communicating, and acting on a fever when measured.

**What will be your process to follow-up if parents/caregivers do not report screening results?**

- Schools must communicate with parents/caregivers so that plans are put in place if students are symptomatic upon boarding the bus or upon entry to the school.

**What training will be provided to school staff regarding how to have conversations with parents/caregivers about home symptom screening?**

- Have a standard process to review each student’s daily symptom screening and review this process with staff.

**What will you do if a student arrives at school sick?**

- Student who come to school sick should be sent home as soon as possible. Anyone who has symptoms should immediately put on a surgical mask if they are not already wearing one. While they are waiting, they should stay in the designated isolation area. Talk to parents/caregivers prior to school starting to let them know your policy.

**Work to identify symptomatic individuals early.**

Students and staff may develop symptoms while at school, so it is important to work with staff to identify students who may have an infectious disease early and to impress upon staff the importance of immediately informing the COVID-19 Coordinator or school nurse of any developing symptoms. More steps are listed below in “What to do when a student or staff member becomes symptomatic at school.”

- Ensure all staff know the signs and symptoms of COVID-19.
- Train staff on how to respond if someone may have COVID-19.

**Communicate your plans to staff and parents/caregivers.**

To keep everyone on the same page and ease the minds of parents/caregivers, students, and staff, communicate as much of the plan as possible so they understand how you will be keeping students and staff safe. Include in your communication how you will share additional information and updates.

Consider putting plans, information and updates on a website where it can easily be seen and updated.

Test communication capacity to make sure you can easily reach staff, students, and families with important information. Consider developing a communication plan to be implemented in the event of an outbreak.
Consider students with special health and education needs.

Students with chronic conditions may, as part of their condition, have symptoms like cough or nasal congestion without having COVID-19. Symptom screening may result in the potential to exclude some students repeatedly from school even though they do not have COVID-19 or an infectious disease. Families should work with school nurses and their primary care provider or health care team around individual situations.

Students with documented allergies or well-controlled asthma do not require a medical clearance note from their health care provider to enter school. However, a student with a new diagnosis of asthma during the school year does require written confirmation from the student’s health care provider.

If students with chronic conditions develop new symptoms, they should be sent home and their provider should be consulted.

Plan for absenteeism.

How will your school plan for staff absenteeism?

- Review sick leave policies with staff and encourage them to stay home if they are sick.
- When possible, allow staff to stay home to care for sick family members.
- Identify crucial job functions and position and plan for alternative coverage by cross-training.
- Work on determining what level of absenteeism will disrupt continuity of teaching and learning.
- Determine a plan for how immediate coverage will be provided if a teacher needs to leave in the middle of the day.

How will your school plan for student absenteeism?

- Review attendance policies and encourage students to stay home when they are sick, even without documentation from doctors.
- Discourage the use of perfect attendance awards or incentives. Students should not feel they will be penalized if they need to miss school due to sickness.
- Alert the Health Department about any large increases in student or staff absenteeism, particularly if absences appear due to respiratory illnesses. You can reach the Health Department by calling 802-863-7240 and pressing 3 during business hours and pressing 7 after hours and on weekends.

Everyday actions to take

- Wear a face mask/facial covering while in the school building at all times and outside around the school building if you will be around others.
  - Face masks should not be placed on children younger than 2, anyone who has trouble breathing, or is unconscious, incapacitated or otherwise unable to remove the mask without assistance.
- If teachers are working with students who are unable to wear a face mask, the teacher can consider wearing a face shield along with their mask to help protect them against any droplets.
- Wash hands with soap and water for at least 20 seconds before:
  - Eating
  - Preparing food or drinks
- Touching your face
- Administering medication or medical ointment
- Handling your mask/facial covering
- Playing with sand and sensory play
- Cleaning
- Switching rooms or locations

- Wash hands with soap and water for at least 20 seconds after:
  - Arriving at school
  - Staff breaks at the school
  - Using the restroom or helping a child use the restroom
  - Blowing your nose, coughing, or sneezing
  - Handling your mask/facial covering
  - Caring for someone sick
  - Touching pets or animals or handling animal waste
  - Preparing food or drinks
  - Administering medication or medical ointment
  - Coming in contact with bodily fluids
  - Playing outdoors
  - Playing with sand and sensory play
  - Handling garbage
  - Cleaning

- Adults and adult staff within schools should maintain a distance of 6 feet from other adults as much as possible.
- Teachers and staff should maintain a distance of 6 feet from students as much as possible. However, brief periods of closer contact, such as when a student may need one-on-one guidance, clarification, or assistance are expected and permitted. In these cases, staff should stand/kneel/sit side-by-side students (rather than face-to-face) for brief amounts of time (less than 15 minutes).
- Younger students (PreK through Grade 5) should be spaced at least 3 feet apart.
- To the extent possible, older students (Grade 6 and up) should be spaced 6 feet apart. If installed properly, plastic/plexiglass barriers between students would eliminate the need for the 6-foot distancing.
- When physical distancing is not possible, it is even more important for students and staff to adhere to the facial covering requirement.
- Clean and disinfect frequently touched surfaces (see “Cleaning” information below).
- Monitor health daily and stay home if you are not feeling well.
- Cover coughs and sneezes with a tissue, then throw the tissue away and wash your hands.
- Avoid touching your eyes, nose, and mouth.

Help staff, students, and families understand why these everyday actions are being asked of them and how each person contributes to keep themselves and their community safe and healthy.
What to do when a student or staff member becomes symptomatic at school:

During the fall and winter, there are many illnesses going around as people spend more time indoors and in closer proximity to others. Flu season usually runs October – May and other respiratory infections may be seen during that time as well. There are likely going to be students who have symptoms while in school that are consistent with COVID-19 but may not be COVID-19. Taking everyday actions to reduce the spread of COVID-19 will also help reduce the spread of other infections.

If a student develops a fever or any of the symptoms of COVID-19, they should be placed in an isolation area separate from staff and other students until they can go home. Plan to send the students home immediately. If a staff member develops a fever or any COVID-19-like symptoms, they should return home immediately. Any symptomatic individuals should be wearing a surgical mask if they are able.

Once a person has gone to the isolation area, clean and disinfect all high-touch areas potentially used by the them no less than one hour after the sick individual has left the room. This includes the student’s desk and chair, door handles, etc.

Isolation areas/rooms should be fully cleaned/disinfected no less than one hour after the sick individual has left the room.

How will you bring a student to the isolation area?

- Be sensitive to the needs of the student when they are being brought to the isolation area, make sure it is done in a non-threatening manner while explaining to them what is happening, so they understand. This can be a stressful and scary time.

How will the student get home?

- Prior to the start of the school year, reach out to parents/caregivers letting them know that if their student comes down with symptoms of COVID-19 while they are at school, the student will need to be sent home. No one who is symptomatic will be allowed to ride the bus, so parents/caregivers should have a plan for how they will get the student home if needed.

What to do when the Health Department informs you that someone with COVID-19 was at your school:

When the Health Department receives a positive COVID-19 test result of a student or staff member and they determine that this person was in your school while they were infectious, the Health Department will reach out to your school administrators to let you know. The Health Department will only contact you if the person who tested positive was in your school while infectious and there is a need to identify possible close contacts. You will not hear from the Health Department if a staff member or student at your school tests positive but was not in your school when it was possible for them to spread the infection to others.

The Health Department will work with you to determine where the students or staff member has been within the school and who they may have come into contact with.
What steps should your school take if someone with COVID-19 was in your school while infectious?

The PreK-12 School COVID-19 Case Actions Checklist provides a general list of what to expect and actions to take if there is a confirmed case of COVID-19 in your school.

- Compile a line list of all the students and staff with whom the person with confirmed COVID-19 had close contact. A line list is a document to help identify the names and information of people who may have been exposed to the infection. The following items may help you create a line list:
  - Seating charts
  - Class schedules
  - Custodial staff movements
  - Bus seating charts
  - Attendance records
  - Activity participation records
- Work on a list of all the known locations in the school where the person who tested positive was for 15 minutes or more. This includes classrooms, school nurse's office, etc.
- Close off any areas used by the infected person for 15 minutes or more and wait 24 hours since they were last in the room or as long as possible before cleaning and disinfecting.
- Open outside doors and windows and use ventilating fans to increase air circulation in the area.
- Clean and disinfect all areas such as classrooms, bus seats, offices, bathrooms, common areas and shared electronic equipment used by the person who tested positive, focusing especially on frequently touched surfaces.
- Ensure safe and correct use and storage of cleaning and disinfection products, including storing products securely away from children.
- Participate in contact tracing as requested by the Health Department.
- Explain to the student and their parents/caregivers that the Vermont Department of Health will be contacting them directly, if not already, to walk through what this infection means to them and others and to identify ways in which COVID-19 and its impacts can be minimized for them and others.
- Communicate with staff and parents/caregivers with general information about the situation. It is critical to maintain confidentiality.

Contact tracing

When a person tests positive for COVID-19 a member of the Contact Tracing team reaches out to them to determine who they have been in contact with and any areas they have visited. Any contacts of the person who tested positive are contacted by the Health Department to provide them with information and talk to them about quarantining.

Closing schools for in-person instruction

Other than under Step I, the decision to close schools or certain classrooms for in-person instruction will be made by the local superintendent or independent school head after consulting with the Department of Health. The Department of Health epidemiologists will provide guidance based on a number of factors, including the level of community transmission, the number of students, teachers,
or staff infected, and other indicators the Health Department uses to assess the status of COVID-19, and the ability of the school to implement mitigation strategies.

Decisions to close for in-person instruction will be determined on a case-by-case basis.

- If the school is grouping students by cohort in a single classroom, the Health Department recommendation will most likely be to close the classroom for in-person instruction and exclude students and staff in the affected classrooms/cohorts/pod for a minimum of 24 hours while contact tracing is conducted.

- If students are moving about in multiple classrooms, the Health Department recommendation will most likely be to close all potentially impacted classrooms and exclude students and staff in the affected classrooms or the entire school for in-person instruction for a minimum of 24 hours while contact tracing is conducted.

The Health Department will use this time to gather the facts about the situation, including the period of time in which the individual was at school while infectious. The Health Department will convene a rapid response team meeting with the school and will initiate an investigation, including contact tracing. Based on this information, the Health Department will make further recommendations regarding further closure for in-person instruction and other infection control measures.

**Cleaning**

To ensure that all areas are routinely and thoroughly cleaned, include in your plan a list of all areas and items that need to be cleaned as well a schedule for cleaning. Consider finding an alternative for any items that cannot easily be cleaned, such as soft toys or cloth items or cloth furniture.

At minimum, common spaces and frequently touched surfaces and doors should be cleaned and disinfected at the beginning, middle, and end of each day.

Ensure safe and correct use and storage of cleaning and disinfecting products, including storing products securely away from children.

**How will you ensure proper cleaning gets done?**

- Work with teachers, staff, and others who use cleaners and disinfectants to determine what items and locations in your school should be routinely cleaned.
- Train anyone who will be using a cleaning or disinfecting product to read instruction labels, to safely and appropriately used products, what PPE should be worn, where they can find PPE, and how to dispose of PPE.

**What PPE should be worn while cleaning?**

- Anyone cleaning or disinfecting should wear a mask or facial covering, gloves, and any additional PPE appropriate for the chemicals being used as indicated by the instruction label.
How will you clean and disinfect school buses?

- Practice routine cleaning and disinfection of frequently touched surfaces, including surfaces in the driver cockpit commonly touched by the operator.
- All buses must have an adequate supply of hand sanitizer.
- If there is a known case of COVID-19 or a symptomatic student that has been transported, please follow CDC Guidance.

What parts of your school should be routinely cleaned?

- Common spaces and frequently touched surfaces and objects should be cleaned at the beginning, middle, and end of the day.
- Commonly touched surfaces and objects include
  - All surfaces, such as desks or chairs
  - Bathrooms
  - Frequently used electronic devices
  - Door handles and handrails
  - Items students place in their mouth, including toys
  - Metal and plastic playground equipment

Returning to school

Return to school for both staff and students who have been ill should be made on a case by case basis taking into account their situation. There are many factors that can contribute to when someone can return to school (such as when they were tested). You can call the Health Department at 802-863-7240 to discuss situations and ask questions.

- If someone tests positive for COVID-19 and had symptoms, they may discontinue isolation when at least 10 days have passed since symptom onset and at least 24 hours have passed since resolution of fever without the use of fever-reducing medication and other symptoms have improved.
- If someone tests positive for COVID-19 and had no symptoms, they may discontinue isolation 10 days after the date of their first positive lab test.
- If someone did not have symptoms and they were a close contact of someone who tested positive for COVID-19, they should stay home for 14 days. They can get tested on day 7 and if they have no symptoms and test negative, they can end their quarantine.
- If someone is symptomatic and they test negative for COVID-19, they should stay home until their symptoms have improved and at least 24 hours have passed since resolution of fever without the use of fever-reducing medication.

Coping with stress

This is a stressful time for everyone as we navigate schools reopening. In partnership with mental health professionals, develop a process for staff and student re-entry check-ins, weekly well-being checks and, if staff can be appropriately trained, universal social and emotional screenings to identify students and staff who need support.
How can you help promote mental health wellness?

- Encourage staff members and students to talk with people they trust about their concerns and how they are feeling.
- Support students and staff to establish healthy routines during uncertain times.
- Consider posting signages to local resources and the Employee Assistance Program (EAP) for individuals in distress.

Stigma, discrimination, or bullying may arise due to wearing or not wearing a mask. Schools should have a plan to prevent and address harmful or inappropriate behavior.

Having resources available for staff, students, and parents/caregivers can help them handle these new situations.

Below are a few resources.

- A Strong and Healthy Start: Social, Emotional and Mental Health Supports During COVID-19 (Vermont)
- Coping with Stress (Vermont)
- Coping with Stress (CDC)
- Help Children Cope (CDC)
- Helping Children Cope with Emergencies (CDC)

Terminology

Cleaning
Cleaning with soap and water removes germs, dirt, and impurities from surfaces and objects. Cleaning works by using soap (or detergent) and water to physically remove germs from surfaces. This process does not necessarily kill germs, but by removing them, it lowers their numbers and the risk of spreading infection.

Close Contact
This is an individual who was within 6 feet of someone who tested positive for COVID-19 for 15 minutes or more, while the person who tested positive was infectious.

COVID-19
This disease can be referred to by multiple names: COVID-19, 2019 novel coronavirus, 2019-nCoV, SARS-CoV-2. The name COVID-19 comes from ‘CO’ for corona, ‘VI’ for virus, ‘D’ for disease, and 19 for the year it was first identified.

COVID-19 Positive
Diagnosis is based on a positive laboratory test. There are many other diseases that can have symptoms like COVID-19, but only people who receive a positive laboratory test are considered to have COVID-19.
Contact Tracing

When a person tests positive for COVID-19, the Health Department reaches out to them to see who they were in close contact with while they were infectious. The Health Department then reaches out to all the contacts to give them information and talk to them about quarantining.

Disinfecting

Disinfecting kills germs on surfaces or objects. Disinfecting works by using chemicals to kill germs on surfaces or objects. This process does not necessarily clean dirty surfaces or remove germs, but by killing germs on a surface after cleaning, it can further lower the risk of spreading infection.

Exposure to COVID-19

Being in close contact with a person who has COVID-19 within the past 14 days.

Incubation Period

The time from exposure to the virus until the first symptoms develop.

Infectious Period

This is the time during which someone infected with COVID-19 has the potential to spread it to others. The infectious period starts two days (48 hours) before any symptoms begin, or for people who did not have symptoms, two days before they got tested and continues until they recover.

Isolation

Isolation is for people sick with COVID-19 (or who tested positive for COVID-19 but do not have any symptoms). These people should stay home and away from others until at least 10 days have passed since symptom onset and at least 24 hours have passed since resolution of fever without the use of fever-reducing medications and other symptoms have improved. People who do not develop symptoms should stay home and away from others until 10 days after the date of their first positive lab test.

PPE (Personal Protective Equipment)

Equipment worn to minimize exposure to hazards that cause injuries and illnesses. This includes such items as gloves, safety goggles, face shields, face masks etc. This equipment is meant to protect the person using it.

NOTE – Cloth face masks are intended to keep the person wearing the mask from spreading respiratory secretions to others when talking, sneezing, or coughing. It is uncertain whether cloth face coverings protect the wearer.

Quarantine

Quarantine is for people with no symptoms who were either in close contact with someone sick with COVID-19 or are returning to Vermont from out of state for anything other than essential purposes.