



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 December 30, 2021**

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, including the new “Test and Stay” protocol for districts in the [statewide COVID-19 testing program](#) or for districts with a similar, separate testing initiative. With the addition of Test and Stay, we hope to support districts and schools in keeping as many students in school as possible, safely, this school year.

Districts and schools have also received information the week of August 9, 2021 about how to [sign up](#) for this school year’s statewide COVID-19 testing program, which will serve as a critical surveillance tool for districts in administering the Test and Stay program, as well as diagnostic testing and routine COVID-19 pooled testing.

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/>.

The Test and Stay program is a testing initiative intended for asymptomatic close contacts of individuals with confirmed COVID-19. This testing program will allow asymptomatic close contacts to remain in school if they receive an individual rapid antigen test (e.g. BinaxNOW) each school day and test negative, as well as follow other guidelines as noted later this document.

DESE and DPH continue to strongly recommend that all faculty, staff, and eligible students to 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 fall. 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.

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 2}

Unvaccinated individuals and any close contacts presenting these symptoms should follow testing and quarantine response protocols as outlined in Section 2 of this document.

Vaccinated individuals who are not close contacts should follow the testing and quarantine response protocols if they are experiencing symptoms in bold. These individuals may also seek clinical guidance to assess the need for PCR testing if they have other symptoms on this list.

¹ Massachusetts DPH, [Testing of Persons with Suspect COVID-19](#). (2020, May 13).

² <https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html>

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 individual while indoors, for at least 15 minutes during a 24-hour period.^{3 4} 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 vaccinated⁵ 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

³ 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.

⁴ CDC definition of Close Contact. Available at: <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/operation-strategy.html>.

⁵ 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.

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.

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 days⁶ and once they have:
 - Been without fever for 24 hours (and without taking fever-reducing medications); and,
 - Experienced improvement in other symptoms.
 - Following the 5-day isolation period, individuals must mask for 5 additional days when around others. Individuals who are unable to mask should follow the information provided in the [FAQ](#) released on October 12, 2021.

⁶ If an individual tests positive as part of a group pooled test, the 5-day period begins the day the group pooled test returned a positive result.

- **Note:** Return to school should be based on time and symptom resolution. **Even with a 5-day isolation period, repeat viral testing prior to return is not recommended.**

Protocol B: Protocol for asymptomatic close contacts

Close contacts who are not exempt from testing and quarantine response protocols and are asymptomatic follow the guidelines in Protocol B 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 and stay home and get tested if they experience symptoms, in alignment with statewide guidance⁷ and Protocol C.

Note: In some cases, individuals may be asked to follow specific testing and quarantine response protocols (including durations for quarantine/isolation) provided by contact tracers or local health officials which may differ from the recommended protocols below.

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

Districts who participate in the statewide COVID-19 testing program or another similar testing program are strongly encouraged to utilize the new 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.⁸ If schools choose not to participate in the statewide COVID-19 testing program and do not participate in a similar testing initiative, unvaccinated individuals follow the traditional quarantine (B-2) protocol.

Individuals who are part of the Test and Stay protocols 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.

⁷ Guidance for People who are Fully Vaccinated Against COVID-19. Massachusetts DPH; August 2, 2021. Available at: <https://www.mass.gov/guidance/guidance-for-people-who-are-fully-vaccinated-against-covid-19>

⁸ 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>

Protocol B-1 (Recommended): 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 or drinking. 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 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, and
 - Conduct active monitoring for symptoms through day 10, self-isolate if symptoms develop, and adhere to strict mask use for an additional 5 days.
- **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 B-3 is deleted.

Protocol C: Protocol for symptomatic individuals

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

Protocol C for <u>symptomatic</u> individuals:
Protocol C-1 (Recommended): Return to school post-symptoms with test
<ul style="list-style-type: none">• Duration: Dependent on symptom resolution• Return to School: Individuals may return to school after they:<ul style="list-style-type: none">○ Have received 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.○ Have improvement in symptoms○ Have been without fever for at least 24 hours without the use of fever-reducing medications.• Note: If the symptomatic individual was a <u>close contact</u> who is not exempt from testing and quarantine response protocols, after symptoms resolve and they receive a negative PCR test, they should follow Protocol B-1 for Test and Stay.<ul style="list-style-type: none">○ If Test and Stay is not available or the family or adult individual opts not to participate, they follow Protocol B-2.
Protocol C-2: Alternative protocol for symptomatic individuals who are not close contacts and choose not to receive a COVID test to return to school
<ul style="list-style-type: none">• Duration: Isolation is at least 5 days from symptom onset.⁹• Return to School: After 5 days, returning on day 6, assuming they:<ul style="list-style-type: none">○ Have improvement in symptoms○ Have been without fever for at least 24 hours without the use of fever-reducing medication.

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.

⁹ <https://www.cdc.gov/coronavirus/2019-ncov/hcp/duration-isolation.html>

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. It is not recommended that any individual who has tested positive for COVID-19 in the past 90 days participate in pooled testing.

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.

Section 4: Frequently Asked Questions

Who should receive a diagnostic test?

- If staff or students are a close contact of someone who tested positive for COVID-19, **best practice is that** they should be tested and should follow the protocols outlined in Protocol B, unless they are exempted, as outlined above.
- If staff or students have COVID-19 symptoms, they should be tested and follow the protocols outlined in Protocol C.

Where can individuals receive an individual PCR test?

- Every school should have a list of available test sites. A [list of test sites is available here](#), and Massachusetts also has an [interactive testing map](#). Staff and students who have symptoms should also contact their primary care provider for further instructions.

When and how should BinaxNOW tests be used for diagnostic purposes?

- The BinaxNOW test is a rapid antigen test. Rapid antigen tests perform best when the person is tested in the early stages of infection with COVID-19, when the viral load is generally highest.

- When a student or staff member presents to the school health office with any symptom from the list in Section 1, they should receive a BinaxNOW test if available.
 - If the result is positive, they should be sent home and follow Protocol A.
 - If the result is negative, they should be sent home. The student’s parent/guardian, or the staff member, should be informed that the negative test is presumptive and they should follow Protocol C.
- Note: BinaxNOW tests are less sensitive and less specific than PCR tests. PCR confirmation is recommended for asymptomatic persons with a positive BinaxNOW test, and for symptomatic persons with a negative test, unless those symptoms are unlikely to be due to COVID-19. If the results are discordant, for the purposes of these protocols the PCR result would be taken as the true result, assuming the two tests are done within 2 days of each other.

How should schools address individuals with mild symptoms?

- If an individual has mild symptoms, the individual may be considered for testing using BinaxNOW, if available.
 - If the result if positive, they should be sent home and follow Protocol A.
 - If the result is negative, they should remain in 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.

How does contact tracing occur?

- When a person has a positive COVID-19 test, the local board of health **may** reach out to provide support so the individual can remain safely in medical isolation. They will also ask for help to identify close contacts.
- **The local board of health may** reach out to the individual's close contacts to provide information to help stop the spread of the virus, including how to safely quarantine.
- To further assist with contact tracing, the student/family and staff are asked to reach out to their personal contacts and notify the school. The school should also support contact tracing efforts within the school to the extent feasible.

What additional steps should schools take if someone presents symptoms of COVID-19?

- If someone is symptomatic at school or on the bus, they should be masked immediately and evaluated by the school health professional for symptoms.
- If individual has COVID-19 symptoms as outlined in Section 1, they should be masked, and when feasible, be in a separate room with the door closed until they can be picked up. For full guidance for school health offices, please see [Additional Information for School Health Offices](#)

What additional steps should schools take if someone tests positive for COVID-19?

- Determine if the individual was at school in the two days prior to symptom onset (or testing positive if asymptomatic) and until isolation.
 - If so, clean and disinfect the spaces an individual spent time in, if they have not already been cleaned.
- Note that for districts participating in the statewide testing program designated school staff and parents/care givers will receive results of each individual COVID test a student takes through the testing software platform.
- Communicate with families and staff of close contacts. This should include informing them that:
 - There was a positive test (**do not name the specific individual**)
 - Explain that the student/staff is a “close contact” and therefore should follow the protocols for close contacts outlined in Protocol B.
 - Remind individuals of the list of COVID-19 symptoms to monitor for (see Section 1).
 - Ask them to communicate external test results to the school.
- If the school finds out about the COVID-19 positive test in the middle of the school day:
 - Make sure students who are close contacts are wearing masks.
 - If close contacts are symptomatic, they should be masked, and when feasible, be in a separate room with the door closed until they can be picked up. For full guidance for school health offices, please see [Additional Information for School Health Offices](#)

What should districts and schools do if they have a high volume of cases?

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

Who should participate in routine COVID pooled testing?

- 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.
- It is not recommended that any individual who has tested positive for COVID-19 in the past 90 days participate in routine COVID pooled testing.

Who will administer routine COVID pooled testing?

- Based on guidance from DPH, staff and students who are in grades kindergarten and above are encouraged to self-administer the nasal swab under appropriate supervision and at the discretion of the trained observer.
- Tests may also be administered at school either by trained school staff, including school health professionals, or trained onsite test specimen collectors.

How should routine COVID pooled testing be grouped?

- “Membership” within a given pooled testing group should remain consistent when feasible.
- Teachers should be tested with their students to avoid staffing issues if each teacher needs an individual re-test.
- If districts or schools strongly prefer to create pooled testing groups composed exclusively of staff, they are limited to a maximum of 5 swabs per staff-only group and must have BinaxNOW tests available for immediate follow-up testing.

How often should routine COVID pooled testing occur?

- Routine COVID pooled testing should be conducted once a week in most scenarios.

What if the follow-up tests to a positive group pooled testing result in no individual positive tests?

- In the case where a positive group pooled testing returns no BinaxNOW individual positives upon follow-up testing, all members of the group should remain in school and be tested by another BinaxNOW test 1-2 days after the initial negative result.

For additional Frequently Asked Questions please see the [FAQ section](#) on the DESE website.