

DESE Masking Guidance



Essex & Manchester Vaccination Rates by Age Groups

- Below 70% highlighted in red
- Between 70-79% in yellow
- Above 80% in green



| Town | Age Group | Population | Individuals with at least one dose per capita | Fully vaccinated individuals per capita | Individuals with booster doses | Individuals with booster doses per capita |
|------------|-------------|------------|---|---|--------------------------------|---|
| Essex | 5-11 Years | 273 | 72% | 65% | - | 0% |
| Essex | 12-15 Years | 224 | 81% | 75% | 48 | 21% |
| Essex | 16-19 Years | 195 | 88% | 81% | 92 | 47% |
| Essex | 20-29 Years | 385 | 79% | 65% | 108 | 28% |
| Essex | 30-49 Years | 854 | 90% | 83% | 439 | 51% |
| Essex | 50-64 Years | 893 | 94% | 86% | 551 | 62% |
| Essex | 65-74 Years | 466 | >95% | 87% | 334 | 72% |
| Essex | 75+ Years | 253 | >95% | 92% | 209 | 83% |
| Essex | Total | 3,728 | 85% | 77% | 1,781 | 48% |
| Manchester | 5-11 Years | 404 | 70% | 60% | - | 0% |
| Manchester | 12-15 Years | 312 | >95% | 94% | 106 | 34% |
| Manchester | 16-19 Years | 307 | >95% | >95% | 203 | 66% |
| Manchester | 20-29 Years | 362 | >95% | >95% | 191 | 53% |
| Manchester | 30-49 Years | 860 | >95% | 91% | 517 | 60% |
| Manchester | 50-64 Years | 1,294 | >95% | 91% | 864 | 67% |
| Manchester | 65-74 Years | 711 | >95% | >95% | 578 | 81% |
| Manchester | 75+ Years | 511 | >95% | 93% | 402 | 79% |
| Manchester | Total | 4,899 | >95% | 88% | 2,861 | 58% |

Current Masking Guidance



- DESE – *Masking Voluntary but recommended for unvaccinated individuals. Still required on school buses.*
- Essex & Manchester – *No Mask Requirements ended by BOH February 10th.*
- CDC - *Ages 2 years and older should properly wear a well-fitting mask indoors in public in areas of substantial or high community transmission, regardless of vaccination status.*
 - *You might choose to wear a mask regardless of the level of community transmission, if you or someone in your household is at increased risk for severe disease or has a weakened immune system, or if someone in your household is not up to date on their COVID-19 vaccines or not eligible to receive COVID-19 vaccines.*

DESE Guidance



- *After consulting with medical experts and state health officials, the Commissioner will not renew the state mask requirement after it expires on February 28, 2022. Effective Monday, February 28, the DESE mask requirement will be lifted statewide. The Commonwealth's high vaccination rates and widespread availability of COVID-19 testing for school personnel and students support this decision.*
- Masking continues to be required on all school buses, per federal order. DESE and DPH strongly recommend students and staff continue to follow the DESE-DPH Protocols for Responding to COVID-19 Scenarios.
- *As always, any individual who wishes to continue to mask, including those who face higher risk from COVID-19, should be supported in that choice. DESE and DPH strongly recommend unvaccinated individuals should continue to wear masks in school settings.* The Commissioner will continue to monitor public health data, consult with medical experts and state health officials, and issue further guidance and/or requirements as needed.

Going Forward



■ Recommendation

- Alignment w/ DESE Guidance as been our practice this year beginning February 28th
- Require Masks for attendance under the following conditions:
 - Return to school following five day COVID positive absence mask required for five days
 - Symptomatic faculty/student when determined necessary by school nurse
 - *Request that those suffering with respiratory symptoms wear masks*
 - In the health room

This is based on current guidance from DESE and will be revisited in the event of new guidance issued or local boards of health mandates



Jeffrey C. Riley
Commissioner
Massachusetts Department of
Elementary and Secondary Education



Margret R. Cooke
Acting Commissioner
Massachusetts Department of Public Health

MEMORANDUM

TO: Superintendents, Charter School Leaders, Assistant Superintendents,
Collaborative Leaders, Leaders of Approved Special Education Schools

FROM: Jeffrey C. Riley, Commissioner, Department of Elementary and Secondary
Education
Margret R. Cooke, Acting Commissioner, Department of Public Health

SUBJECT: DESE/DPH Protocols for Responding to COVID-19 Scenarios - SY 2021-22

DATE: August 13, 2021, updated January 31, 2022

Introduction

On July 30th, the Department of Elementary and Secondary Education (DESE) and the Department of Public Health (DPH) released a [joint memo](#) on COVID-19 Guidance for Districts and Schools – Fall 2021. As outlined in the memo, all schools are required to be in-person, full-time, five days a week for the 2021-22 school year, and all previously released DESE health and safety requirements are lifted. In addition to outlining recommendations for school and district policies on masking, the memo also previewed new COVID-19 testing and quarantine response protocols for schools.

This document outlines the testing and quarantine response protocols for SY 2021-22. Districts and schools also received information about how to [sign up](#) for this school year's statewide COVID-19 testing program.. Districts may continue to sign up throughout the school year if they are not yet participating.

As outlined on DESE's updated [COVID-19 testing program](#) web page, **DESE and DPH released [updated testing program guidance](#) on January 18, 2022. Under this guidance, districts and schools may select a new option within the testing program to provide weekly at-home rapid antigen tests to students and staff and discontinue contact tracing and the Test and Stay protocol.** This option is available to districts and schools so long as they are participating in the symptomatic and/or pooled testing components of the statewide testing program. DESE and DPH recommend that districts select this new option, and if they choose to implement it, they must notify their local board of health. Districts and schools that choose to maintain Test and Stay will continue contact tracing and will not be eligible to receive rapid antigen at-home tests.

As a reminder, **routine** pooled testing was implemented during the 2020-2021 school year as a mitigation strategy which involves combining several individuals' test samples together into one "pool" and then testing the pooled sample for COVID-19. This approach increases the number of individuals that can be tested at one time and allows for regular testing in the school community for COVID-19. The full pooled testing guidance can be found at <https://www.doe.mass.edu/covid19/testing/>.

Symptomatic testing is also available to districts and schools for all individuals (including vaccinated, unvaccinated, and those who have tested positive for COVID-19 in the past 90 days) that present COVID-19 symptoms at school or on the bus as outlined in this guidance. Training for school health staff on BinaxNOW for this purpose can be found on the [BU SHIELD website](#).

Across all other testing program components (pooled testing, weekly at-home rapid antigen tests, and Test and Stay), individuals should not participate if they have tested positive for COVID-19 within the last 90 days.

DESE and DPH continue to strongly recommend that all faculty, staff, and eligible students receive the COVID-19 vaccine and booster. For schools that are interested in setting up vaccine clinics on campus with a DPH-approved mobile vaccination provider, including clinic staff and vaccination administrators, free of charge, please fill out a request via the [online form](#).

In addition to recommending COVID-19 vaccination, it continues to be essential that the educational and public health communities, as well as cities and towns, work together to ensure as many children and adults as possible receive flu vaccines. This will reduce the number of students who need to stay home due to illness.

Please contact the DESE Rapid Response Help Center at 781-338-3500 with any questions. Districts and schools must contact the Help Center for guidance if they are experiencing a high volume of cases. Notification should also be provided to local boards of health and district leadership.

Section 1: Key definitions

This section outlines the list of COVID-19 symptoms, provides the definition of a close contact, and outlines situations where close contacts are exempt from COVID-19 testing and quarantine response protocols including isolation, quarantine, and Test and Stay.

COVID-19 symptoms

Below is the full list of symptoms for which caregivers should monitor their children, and staff should monitor themselves.¹

At this time, based on the advice of public health officials and medical experts, DESE and DPH are revising the symptoms list to align with DPH [statewide guidance](#). While previous guidance provided a differentiated symptoms list for vaccinated and unvaccinated individuals, the new symptoms list below applies to all individuals, regardless of vaccination status. Individuals who experience any symptoms on the list below should follow the testing and quarantine response protocol for symptomatic individuals (Protocol C) as outlined in Section 2 of this document. Please note that, consistent with the DPH [Public Health Advisory Regarding COVID-19 Testing](#), these protocols have been adjusted to recommend, but not require, a COVID-19 test to return to school.

COVID-19 symptoms list:

- Fever (100.0° Fahrenheit or higher), chills, or shaking chills
- Difficulty breathing or shortness of breath
- New loss of taste or smell
- Muscle aches or body aches
- Cough (not due to other known cause, such as chronic cough)
- Sore throat, *when in combination with other symptoms*
- Nausea, vomiting, or diarrhea *when in combination with other symptoms*
- Headache *when in combination with other symptoms*
- Fatigue, *when in combination with other symptoms*
- Nasal congestion or runny nose (not due to other known causes, such as allergies) *when in combination with other symptoms*

Definition of a close contact

Close contacts are defined as individuals who have been within 6 feet of a COVID-19 positive

¹ <https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html>

individual while indoors, for at least 15 minutes during a 24-hour period.^{2 3} Please note that the at-risk exposure time begins 48 hours prior to symptom onset (or time of positive test if asymptomatic) and continues until the time the COVID-19 positive individual is isolated.

In general, close contacts should follow the testing and quarantine response protocols in Section 2 of this document. **However, certain close contacts are exempt from testing and quarantine response protocols as noted below.**

Close contacts who are exempt from testing and quarantine response protocols

The following close contacts are exempt from testing and quarantine response protocols:

- **Asymptomatic, fully vaccinated⁴ close contacts:** Individuals who are asymptomatic and fully vaccinated are exempt from testing and quarantine response protocols.
- **Classroom close contacts:** An individual who is exposed to a COVID-19 positive individual in the classroom while both individuals were masked, so long as the individuals were spaced at least 3 feet apart, is exempt from testing and quarantine response protocols.
- **Bus close contacts:** Individuals on buses must be masked according to federal requirements. As such, individuals who are masked on buses when windows are open are exempt from testing and quarantine response protocols.
- **Close contacts who have had COVID-19 within the past 90 days:** An individual who has been previously diagnosed with COVID-19 and then becomes a close contact of someone with COVID-19 is exempt from testing and quarantine response protocols if:
 - The exposure occurred within 90 days of the onset of their own illness AND
 - The exposed individual is recovered and remains without COVID-19 symptoms.

Section 2: Recommended testing and quarantine response protocols

This section outlines testing and quarantine response protocols for individuals – students and staff – who test positive for COVID-19, close contacts who are not exempt from testing and quarantine response protocols, and symptomatic individuals. Each scenario outlines the duration of any recommended quarantine or isolation, the conditions to be met in order for the individual to return to school, and any additional considerations.

² Note: To be a close contact, the 15 minutes must occur within a 24-hour period. Multiple brief or transitory interactions (less than a minute) throughout the day are unlikely to result in 15 minutes of cumulative contact and do not meet the definition of close contact.

³ CDC definition of Close Contact. Available at: <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/operation-strategy.html>.

⁴ At this time, fully vaccinated is defined as two-weeks following the completion of the Pfizer or Moderna series or two-weeks following a single dose of Johnson & Johnson's Janssen vaccine.

Overview of Protocol Categories:

- Protocol A: For individuals who test positive for COVID-19
- Protocol B: Protocol for asymptomatic close contacts
- Protocol C: Protocol for symptomatic individuals

Protocol A: For individuals who test positive for COVID-19

Protocol A for individuals who test positive

- **Duration:** Self-isolation for COVID-19 positive cases is a minimum of 5 days after symptom onset or after positive PCR or antigen test, if asymptomatic.
- **Return to school:** After 5 days⁵ and once they have:
 - Been without fever for 24 hours (and without taking fever-reducing medications)
 - Experienced improvement in other symptoms.
 - Following the 5-day isolation period, individuals must mask for 5 additional days when around others, other than when eating, drinking, or outside.
- **Note:** Return to school should be based on time and symptom resolution. Testing during isolation to return to school is not required.

Protocol B: Protocol for asymptomatic close contacts

Protocol B* (New Version) for Districts and Schools that Selected the New Testing Option to Provide At-home Rapid Antigen Tests

Updated testing guidance from DESE and DPH recommend that districts select the new option within the statewide testing program to offer weekly rapid at-home antigen tests to students and staff and discontinue contact tracing and Test and Stay programs. As such, for districts selecting this new option, individuals will no longer be identified as close contacts by school health professionals.

However, individuals may still be identified as close contacts outside of school settings (e.g. as a close contact of someone who tests positive for COVID-19 in their household). In these cases:

- While in school settings (including for sports and extracurriculars), asymptomatic vaccinated⁶ individuals remain exempt from testing and quarantine protocols. If an asymptomatic, vaccinated individual is identified as a close contact outside of school,

⁵ If an individual tests positive as part of a group pooled test, the 5-day isolation period (Day 0) begins the day the positive group pooled test was collected.

⁶ At this time, fully vaccinated is defined as two-weeks following the completion of the Pfizer or Moderna series or two-weeks following a single dose of Johnson & Johnson's Janssen vaccine.

they may return to school. Individuals should closely monitor for symptoms and follow Protocol C if they experience symptoms listed in Section 1.

- **Unvaccinated individuals** who are identified as close contacts outside of school settings should stay home and follow Protocol B* below prior to returning to school:

Protocol B* (New Version): Protocol for asymptomatic, unvaccinated individuals identified as close contacts outside of school settings

- **Duration:** Quarantine is at least 5 days from the date of exposure
- **Return to School:** After 5 days, returning on day 6, provided that they:
 - Remain asymptomatic,
 - Adhere to strict mask use, other than when eating, drinking, or outside, and conduct active monitoring for symptoms through day 10; and,
 - Self-isolate if symptoms develop.
- **Note:** If an individual has symptoms at the time they are designated as a close contact or within the 5 days following initial exposure, they should follow the protocol for symptomatic individuals (Protocol C). If an individual tests positive at any time, they follow the protocol for individuals who test positive for COVID-19 (Protocol A). For all those exposed, best practice would also include a viral test (antigen or PCR) for COVID-19 at day 5 after exposure. An antigen test may be self-administered and does not need to be proctored or performed by a healthcare professional.

Protocol B (Legacy Version) for Districts and Schools Choosing to Maintain Contact Tracing and Test and Stay

Only schools and districts that choose to maintain contact tracing and the Test and Stay program should follow the guidelines in Protocol B (Legacy Version) below. Please recall that all asymptomatic, fully vaccinated individuals are exempt from close contact testing and quarantine response protocols and therefore do not need to follow Protocol B. However, fully vaccinated individuals are expected to monitor for symptoms, stay home and get tested if they experience symptoms, in alignment with Protocol C.

Protocol B (Legacy Version) for asymptomatic close contacts who are not exempt from testing and quarantine response protocols

Districts who choose to maintain contact tracing and are participating in the statewide COVID-19 testing program or another similar testing program are encouraged to utilize the Test and Stay (B-1) protocol option to minimize the amount of time individuals are out of

school. This testing and quarantine response protocol has been shown to be generally equivalent to quarantine for school-based contacts, and a safe alternative to at-home isolation.⁷

Individuals who are part of the Test and Stay protocol may be eligible to participate in school sports and extracurricular activities, provided that they are in compliance with the applicable protocol. For events and sports that take place on non-school days, testing will still be required on those days to participate.

As part of Test and Stay, quarantine is still strongly recommended for individuals outside of school settings.

Protocol B-1: Test and Stay

- **Duration of Test and Stay:** 5 days from the date of exposure
- **Return to School:** Close contacts can remain in school and do not have to quarantine, as long as they:
 - Are asymptomatic
 - Wear masks in school at all times, other than when eating, drinking, or outside. When these individuals cannot be masked (i.e., when eating or drinking) they should maintain 3 feet of distance from other individuals to the extent feasible.
 - Take a rapid antigen test (e.g., BinaxNOW) on each school day and receive a negative result. When the 5 days from date of exposure includes weekends or holidays, individuals should quarantine on weekends, and if they remain asymptomatic, upon return to school be tested immediately. If the individual remains negative, they can stay in school.
 - Conduct active monitoring for symptoms through day 10, and self-isolate at home if symptoms develop.
- **Note:** If an individual has symptoms at the time they are designated as a close contact or develops symptoms during the Test and Stay period or the 10 days following initial exposure, they should follow the protocol for symptomatic individuals (Protocol C). If an individual tests positive at any time, they should follow the protocol for individuals who test positive for COVID-19 (Protocol A).

Protocol B-2: Traditional protocol (if school does not have access to rapid daily testing or family or adult individual chooses not to participate in Test and Stay)

- **Duration:** Quarantine is at least 5 days from the date of exposure
- **Return to School:** After 5 days, returning on day 6, provided that they:
 - Remain asymptomatic;

⁷ Bernadette C Young, David W Eyre, Saroj Kendrick, Chris White, Sylvester Smith, et. al. "A cluster randomized trial of the impact of a policy of daily testing for contacts of COVID-19 cases on attendance and COVID-19 transmission in English secondary schools and colleges." (July 2021). medRxiv. Available at: <https://www.medrxiv.org/content/10.1101/2021.07.23.21260992v1>

- Adhere to strict mask use, other than when eating, drinking, or outside, and conduct active monitoring for symptoms through day 10; and,
 - Self-isolate if symptoms develop.
- **Note:** If an individual has symptoms at the time they are designated as a close contact or within the 5 days following initial exposure, they follow the protocol for symptomatic individuals (Protocol C). If an individual tests positive at any time, they follow the protocol for individuals who test positive for COVID-19 (Protocol A). For all those exposed, best practice would also include an antigen or PCR test for COVID-19 at day 5 after exposure. An antigen test may be self-administered and does not need to be proctored or performed by a healthcare professional.

Protocol C: Protocol for symptomatic individuals

Protocol C applies to vaccinated and unvaccinated individuals who experience the COVID-19 symptoms listed in Section 1 and who have not tested positive for COVID-19.

Protocol C for symptomatic individuals: Return to school post-symptoms with optional test⁸

- **Duration:** Dependent on symptom resolution
- **Return to School:** Individuals may return to school after they:
 - Have improvement in symptoms
 - Have been without fever for at least 24 hours without the use of fever-reducing medications.
 - It is also recommended that individuals receive a negative PCR or antigen test result for COVID-19. An antigen test may be self-administered and does not need to be proctored or performed by a healthcare professional. Note: So long as the individual is not a close contact, if a medical professional makes an alternative diagnosis for the COVID-19-like symptoms, the individual may use this recommendation (e.g., for influenza or strep pharyngitis) in lieu of a PCR test or antigen test.
- **Please note:** If an individual has mild symptoms, the individual may be considered for testing using BinaxNOW, if available.
 - If the result is positive, they should be sent home and follow Protocol A.
 - If the result is negative, they should remain in school.

⁸ Please note that, consistent with the DPH Public Health Advisory Regarding COVID-19 Testing, these protocols have been adjusted to recommend, but not require, a COVID-19 test to return to school.

- If the minimal symptom(s) persist, the individual may be re-tested within the subsequent 3 days. If symptoms worsen, the individual should seek medical care and be evaluated for the need for PCR testing.

Section 3: Routine COVID pooled testing protocols

Routine COVID pooled testing involves combining several test samples together and then testing the group sample with a PCR test for detection of COVID-19. Testing for all consenting students and staff members will typically take place once per week.

Unvaccinated district and school staff and students who submit consent forms are strongly encouraged to participate in voluntary routine COVID pooled testing. This includes contracted staff such as bus drivers. Vaccinated staff and students may also participate in pooled testing if they submit consent forms; however, this is not recommended. An individual who has tested positive for COVID-19 in the past 90 days should not participate in pooled testing.

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| Protocol for routine COVID pooled testing |
| If the routine <u>group pooled testing</u> result is negative, then: |
| <ul style="list-style-type: none"> • All individuals within that group are presumed negative and should remain in school. |
| If the routine <u>group pooled testing</u> result is positive, then: |
| <ul style="list-style-type: none"> • All individuals within that group should be retested individually by rapid antigen (e.g. BinaxNOW) or PCR test. • If asymptomatic, members of the group should return to school until and unless an individual is identified as positive. Individuals in the group should wear masks until the positive individual is identified. • Symptomatic members of the group should stay home and follow Protocol C. |