

History and Updates

- July 29, 2021: Document first published.
- August 13, 2021: Removed “unvaccinated” from the close contact definitions and clearly defined a student close contact.
- August 20, 2021: Edited the close contact definitions for students in section 4.
- September 7, 2021: Updated mask use to include DHEC’s recommendation for mask requirements in section 2 and strengthened recommendation for screening testing in section 6.
- September 10, 2021: Deleted an extra bullet
- September 29, 2021: Edited information about Proviso 1.108.
- October 12, 2021: Edited the close contact definition for students.
- October 20, 2021: Updated the testing recommendations for vaccinated individuals.
- November 5, 2021: Updated the age for Pfizer vaccine availability.
- January 4, 2022: Updated the isolation/quarantine definitions, maximally vaccinated definition

This guidance is consistent with data and information available as of January 4, 2022 and may be updated as necessary as the situation evolves.



Interim Guidance for School Buses

September 7, 2021

Social Distancing and Capacity

- The number of students on the bus should be limited to the extent possible.
- Allow only one child on a seat at a time to the extent possible.
- Use of assigned seats which remain consistent is strongly recommended, in order to facilitate contact tracing and limit the number of students who need to quarantine. An entire bus does not need to quarantine in response to a case if proper contact tracing can be performed.
- As possible, load the bus back-to-front.

Cleaning and Disinfection

- Each bus shall be cleaned then disinfected using an EPA-approved disinfectant daily.
- Frequently wipe down with disinfectant frequently touched surfaces, including those in the entrance touched by passengers, such as handrails, and those touched by the driver.
 - Disinfect with a [product that is EPA-approved](#) for use against the virus that causes COVID-19, [diluted bleach solution](#), or alcohol solution with at least 70% alcohol.
- Follow the manufacturer's instructions for all cleaning and disinfection products (e.g., concentration, application method, contact time, and personal protective equipment).
- Ensure adequate supplies to support frequent cleaning and disinfection practices.

Ventilation

- Increase air exchange on the bus and the input of outside air via available mechanisms, including opening the roof vents and some windows as weather and safety allows.
 - For buses with air conditioning, increasing circulation of outside air should still be performed to the extent possible, since the air conditioning on these buses only recirculates interior air.
 - Recognize that frequent openings of the door will also increase air exchange.

Personal Prevention Practices

- Masks are required by [Federal Order](#) on school buses and other forms of public transportation in the United States. Drivers and passengers must wear face masks or cloth face coverings that cover the nose and mouth while on public school buses/ transportation. Cloth face coverings should not be used on children under two years old, anyone who has trouble breathing, or anyone unable to remove the face covering without assistance.
- The CDC has a [pattern](#) and a [video](#) available demonstrating how to make a cloth face covering.

Messaging to Parents

- Educate drivers and students and their parents on the [symptoms](#) of COVID-19 and the importance of staying home if they have any of the symptoms or if anyone in their household tests positive for the disease.
- Frequently send a message to parents via a variety of methods the importance of social distancing, including not allowing students to congregate at bus stops.
- Translate messaging to appropriate languages.

References

- DHEC COVID-19 webpage: scdhec.gov/covid19

- What Bus Transit Operators Need to Know About COVID-19 (CDC): [cdc.gov/coronavirus/2019-ncov/community/organizations/bus-transit-operator](https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/bus-transit-operator)

This is consistent with guidance available as of September 7, 2021 and may be updated as new information on this novel virus and evolving situation become available.



K-12 Schools Interim Guidance for Management of COVID-19 Cases

January 4, 2022

This guidance is intended for K-12 schools to plan their response to known and possible cases of COVID-19 as well as known contacts. This is based on what is currently known about COVID-19 and will be updated as more information and guidance become available. (*Information updated since last guidance provided in italics*).

Definitions

Close contact: Someone who was within 6 feet of an infected person (laboratory-confirmed or a clinically compatible illness) for a cumulative total of 15 minutes or more over a 24-hour period (for example, three individual 5-minute exposures for a total of 15 minutes) from 48 hours prior to symptom onset (or specimen collection for an asymptomatic infected person) of the infected person.

- The close contact definition excludes students who were within 3 to 6 feet of an infected student (laboratory-confirmed or a clinically compatible illness) if the exposed student(s) wore mask(s) during the exposure time. This exception does not apply to teachers, staff, or other adults in the indoor classroom setting.
- Close physical contact can include contact with the mucous membranes of a COVID infected person through such things as, kissing, sharing eating/drinking utensils, etc., regardless of the time frame.

Contact tracing: The practice of identifying, notifying, and monitoring individuals who may have had close contact with a person determined to be a confirmed or probable case of an infectious disease as a means of controlling the spread of infection.

Diagnostic Testing: The use of viral (antigen or PCR) COVID-19 tests to determine if an individual with symptoms compatible with COVID-19 is currently infected with SARS CoV-2, the virus that causes COVID-19.

Isolation: Isolation is used to separate people infected with the virus (those who are sick with COVID-19 and those with no symptoms) from people who are not infected. They must remain at home or the place they were told to isolate and avoid contact with other people until their isolation period is over. This includes avoiding contact with those in their household as much as possible.

Maximally vaccinated: a person who has completed their primary vaccine series and has had a booster shot if eligible.

OTC: Over the Counter Use – a medical product approved for use at home without need of a medical professional and without a prescription.

PPE: Personal protective equipment that includes but is not limited to medical grade gloves, face masks, N-95 Respirators, face shields, and gowns.

Prevention strategies: Actions taken to help reduce the transmission of the virus that causes COVID-19.

Quarantine: Quarantine is used to separate people who are close contacts of someone with a contagious disease, like COVID-19, from others for a period of time to see if they become sick. This is a method to prevent the spread of disease. When someone is quarantining, they should stay home and avoid contact with other people until the quarantine period is over. This includes people in their household as much as it is possible.

Rapid Test: A test (antigen or PCR) that is administered and processed within the same day on premise without sending to another location for processing. Results are typically processed and available within several minutes.

Screening: Routine, typically performed at least once weekly, viral (PCR or antigen) testing of asymptomatic individuals in order to identify asymptomatic individuals infected with SARS CoV-2, the virus that causes COVID-19.

Preparation for COVID Cases in the School

Schools should identify a room that is available to be used for the purpose of isolating students or staff who exhibit symptoms of COVID-19 during the school day.

- Students and staff should be moved safely, respectfully, as well as in accordance with any applicable privacy laws or regulations, to the isolation room for evaluation. The individual will be provided a mask which they **must** wear if they are able to use one, and students should be supervised by a staff member who maintains at least six feet of distance and uses appropriate personal protective equipment (PPE) if available.
- School nurses and other healthcare providers should use [Standard and Transmission-Based Precautions](#) when caring for sick people. See: What Healthcare Personnel Should Know About [Caring for Patients with Confirmed or Possible COVID19 Infection](#).
- Health rooms and isolation rooms should be treated as healthcare setting and are classified differently than other school settings when establishing preventive actions within schools.
- DHEC recognizes the workload associated with case investigation and contact tracing and recommends districts utilize additional trained staff as needed. Staffing companies with trained personnel are available, and/or individuals without a healthcare or public health background can be educated and trained to assist. Contact tracing training resources can be found here:
 - [CDC Contact Tracing Course](#)
 - [John's Hopkins University Contact Tracing Training](#)
 - [ASTHO Contact Training](#)

Individuals with symptoms of COVID-19 (but no known exposures to COVID-19)

Individuals should be excluded from school if they have any of the following with or without fever:

- Shortness of breath or difficulty breathing -or -
- Loss of taste or smell -or -
- New or worsening cough

If these symptoms are explainable by an underlying condition (such as shortness of breath for an individual with asthma) exclusion may not be necessary.

This is not a complete list of all symptoms of COVID-19, but only those that should trigger an automatic exclusion and evaluation for COVID-19. Other symptoms may include fever, chills, fatigue, muscle or body aches, headache, sore throat, congestion or runny nose, nausea/vomiting, or diarrhea. A person is able to spread the virus up to two (2) days before they have any symptoms, but many COVID-19 cases show no symptoms at all.

Given the overlap of COVID-19 symptoms with other more common illnesses and the lack of symptoms in many cases, it is not possible to identify and exclude all cases of COVID-19 through [screening of symptoms](#). Careful prevention strategies within the school are needed to reduce the chances of spread.

COVID Case in School

- **Isolation is required for all cases of COVID-19.**
- Enforce that staff and students disclose and stay at home or go home if:
 - They are showing COVID-19 symptoms, until they meet criteria for return described in the table below
 - They have tested positive for COVID-19, until they meet criteria for return described in the table below
- If a student or staff member tests positive for COVID-19, they could have been contagious with the virus up to 48 hours before their symptoms began or before their test specimen was collected (for those with no symptoms).

- Quarantine is required for an individual who has been a close contact of someone who is determined positive with COVID-19 either through testing or symptom consistent diagnosis, with the following two exceptions:
 - Individuals who are maximally vaccinated and do not have symptoms do NOT need to quarantine after a close contact. DHEC recommends testing at day 5, and they **must** wear a mask for 10 days unless eating or drinking or more than six feet from anyone else when outdoors.
 - People who have tested positive (PCR or antigen test) for COVID-19 within the past 90 days and recovered and do not have symptoms do NOT need to quarantine. DHEC recommends testing at day 5, and they **must** wear a mask for 10 days unless eating or drinking or more than six feet from anyone else when outdoors.
- There are options for the duration of quarantine:
 - 10 days of quarantine have been completed and no symptoms have been reported during daily at home monitoring.
 - 7 days of quarantine have been completed, no symptoms have been reported during daily at home monitoring, and the individual has received results of a negative antigen or PCR/molecular test that was taken no earlier than day 5 of quarantine.
 - 5 days of quarantine have been completed, no symptoms have been reported during daily at home monitoring, and the individual has received results of a negative antigen or PCR/molecular test that was taken no earlier than day 4 of quarantine.
- A close contact who is ending quarantine early (less than 10 days) and returning to the school environment **must** wear a mask through the remainder of the 10 days in order to return to in-person learning. The individual should also continue to monitor for symptoms through 10 days after the date of last exposure. DHEC will notify schools of any reported cases that may have been contagious while on campus.
- Schools that are conducting school-based testing (e.g., BinaxNOW) should refer to that guidance for reporting requirements.
- All close contacts at the school will need to be identified.
- If 3 or more COVID-19 cases are identified within a classroom or other cohort of students (e.g., sports team or extracurricular group) within fourteen (14) days of each other, consideration should be given to excluding all students and staff, who have not voluntarily provided evidence of vaccination, in the classroom (or cohort of students) for fourteen (14) days after contact with the last identified COVID-19 case. These cases should be reported to the regional DHEC health authorities using established reporting process. **This definition of a cluster or outbreak is subject to change as more is learned about the Omicron variant and its patterns of transmission.**
- See COVID-19 Interim Guidance for K-12 School Operations for thresholds for consideration for a school temporarily going to virtual learning.
- The classroom (or room used by the cohort of students) may need to be closed for cleaning and disinfection before use again.

Management of Cases and Contacts in School Settings

Adhere to the following criteria for allowing a student or staff member to return to school:

	Scenario	Criteria to return to school
Asymptomatic Diagnosis	Person has tested positive with an <u>antigen test</u> but does not have symptoms of COVID-19 and is not known to be a close contact to someone diagnosed with COVID-19.	<p>The person can return to school 5 days after the positive test, as long as they do not develop symptoms. A mask must be worn through Day 10. The person is not required to have documentation of a negative test in order to return to school.</p> <p>Exception: If the person has a PCR/molecular test performed within 24 – 48 hours of their positive antigen test, and that PCR/molecular test is negative: the positive antigen test can be considered a false positive and the person can immediately return to school.</p>