



FAQ for Staff & Parents

As of 10 Sep 2020

Q-1: If a parent, spouse or other household member that lives with a student or staff member tests positive, is this considered a confirmed case in the school?

A-1: Assuming the infected individual did not enter the school, this would not be considered a confirmed case in the school. The student or staff member who lives with the infected individual would be considered a close contact and will be required to self quarantine for 14 days. Note: If the student or staff member develops symptoms and/or tests positive while in quarantine, a new case investigation and 10-day isolation period would begin.

Q-2: If one student in a classroom tests positive for COVID-19, is everyone in that same classroom considered a close contact?

A-2: Each positive case within a classroom will be investigated to determine if other students/staff are close contacts. The Centers for Disease Control defines a close contact as any individual who was within 6 feet of an infected person for at least 15 minutes starting from two days before illness onset or, for asymptomatic patients, two days prior to positive specimen collection until the time the patient is isolated. Close contacts will be notified and will be required to complete a 14-day quarantine period to monitor for symptoms.

Q-3: Will schools be notified if one of their staff or students is identified as a positive case or a close contact of someone testing positive for COVID-19?

A-3: The Anchorage Health Department (AHD) will notify the designated ASD nurse of a positive case related to the school. Through the AHD investigation and in coordination with the school nurses, school close contacts will be determined. The process for school notification is as follows:

1. ASD will be notified of a positive case. Positive cases will be required to isolate for 10 days.
2. The AHD will work closely with the school nurses to identify close contacts. Close contacts will be required to quarantine for 14 days.
3. Once close contacts are identified, the school will notify the identified close contacts using email, phone call, or letter sent home. The school may include the following information:
 - a. Your child has been identified as a close contact
 - b. Your child will be required to quarantine at home for 14 days.
4. Following the school's notification directing close contacts of the above information (#3), close contacts will be provided with education around quarantine and monitoring of symptoms. The school is NOT responsible for conducting the contact tracing.



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Q-4: If a school is notified mid-day of a positive case within a building, is the recommendation to immediately remove students from the impacted area for cleaning or wait until the end of the school day?

A-4: Dismissal at the end-of-day is appropriate. However, many factors would go into the decision to close parts, or all, of a school building. Schools will work with their school nurse, state health officials, and district leadership to make decisions regarding earlier dismissal.

Q-5: If a student who is identified as a close contact tests negative for COVID-19 during the 14-day quarantine period, can they return to school?

A-5: No. If a student tests negative during their quarantine period, the individual still needs to remain in quarantine until 14 days have passed since their last exposure.

Q-6: What do we do if a student has tested positive for COVID-19, but their parent refuses to obey isolation orders (i.e. continues to send the child to school despite being told not to)?

A-6: The school will work with the AHD to obtain a public health order. If the child continues to come to school, in violation of the public health order, the AHD and ASD may seek court enforcement of the order.

Q-7: Will the AHD let school officials know when a student can return to school, whether they're a close contact or a confirmed case?

A-7: The AHD will alert the school nurse of any student in the school who has tested positive, but will not alert the school when an individual (positive case or close contact) is released from isolation or quarantine. AHD will provide a letter, upon request, to positive cases who complete their isolation period indicating they can return to school. Parents will be responsible to provide these letters to the school.

Close Contacts

Q-1: How is a close contact determined?

A-1: CDC guidance states that a close contact is defined as any individual who was within 6 feet of an infected person for at least 15 minutes. The AHD follows CDC guidance to determine close contacts.



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Q-2: How soon will close contacts be notified by ASD or AHD? What if someone who is considered a close contact shows up for school?

A-2 Typically, ASD and/or AHD will begin reaching out within 24 hours of identification of a close contact. Some contacts may require additional time if staff are unable to connect, the person doesn't answer the call, or the staff have limited or no contact information. Close contacts will be required to quarantine at home for 14 days.

Q-3: What should I do during the time period between when I've been notified of a positive case in one of my buildings and before AHD or ASD has contacted me to discuss close contacts?

A-3: The school should exclude the positive case and will begin gathering close contact information. School nurses and school leadership can determine who they feel are close contacts without confirmation by AHD and will begin notifying them.

Infection Control

Q-1: Many people with COVID-19 are asymptomatic. Should we still screen students for temperature and symptoms?

A-1: On July 23, CDC released guidance specific to screening. This guidance does not recommend universal screening of students be conducted by schools. The guidance does say that parents/caregivers should conduct daily monitoring of their children for signs of infectious illness, and students who are sick should not attend school in-person.

Q-2: Is ASD requiring students and staff to wear masks?

A-2: Yes all students and staff are required to wear a face covering.

Q-3: Should teachers use clear face shields in place of cloth masks, so students can pick up on facial cues and mouth formations?

A-3: From a public health perspective, clear face shields are a tool for protection against COVID-19, specifically around the eyes, but they do not replace face coverings due to large gaps on the side and bottom. From an educational perspective, clear face shields may be appropriate when it is important that students can see a teacher's facial expressions and mouth movements. For example, face shields would be appropriate when teaching English language learners and students who are deaf or hearing impaired.



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Q-4: How do we handle students who are wearing the same masks over and over without washing? Do the masks become less effective in that case?

A-4: Cloth masks should be washed regularly. Each school will have a supply of disposable and washable face coverings to give to students who need a clean mask.

Q-5: Who will supply infection control materials to the schools?

A-5: Generally, schools will need to purchase their own infection control supplies. There may be times when schools can access certain items from the State's supply of personal protective equipment, which is normally reserved for healthcare workers. These opportunities will be communicated by Anchorage Emergency Operations Center.

Sentinel Testing

Q-1: I've heard that some States are requiring sentinel testing for schools. How can I learn more?

A-1: Some states are requiring sentinel testing for schools. Sentinel testing involves testing a few asymptomatic individuals over time (i.e. each week or month) to monitor SARS-CoV-2 in a population. The State of Alaska is looking into this process, but no decision has been made at this time

Communication with Parents and Students

Q-1: Will the state help school leaders communicate with their school community if there is a confirmed case of COVID-19?

A-1: Schools in collaboration with the AHD communicate directly with individuals who test positive for COVID-19, as well as their close contacts. The AHD can also assist a school in determining best methods for communicating with the larger school community about a positive case(s). Communication should be designed to address the school community's desire for information, while also protecting student/staff privacy.

Q-2: How do we communicate with our school community while still following HIPAA and FERPA?

A-2: Communication to the broader school community will need to be general and protect student/staff privacy. AHD may enlist the help of school leaders in identifying close contacts.



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When AHD shares this type of information, school nurses would be bound by FERPA requirements to keep this information confidential.

Q-3: How do we best calm anxiety about returning to school?

A-3: Communication is critical. Be transparent in your communications at the local level with your school community. This is crucial to managing expectations. Let parents, staff, and students know that guidance, practices, and policy will change as our understanding of the virus improves. Remember that this is a stressful time for everyone. Encourage kindness and empathy.

Miscellaneous

Q-1: Are students who are participating in distance learning still required to be vaccinated?

A-1: Yes, state law requires any child, prior to admission, to provide certification that the child has received, or is in the process of receiving, adequate immunization against certain infectious diseases. Religious and Medical exemptions are required to be up-to-date.

Scenarios

Scenario 1: Close contact with someone who has COVID-19—will not have further close contact

Your last day of quarantine is 14 days from the date you had close contact. Date of last close contact with person who has COVID-19 + 14 days= end of quarantine

Scenario 2: I had symptoms and tested positive for COVID-19.

You can be with others after 24 hours with no fever AND Symptoms improved AND 10 days since symptoms first appeared. Depending on your healthcare provider's advice and availability of testing, you might get tested to see if you still have COVID-19. If you will be tested, you can be around others when you have no fever, symptoms have improved, and you receive two negative test results in a row, at least 24 hours apart.



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Scenario 3: I had no symptoms, but tested positive for COVID-19.

If you continue to have no symptoms, you can be with others after: **10 days have passed since the test**. Depending on your healthcare provider's advice and availability of testing, you might get tested to see if you still have COVID-19. If you develop symptoms after testing positive, follow the guidance above for Scenario 2.

Scenario 4: Live with someone who has COVID-19 and cannot avoid continued close contact

I live in a household where I cannot avoid close contact with the person who has COVID-19. I am providing direct care to the person who is sick, don't have a separate bedroom to isolate the person who is sick, or live in close quarters where I am unable to keep a physical distance of 6 feet. You should avoid contact with others outside the home while the person is sick, and quarantine for 14 days **AFTER** the person who has COVID-19 meets the [criteria to end home isolation](#). Date the person with COVID-19 ends home isolation + 14 days = end of quarantine (could be 24+ days of quarantine).

Scenario 5: I am a contact of a close contact of a person who tested positive for COVID-19.

Watch for COVID-19 symptoms, but no quarantine is recommended for contacts of contacts. If the close contact tests positive for COVID-19, then follow the criteria for Scenario 1.

Scenario 6: I had symptoms for a few days, but I am better now, when can I return to work?

You can return to work after 10 days from the start of symptoms **AND** you are fever free for 24 hours **AND** your symptoms are resolving OR You receive a negative test and have been fever free for 24 hours **AND** symptoms are improving OR You have a doctor's note that says that your symptoms are not COVID-19 related **AND** you are fever free for 24 hours **AND** symptoms are improving.



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Scenario 7: I am under quarantine and had additional close contact with someone who has COVID-19

I live with someone who has COVID-19 and started my 14-day quarantine period because we had close contact. What if I ended up having close contact with the person who is sick during my quarantine? What if another household member gets sick with COVID-19? Do I need to restart my quarantine? Yes. You will have to restart your quarantine from the last day you had close contact with anyone in your house who has COVID-19. Any time a new household member gets sick with COVID-19 and you had close contact, you will need to restart your quarantine. Date of additional close contact with person who has COVID-19 + 14 days = end of quarantine

Scenario 8: Close contact with someone who has COVID-19—live with the person but can avoid further close contact

I live with someone who has COVID-19 (e.g., roommate, partner, family member), and that person is isolated by staying in a separate bedroom. I have had no close contact with the person since they were isolated. Your last day of quarantine is 14 days from when the person with COVID-19 began home isolation. Date person with COVID-19 began home isolation + 14 days = end of quarantine