

Interim COVID-19 Mitigation Strategy for Chicago Youth Settings: K-12 and Early Childcare Education 2022-2023 School Year (Updated 5.25.22)

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 	<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, when returning from quarantine days 6-10, or if staying in school (vaccinated or Test to Stay) after exposure Masking strongly recommended after single case in a classroom for 10 days after last case identified within that group Masking required after 3 cases identified (schools) or 2 cases identified (ECE) in a 	<ul style="list-style-type: none"> Universal indoor masking recommended Masking required when returning from isolation days 6-10, when returning from quarantine days 6-10, or if staying in school (vaccinated or Test to Stay) after exposure Masking required after 3 cases identified (schools) or 2 cases identified (ECE) in a classroom for 10 days after last identified case Strongly encourage masking in entire school community after 3 potential 	<ul style="list-style-type: none"> Universal indoor masking strongly recommended. Masking required when returning from isolation days 6-10, when returning from quarantine days 6-10, or if staying in school (vaccinated or Test to Stay) after exposure Masking required after 3 cases identified (schools) or 2 cases identified (ECE) in a classroom for 10 days after last identified case Strongly encourage masking in entire school community

	<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. 	<p>outbreaks have been identified within school, or as otherwise directed by CDPH.</p>	<p>after 3 potential outbreaks have been identified within school, or as otherwise directed by CDPH.</p>
Testing	<ul style="list-style-type: none"> • Recommend once weekly screening testing for all unvaccinated staff • Recommend once weekly screening testing for unvaccinated students participating in high risk activities (indoor sports and performances in which masks are not feasible), • Encourage Test-to-Stay programs for exposed students and staff who are not up to date on vaccination, as an alternative to quarantine. • Offer additional testing resources for unvaccinated, exposed individuals. • 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 unvaccinated staff • Recommend once weekly screening testing for all unvaccinated students participating in extracurricular activities • Encourage screening testing for students that are not up to date on vaccination. • Encourage Test-to-Stay programs for exposed students and staff (share a classroom who are not up to date on vaccination, as an alternative to quarantine. • Offer additional testing resources for unvaccinated, exposed individuals. • 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 unvaccinated staff • Recommend once weekly screening testing for all students participating in extracurricular activities • Encourage screening testing for students that are not up to date on vaccination. • Encourage Test-to-Stay programs for exposed students and staff (that share a classroom with a positive case) who are not up to date on vaccination, as an alternative to quarantine. • Offer additional testing resources for all exposed, regardless of vaccination status. • Offer additional testing resources, for cohorts experiencing potential outbreaks within the school community.

			<ul style="list-style-type: none"> • 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) 3. Contacts in Test to Stay program that become cases • Group contact tracing* recommended 	<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) 3. Contacts in Test to Stay program that become cases • Group contact tracing* recommended 	<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) 3. Contacts in Test to Stay program that become cases • Group contact tracing* recommended
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 • Those enrolled in Test-to-Stay should not participate in competitions or performances until the end of the testing period (when second test is performed) • 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 • Recommend testing for unvaccinated students to attend overnight field trips or out of state extracurricular activities. • 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 • Discourage out of state or overnight travel for unvaccinated individuals. • Large gatherings: follow CDPH guidance

*Group contact tracing means the entire classroom is considered a close contact and should abide by the same masking guidance, as well as test-to-stay. If test-to-stay has not been implemented, it is preferable to perform individual contact tracing at "Low" community transmission, to reduce the number of students that need to quarantine outside of the classroom.

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
 - Test-to-Stay programs should be prioritized for all schools to minimize time spent out of school 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.