

**Interim COVID-19 Mitigation Strategy for Chicago Youth Settings:
K-12 and Early Childcare Education 2022-2023 School Year (Updated 8.11.22)**

CDPH recommends a comprehensive strategy toward COVID-19 mitigation for the 2022-2023 school year that balances COVID mitigation with preservation of in-person learning as much as possible. Because introduction of cases into a school or daycare is directly tied to the case rates within the community, we propose policies should be based on [COVID-19 community levels](#) and [layers of mitigation present within the school community](#).

Current level can be low, medium, or high, and is based on local COVID case counts, hospitalizations, and hospital capacity. Chicago’s current level is available at chi.gov/coviddash.

	Chicago Community Level		
	Low	Medium	High
Vaccine	<ul style="list-style-type: none"> Continue to promote staying up-to-date on vaccination Consider additional vaccine resources for schools with low vaccination rates that are experiencing an outbreak 	<ul style="list-style-type: none"> Continue to promote staying up-to-date on vaccination. Consider additional vaccine resources for schools with low vaccination rates that are experiencing an outbreak 	<ul style="list-style-type: none"> Continue to promote staying up-to-date on vaccination. Consider additional vaccine resources for schools with low vaccination rates that are experiencing an outbreak
Masking	<ul style="list-style-type: none"> Universal indoor masking optional Masking required when returning from isolation days 6-10 (option to end masking on day 7 with two negative tests on day 5 and day 7), and for 10 days after an exposure (day of exposure is day 0) Masking required after 3 cases identified (schools) or 2 cases identified (ECE) in a classroom for 10 days 	<ul style="list-style-type: none"> Universal indoor masking recommended Masking required when returning from isolation days 6-10 (option to end masking on day 7 with two negative tests on day 5 and day 7), and for 10 days after an exposure (day of exposure is day 0) Masking required after 3 cases identified (schools) or 2 cases identified (ECE) in a classroom for 10 days 	<ul style="list-style-type: none"> Universal indoor masking strongly recommended. Masking required when returning from isolation days 6-10 (option to end masking on day 7 with two negative tests on day 5 and day 7), and for 10 days after an exposure (day of exposure is day 0) Masking required after 3 cases identified (schools) or 2 cases identified (ECE) in a

	<p>after last identified case</p> <ul style="list-style-type: none"> • Strongly encourage masking in entire school community after 3 potential outbreaks have been identified within school, or as otherwise directed by CDPH. 	<p>after last identified case</p> <ul style="list-style-type: none"> • Strongly encourage masking in entire school community after 3 potential outbreaks have been identified within school, or as otherwise directed by CDPH. 	<p>classroom for 10 days after last identified case</p> <ul style="list-style-type: none"> • Strongly encourage masking in entire school community after 3 potential outbreaks have been identified within school, or as otherwise directed by CDPH.
Testing	<ul style="list-style-type: none"> • Recommend routine screening testing for students participating in high risk activities (events, indoor sports and performances in which masks are not feasible), • Encourage testing of all individuals at day 5 post exposure, regardless of vaccine status, and offer testing supplies where feasible. • Offer additional testing resources for cohorts experiencing potential outbreaks within the school community. • Offer tests for all symptomatic students and staff. 	<ul style="list-style-type: none"> • Recommend once weekly screening testing for all students participating in extracurricular activities • Encourage testing of all individuals at day 5 post exposure, regardless of vaccine status, and offer testing supplies where feasible. • Offer additional testing resources for cohorts experiencing potential outbreaks within the school community. • Offer tests for all symptomatic students and staff. 	<ul style="list-style-type: none"> • Recommend once weekly screening testing for all students participating in extracurricular activities • Encourage testing of all individuals at day 5 post exposure, regardless of vaccine status, and offer testing supplies where feasible. • Offer additional testing resources, for cohorts experiencing potential outbreaks within the school community. • Offer tests for all symptomatic students and staff.
CICT and Quarantine	<ul style="list-style-type: none"> • Full case investigations should be performed for: <ol style="list-style-type: none"> 1. School outbreaks (or potential outbreaks), based on current IDPH outbreak definition 2. Cases that result in severe outcomes (hospitalizations, deaths) 	<ul style="list-style-type: none"> • Full case investigations should be performed for: <ol style="list-style-type: none"> 1. School outbreaks (or potential outbreaks), based on current IDPH outbreak definition 2. Cases that result in severe outcomes (hospitalizations, deaths) 	<ul style="list-style-type: none"> • Consider prioritizing full case investigation for: <ol style="list-style-type: none"> 1. Cohorts with >5 cases 2. Cases that result in severe outcomes (hospitalizations, deaths)

Ventilation	Improve ventilation per CDC guidance	Improve ventilation per CDC guidance	Improve ventilation per CDC guidance
Misc.	<ul style="list-style-type: none"> • Travel guidance follows CDPH guidance • Schools should have a protocol for addressing students that test positive while on a school-sponsored trip • Large gatherings: follow CDPH guidance 	<ul style="list-style-type: none"> • Travel guidance follows CDPH guidance • Schools should have a protocol for addressing students that test positive while on a school-sponsored trip • Large gatherings: follow CDPH guidance 	<ul style="list-style-type: none"> • Travel guidance follows CDPH guidance • Schools should have a protocol for addressing students that test positive while on a school-sponsored trip Large gatherings: follow CDPH guidance

Preparedness

It is important that school-focused public health actions can be taken quickly and with minimal disruption to in-person learning. Efforts should fit within the existing school framework and focus on improvements to the overall public health infrastructure of the school. A plan should be created to scale up resources in the event of a surge.

Considerations:

- Testing resources
 - Testing resources should be made available, when feasible, to allow to testing at day 5 after an exposure.
 - Testing resources should be scaled up in the event of a surge.
- Staffing
 - Schools and early childcare centers should identify a point of contact that is familiar with a single school or small group of schools, who is familiar with its operations.
 - This will facilitate communication to the school communities in the event of guidance changes and allow for rapid identification of exposed individuals who need to quarantine.
 - A nurse or other health-informed individual can provide appropriate clinical guidance to their local school community and serve as a liaison between the school community and the Chicago Department of Public Health.
 - Please ensure that they have signed up for the [ChicagoHAN](#) so, they can receive updated guidance as it becomes available.
- IT Infrastructure
 - Schools should have an established protocol for case management.
 - Accessibility of class schedules can facilitate faster contact tracing, and may be useful in the detection of outbreaks beyond COVID-19.
 - Integration of testing data with immunization data can improve allocation of resources.
- Communications
 - Schools/ early childcare centers should have a protocol for clear communication with their school communities that addresses:
 - Community-wide mitigation strategies based on the latest guidance.

- Case identification and next steps to those affected.