

2021-22 COVID-19 MSB Response Plan

(updated 1.21.22)

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Collaboration and Consultation

We are thankful for the consultation and advisement of Dr. Anamaria Bulatovic, MSB’s Medical Director, the MSB medical team and other medical experts as well as collaboration and consultation with other stakeholders including the MSB senior management team, supervisors, our parents and staff, the MSB board members, PK Law, the Baltimore City Health Department, Maryland State Health Department, Baltimore City Public Schools Superintendent, the Superintendent of the Maryland School for the Deaf, and the other schools for the blind Superintendents through the Council of Schools and Services for the Blind (COSB).

Factors in Decision Making

The health and safety of staff and students, particularly for those who are vulnerable to severe COVID-19 illness, depends on a well-reasoned approach to policies, procedures, and mitigation strategies in order to most effectively prevent the spread of COVID-19 on our campus.

In the case of the Maryland School for the Blind, there are many students with underlying health conditions that put them at increased risk. In fact, 1/3 of the 200+ students enrolled at MSB, have underlying conditions that qualify them as at risk for severe COVID-19 disease. Because we also operate a residential program, there is more time for disease to spread.

Prevalence

A primary consideration for safe in-person instruction is the prevalence of COVID-19 and the level of transmission in the local community. The lower the prevalence and transmission in the community, the less likely someone will bring the virus on campus.

CDC (February 2021) establishes indicators of community transmission as “total new cases per 100,000 persons in the past 7 days (low, 0-9; moderate, 10-49; substantial, 50-99; high, ≥100) and percentage of positive tests in the past 7 days (low, <5%; moderate, 5-7.9%; substantial, 8-9.9%; high, ≥10%).

While risk of exposure to SARS-CoV-2 in a school may be lower when indicators of community spread are lower, this risk is also dependent upon the implementation of school and community mitigation strategies, including requiring universal and correct use of masks, physical distancing handwashing and respiratory etiquette, cleaning and maintaining healthy facilities, and contact tracing in combination with isolation and quarantine. (rev. February 2021)

Regardless of the level of community transmission, MSB uses multi-layered [mitigation strategies](#). The five key mitigation strategies we use are essential to safe delivery of in-person instruction:

- Universal and correct use of [masks](#)
- [Physical distancing](#)
- [Handwashing and respiratory etiquette](#)
- [Cleaning](#) and maintaining healthy facilities
- [Contact tracing](#) in combination with isolation and quarantine, in collaboration with the health department

Information on Community Transmission can be found in the [MSB Return to School Plan](#)

COVID-19 Vaccination and Testing

Vaccination is highly encouraged for all staff and students who are eligible. Staff who do not provide proof of vaccination will be required to submit to weekly COVID-19 screening tests on campus.

Though masking and social distancing are required, many MSB students are unable to do so. MSB will use screening testing as a strategy to identify cases and prevent secondary transmission. Screening testing provides an additional layer of mitigation to complement mitigation efforts of staff and students. Screening testing is intended to identify infected individuals without symptoms (or prior to development of symptoms) who may be contagious so that measures can be taken to prevent further transmission.

MSB's complete Vaccination Policy can be found on our website [MSB COVID-19 Vaccination Policy](#)

MSB's Vulnerable Student Population

MSB has a uniquely vulnerable student population whose special needs make it difficult to fully implement the strategies that reduce the risk for transmission compared to other students. For example, many students are unable to wear masks safely or have the ability to manage their sneezes or coughing effectively. Many cannot report when they are not feeling well. Many students at MSB have complex medical profiles which put them at greater risk for severe complications.

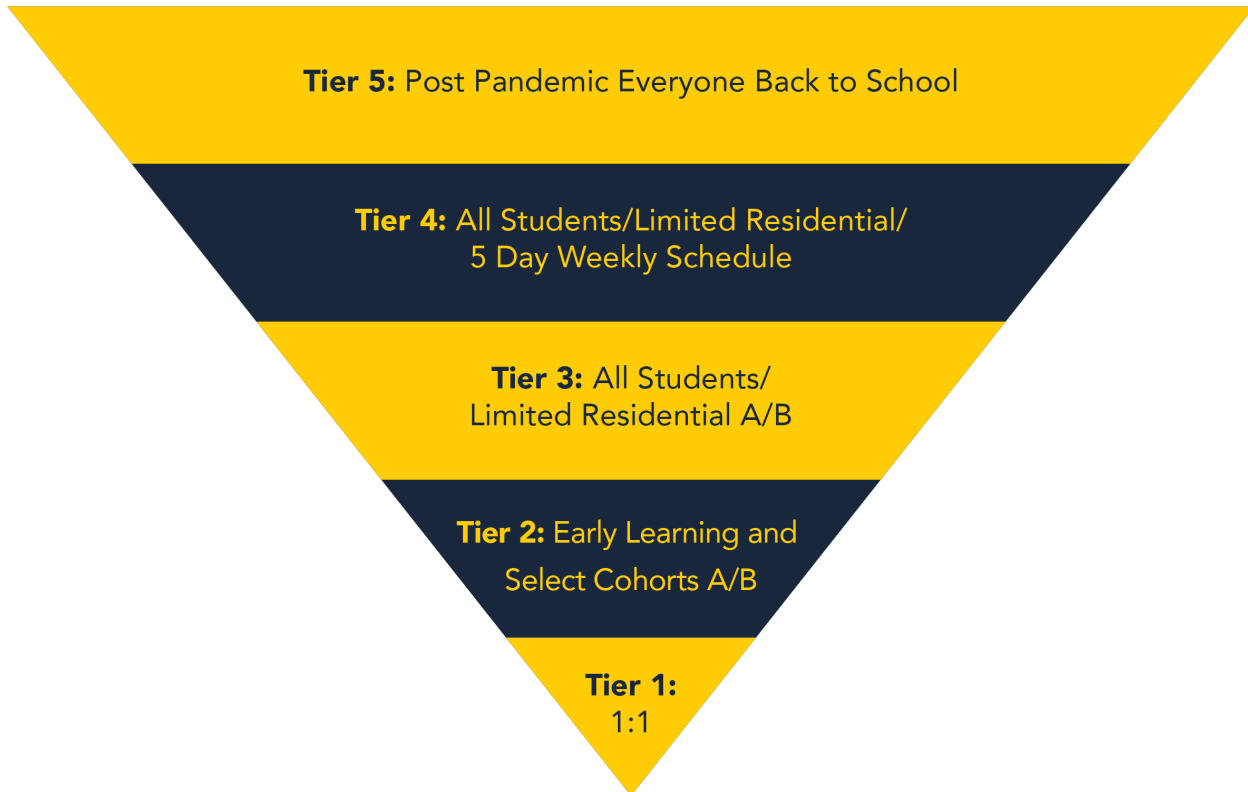
Many students require close and frequent physical contact for things such as positioning and physical management (such as for students with physical disabilities). Deafblind students require tactile sign language, a very intimate form of communication in which language is transmitted directly through physical touch from the staff's hands to the student's. And many students cannot maintain appropriate physical distancing for a variety of reasons.

These factors make it challenging to protect students and staff from spreading the virus to one another.

Therefore, the protocols will be different, by necessity, with a higher degree of precaution and protective equipment (medical masks and face shields) when compared to most public schools.

Our first goal is to have students safely in school for instruction. Our current plan is for a gradual, tiered approach to carefully transition back to in-person, on-campus instruction when conditions are safe.

At each decision point, or tier, the numbers of students and staff will increase from individual sessions all the way to a full return of students and staff to campus—each tier building upon the previous tier.



MSB’s Tiered Reopening Plan

The Tiers Explained

Tier 1: Individual In-Person Student Appointments

- MSB staff initiated appointments with students (accompanied by a caregiver) for in-person services such as low vision assessments, educational, related service assessments, clinical, or instructional support needs which are not suited for virtual delivery.

Tier 2: Early Learning Students and Limited Student Cohorts with A/B Schedules

- Preschool and kindergarten cohorts begin on-campus instruction on an alternating A/B schedule.
- In grades 1-12, introduction of small classroom cohorts of select students will begin on-campus instruction on an alternating A/B schedule.

- Initial student groups may or may not include residential services.
- Not all students will return in Tier 2.

Tier 3: All Students with A/B Schedules and Limited Residential Program

- All students return to the MSB campus on an alternating A/B weekly or daily schedule in cohorts as much as possible.
- Residential program will be limited to students who live outside of a defined geographic radius of 30 miles from MSB campus in order to limit numbers of students/staff to safe levels.

Tier 4: All Students Return to Five-Day Weekly Schedules with Limited Residential Program

- Students return to a five-day weekly schedule in cohorts as much as possible.
- Residential program remains limited to students who live outside of a defined geographic radius to maintain safe numbers. (The same as Tier 3.)
- This Tier is the final stage until the end of the pandemic or infection rates are extremely controlled within the state of Maryland.

Tier 5: Everyone Back to School

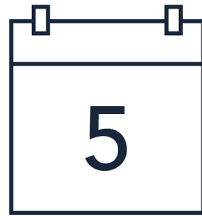
- Residential students residing within 30 miles of the school return to pre-pandemic residential schedules.

PUBLIC SAFETY ↑



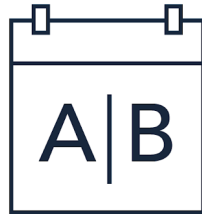
Tier 5

Everyone back to school!



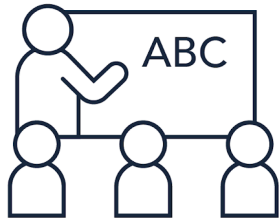
Tier 4

All students return to five-day weekly schedules with limited residential program.



Tier 3

All students with A/B schedules and limited residential program.



Tier 2

Early learning students and limited student cohorts with A/B schedules.



Tier 1

Individual in-person student appointments.

↓ PUBLIC SAFETY

Assumptions

1. Each tier assumes an increased level of public safety based on improved infection rates and guidance from the scientific community, but no relaxation of mitigation protocols.
2. With successful implementation of each tier, MSB will transition to the next tier.
3. If circumstances improve dramatically, MSB could skip tiers, such as if infection rates decrease significantly, access to screening testing and/or as vaccination rates improve. (rev. February 2021)
4. If circumstances worsen, MSB could revert to an earlier tier with decreased numbers of students on campus, or to virtual instruction.

Educational Recovery Plan

Recovery

The students served at MSB are all students with disabilities with Individualized Education Plans (IEP's). Many of our students have complex learning needs as well as multiple and severe disabilities. Upon the start of the school year, all students will be assessed by their teachers and related service providers to determine priority needs based on any regression of academic and functional skills. The assessments will be a mix of standardized assessments, benchmark testing, curriculum-based assessments and teacher-made assessments for learning.

Instruction that all students receive follows standards based in Maryland's College and Career Ready Standards for all content areas. Many of our students receive curricular and specially-designed instruction based on alternate framework standards due to the severity of their disability.

Athletics

MSB students compete in interscholastic athletics as part of the Eastern Athletic Association for the Blind (EAAB). MSB competes during four sports seasons throughout the year against other schools for the blind in the EAAB. While some sports activities will continue, interscholastic competition will not begin again until all on-campus operations resume. We do not anticipate that this will happen until we reach Tier 5.

Protocols and Procedures

Health Screenings and Symptom Monitoring

Staff will be required to complete health screenings for COVID-19 symptoms through the system monitoring notification system.

In order to implement the [COVID-19-like Illness Response Plan](#), health screening and symptom monitoring are necessary.

Parents are not required to complete a daily symptom screening, but are required to keep students home if they display any Covid-like symptoms

Physical Distancing

Physical distancing means keeping space, a minimum of 6 feet, between yourself and other people outside of your home. Limiting close face-to-face contact with others is the best way to prevent the spread of COVID-19 infection.

- COVID-19 spreads easily among people who are in close contact.
- Spread happens when a person with COVID-19 coughs, sneezes or talks and droplets are launched into the air and land in the mouth, noses or eyes of others nearby or if these droplets can also be inhaled into the lungs.

Practice physical distancing

- Stay at least 6 feet (about 2 arm's length) from other people
- Avoid gathering in large groups
- Stay out of crowded places and avoiding mass gatherings
- People are particularly vulnerable for exposure due to mask removal for eating and drinking - remain at least 6 feet away from another person while consuming food and drinks.
- Arrange student furniture to promote the 6 feet safe physical distancing.
- In shared offices or offices with significant in-person interaction, barriers are provided.

Masks and Face Coverings

All PPE and masking strategies specific to working with students are still in effect.

Specifically:

- N95s are to be worn with students who do not mask and whose needs require staff to be within 6 feet of them.
- When wearing an N95, a face shield is also to be worn, mostly to protect the life of the N95
- Procedural masks and face shields are to be worn with students who wear masks and whose needs require staff to be within 6 feet of them.

The school will **continue to require everyone on campus to wear masks.**

- All staff must wear masks when indoors regardless of vaccination status EXCEPT when they are completely alone in an office, work or learning space.
- When you are in the presence of any other staff member, you must put on a mask.
- Every adult entering MSB buildings is required to wear either a surgical/procedural or [cloth face mask\(3\)](#).

The use of additional PPE is detailed in the original [2020 Return to School Plan](#)

Updated COVID19 Isolation and Quarantine Guidance:

Persons Who Have Confirmed or Suspected COVID-19 (Isolation)

All persons who test positive for COVID-19 or have suspected COVID-19, regardless of vaccination status, should complete isolation as follows:

- Stay home for at least 5 full days either (1) from the date of symptom onset if symptomatic or (2) the date of the positive test if no symptoms.
 - Note: Day 1 is considered the first full day after symptoms started in symptomatic persons or the first full day after the person tested positive if asymptomatic.
 - After Day 5, if the person has no symptoms or if symptoms are improved and they have had no fever for at least 24 hours without medication, they may return to work, school, or child care IF they wear a well-fitting mask when around others* for an additional 5 days. If the person is unable to wear a mask around others, they should remain at home for a full 10 days.

Persons Who Are Exposed to Someone with COVID-19 (Quarantine)

1. The following recommendations apply to:

- Adults 18 years and older who have been boosted AND have no symptoms OR (a) completed the primary series of Pfizer within the last 5 months, (b) Moderna vaccine within the last 6 months, or (c) J&J vaccine within the last 2 months AND have no symptoms;
- Children 5-17 years old who have completed the Pfizer vaccine series as recommended AND they have no symptoms; and
- Persons who had confirmed COVID-19 within the last 90 days (i.e. tested positive using a viral test). These persons do not need to quarantine after exposure but should wear a well-fitting mask around others* for 10 days after the last close contact with the person with COVID-19 (Day 1 is considered the first full day after the date of last close contact)
 - Ø Get rapid tested at least 5 days after the last close contact (persons who had confirmed COVID-19 within the last 90 days do not need to test).
 - Ø If the person tests positive or develops symptoms they should stay home and follow recommendations for isolation above.
 - Ø If the person tests negative or is unable to get a test, they should continue to wear a well-fitting mask around others for 10 days after the last close contact.

2. The following recommendations apply to:

- Persons of all ages who are unvaccinated; and
 - Adults 18 years and older who have completed the primary series of Pfizer vaccine over 5 months ago or Moderna vaccine over 6 months ago and are not boosted OR completed the primary series of J&J over 2 months ago and are not boosted.

∅ These persons should quarantine after exposure as follows:

- Stay home for at least 5 days after the last close contact with the person with COVID-19 (Day 1 is considered the first full day after the date of last close contact)
- If no symptoms, get tested at least 5 days after the last close contact.

§ If the person tests negative, they may return to work, school or child care IF they wear a well-fitting mask when around others* until 10 days after their last close contact;

§ If the person tests positive, they should follow the recommendations for isolation above;

- If the person develops symptoms they should get tested immediately and remain at home; if the test is positive, they should follow the recommendations for isolation above.
- If the person is unable to mask around others, they should remain at home for 10 days from the date of last close contact

If you have had a confirmed positive result of COVID19 in the last 90 days:

- If you tested positive for COVID-19 within the previous 90 days and subsequently recovered and remain without COVID-19 symptoms, you do not need to quarantine or get PCR tested after close contact.
- If you tested positive for COVID-19 within the previous 90 days and subsequently recovered and remain without COVID-19 symptoms, you do not need to complete the weekly on campus PCR testing for that duration.
- Proof of positive test is required in order to meet these qualifications

MSB follows The Maryland State Department of Education (MSDE) guidance regarding response to confirmed cases in schools. Please refer to [MSDE K-12 School and Child Care COVID-19 Guidance August 13, 2021](#) for more information.

Community-Based Services

Staff in Early Intervention, Teacher of the Visually Impaired (TVI), Orientation and Mobility (O&M) and other community based services should refer to the local school system's reopening status and guidelines.

Assessments in the MSB Low Vision Clinic will take place as needed and on-campus assessments for new enrollments will be scheduled in locations with adequate size/space for social distancing and masking precautions in place.

Families are asked to disclose COVID-19 risk factors with staff, and to assist in creating safe work conditions by maintaining masking and physical distancing.

Outdoor Activities

Outdoor activities are encouraged including educational and therapeutic activities. Aside from the health benefits of sunshine, fresh air, and exercise, outdoor activities tend to be safer since there is a lower risk of transmitting viruses so long as proper PPE is worn, and safe distancing and regular hand washing practices are observed.

Community Outings and Field Trips

Unless necessary for IEP implementation, trips to the community are discouraged. When they are deemed necessary, there may only be one staff and one student in the vehicle at a time. Additionally, both must wear PPE as appropriate and the student must sit in the seat furthest from the driver. Unless inclement weather prohibits it, windows should be down whenever possible.

Cleaning and Sanitizing

High Touch Surfaces

High touch surfaces such as desktops, doorknobs, railings, and restrooms will be cleaned throughout the day. All staff will assist with sanitizing high touch surfaces within the classrooms and residences throughout the day.

School Vehicle Cleaning and Sanitizing

The MSB fleet vehicles have been treated with PermSafe, a disinfectant with long-term residual properties. The following are links to several select PermaSafe Videos and Online Presentations critical to understanding the products and programs.

- Slide Show: [How It Works](#)
- Video [How It Works](#)

Electrostatic Misting

MSB housekeeping and other staff will help disinfect high touch surfaces using an electrostatic misting system.* This utilizes electrostatic spray technology to allow disinfecting solutions to reach surfaces outside the line of sight, covering what conventional trigger sprays may miss, including the sides, underside and backside of surfaces. It works by using an electrode to introduce an attractive charge to the disinfecting or sanitizing product and atomizes the solution, using an air compressor to generate a quiet, but powerful liquid flow at 9,000 sq feet per gallon.

This cleaner is EPA-registered to kill 19 illness-causing organisms in two minutes or less. The ready-to-use, one-step disinfectant cleaner eliminates odors and kills outbreak-causing viruses like influenza, rhinovirus and norovirus and bacteria like Staphylococcus aureus, MRSA and Vancomycin Resistant Enterococcus faecium (VRE). The non-bleach-based formula is specifically designed for broad surface compatibility, making it ideal for use on a wide variety of surfaces found in schools, athletic facilities, offices and more.

*Electrostatic misting will not be used in Early Learning due to Office of Childcare Regulations.

HVAC Systems and Air Quality

Knowing that stagnant air is a significant risk factor in the transmission of COVID-19, it is important to address HVAC systems on campus. With consultation of HVAC and industrial hygiene experts, MSB is in the fortunate position of having new buildings with modern HVAC systems. MSB's HVAC systems run 24/7 providing a constant flow of air and increasing outdoor air ventilation. The system supplies 6-8 air changes per hour in classrooms, up to 10 air changes per hour in offices. Inside air is replaced with outside air approximately 2 air changes per hour. These air change rates are at the levels recommended for hospital rooms, including those with COVID-19 patients. As we reopen campus, HVAC systems will be upgraded with MERV-13 filters.

Transportation and School Vehicles

All student transportation must be performed using a fleet minivan. No one may be seated in the middle seat to ensure physical distancing. Transportation is limited to one staff member and one student. The student and staff must be properly masked at all times while in the vehicle.

Local School System Transportation

Since MSB depends on the local school systems (LSS) to provide transportation, as part of each student's IEP, MSB also relies on the LSS to institute safe protocols and social distancing, particularly for students who are not able to wear face coverings.

Meetings

Meetings including IEPs and other student related meetings will be held virtually to minimize the risk of COVID-19 exposure to the campus.

Parents & Visitors

Parents and visitors to MSB, who are working with students or in close proximity to students, will need to show one of the following in order to enter any building:

- Individuals who are fully vaccinated must provide proof of full vaccination against COVID-19.
- Individuals who have not been vaccinated, or are only partially vaccinated, must provide documentation of a negative COVID-19 test within the previous 72 hours.

Individuals are considered fully vaccinated:

- Two weeks or more after they have received the second dose in a two-dose series (Pfizer-BioNTech or Moderna or vaccine authorized by the World Health Organization), OR
- Two weeks or more after they have received a single-dose vaccine (Johnson and Johnson [J&J]/Janssen vaccines).

Individuals are considered “partially vaccinated” when they have received at least one dose of COVID-19 vaccine, but do not meet the definition of “fully vaccinated” above.

Types of vaccination proof that we accept: COVID-19 Vaccination Record Card (issued by the U.S. Department of Health and Human Services Centers for Disease Control & Prevention or WHO Yellow Card) which includes name of person vaccinated, type of vaccine provided, and date the last dose was administered); OR
A print or digital copy of a completed Vaccination Record Card; OR
Documentation of COVID-19 vaccination from a health care provider.

Types of negative COVID-19 test that we accept:

Visitors who are unvaccinated or partially vaccinated must show documentation of a negative SARS-CoV-2 test, with the specimen collected within 72 hours before the visit. Those individuals may use either PCR or antigen testing.

Visitors are required to wear a medical-grade mask, visitors are required to wear the mask covering both their nose and mouth for the entire time and length of their visit.

Vendors in Student Occupied Buildings

Vendors coming into the buildings should be kept to a minimum; and outdoor spaces, when possible, should be used as an alternative to inside spaces.

If vendors are going to be in close proximity to students or staff (within 6 ft), they need to show proof of vaccination or show negative test results from the past 72 hours. Please see Visitor Section above for specific information regarding required documentation.

If vendors are NOT going to be in close proximity to students or staff, they must still wear a mask at all times while on campus.

Appropriate PPE, as identified on page 9 of this plan, applies to all vendors in student areas. Proper PPE is required for the duration of the appointment.

Parent Drop off and Pick up

Parents should release their child to staff during drop off and not enter school buildings. When picking up students, parents should wait at their vehicle until a staff member brings their child to them.

Home Visits

To the extent possible, home visits should be performed outdoors until Tier 5 is reached. If an outdoor visit is not an option, a visit may occur inside a student's home only if one of the two conditions below exists:

- Everyone in the home is vaccinated and shows evidence of the vaccination (vaccination card, print or digital copy as described in the Visitors section above).
- Those in the home who are not vaccinated show evidence of a negative Covid-19 test that was obtained using a sample within 72 hours prior to the home visit.

Community-Based Instruction

Students may participate in IEP-driven community-based instruction under the following conditions:

- One student and one driver in vehicle.
- Student must be sitting in vehicle seat furthest from the driver.
- Windows in vehicle are down when occupied by student and driver
- Student and driver are wearing appropriate personal protective equipment (PPE) while in the vehicle and for the duration of the event
- Student and staff may take a brief break from PPE if and only if they are outdoors and at least 6 ft from each other and at least 20 feet from community members.

Field Trips

Unless necessary for IEP implementation, trips to the community are discouraged. When they are deemed necessary, there may only be one staff and one student in the vehicle at a time. Additionally, both must wear PPE as appropriate and the student must sit in the seat furthest from the driver. Unless inclement weather prohibits it, windows should be down whenever possible.

Contact Information

For questions or more information, please contact:

Patti Bell, Health Center Manager: 410-444-5000 x1555

Bill McCubbin, Director of Campus Operations: 410-444-5000 x 1375

Lauren Pappas, Director of Human Resources: 410-444-5000 x1469

Kim Poswiatowski, Benefits Specialist: 410-444-5000 x1364

Robert Hair, Superintendent: 410-444-5000 x1710

Research on COVID-19 is evolving on a daily basis and recommendations will change. Changes to this plan will be added as addendums at the end of this document.

Addendums

Addendum 1: Staff Masking Policy Updated 1.20.22

Because of the important role that appropriate masking has in keeping everyone safe, we ask that you review the following guidance regarding masking. There have been some changes to our previous procedures based on newer information related to COVID-19 and the Omicron variant. Please keep in mind that guidance frequently changes. We will do our best to help keep you up-to-date!

The following is our current masking protocol:

- ***N-95s**

- o Staff working with students who do not mask are required to wear a fit-tested* N95 mask. (not a change to existing policy)
- o Staff working within 6ft of any student for 15 minutes or longer are required to wear a fit-tested* N95 mask. **(update to existing policy)**

*Staff wearing N95 masks need to make an appointment with the Health Center to be fitted for the mask. If there are issues with fit testing, the nursing team will help you.

- **Surgical Masks**

- o The minimum requirement **for everyone else** is to wear a surgical mask

- **Face Shields**

- o Face shields are required **in addition to masks** when performing hygiene or physical management tasks with students who have difficulty controlling bodily fluids.

- **Optional Mask Enhancements the above Minimum Requirements**

- o **Surgical Masks:** Studies have shown that double masking increases the efficacy of a single surgical mask dramatically. It is recommended that surgical masks be doubled with

- § a second surgical mask or

- § a well-fitted cloth mask.

- o **KN95s and Fitted N95s:** Staff who do not work within 6ft of students, or do not work with unmasked students, **may opt to wear a KN95 or a fitted* N95 mask** instead of surgical mask, if desired

- o **Face shields:**

- § May wear a face shield as long as long as the proper mask – based on above criteria – is worn under the shield

- § Highly recommended for staff working with students within 6 ft who cannot mask.

- **Additional Clarifications:**

- o In no situation should a cloth mask be worn alone. They are not as protective as medical grade masks and vary in quality/filtration.
- o In no situation should a face shield be worn alone. They offer virtually no protection against inhalation of airborne water droplets/virus particles from infected individuals

Other Information

Medical grade masks are **more protective than cloth masks** because they use electrostatic charge to help filter virus particles. However, they lose their electrostatic charge **when they become wet**. That means they may be worn until they are wet and/or soiled.

Addendum 2: MSDE Updated COVID19 Isolation and Quarantine Guidance (January 6) based on CDC Guidance:

Persons Who Have Confirmed or Suspected COVID-19 (Isolation)

All persons who test positive for COVID-19 or have suspected COVID-19, regardless of vaccination status, should complete isolation as follows:

- Stay home for at least 5 full days either (1) from the date of symptom onset if symptomatic or (2) the date of the positive test if no symptoms.
 - o Note: Day 1 is considered the first full day after symptoms started in symptomatic persons or the first full day after the person tested positive if asymptomatic.
 - After Day 5, if the person has no symptoms or if symptoms are improved and they have had no fever for at least 24 hours without medication, they may return to work, school, or child care IF they wear a well-fitting mask when around others* for an additional 5 days. If the person is unable to wear a mask around others, they should remain at home for a full 10 days.

In addition, we are requiring staff to have a negative result on a rapid test (at the Health Center) after the initial quarantine period is complete. Staff should plan to report to the Health Center upon arrival for their shift to have this completed.

Persons Who Are Exposed to Someone with COVID-19 (Quarantine)

1. The following recommendations apply to:

- Adults 18 years and older who have been boosted AND have no symptoms OR (a) completed the primary series of Pfizer within the last 5 months, (b) Moderna vaccine within the last 6 months, or (c) J&J vaccine within the last 2 months AND have no symptoms;
- Children 5-17 years old who have completed the Pfizer vaccine series as recommended AND they have no symptoms; and
- Persons who had confirmed COVID-19 within the last 90 days (i.e. tested positive using a viral test). These persons do not need to quarantine after exposure but should wear a well-fitting mask around others* for 10 days after the last close contact with the person with COVID-19 (Day 1 is considered the first full day after the date of last close contact)

Ø Get rapid tested at least 5 days after the last close contact (persons who had confirmed COVID-19 within the last 90 days do not need to test).

Ø If the person tests positive or develops symptoms they should stay home and follow recommendations for isolation above.

Ø If the person tests negative or is unable to get a test, they should continue to wear a well-fitting mask around others for 10 days after the last close contact.

2. The following recommendations apply to:

- Persons of all ages who are unvaccinated; and
- Adults 18 years and older who have completed the primary series of Pfizer vaccine over 5 months ago or Moderna vaccine over 6 months ago and are not boosted OR completed the primary series of J&J over 2 months ago and are not boosted.

Ø These persons should quarantine after exposure as follows:

- Stay home for at least 5 days after the last close contact with the person with COVID-19 (Day 1 is considered the first full day after the date of last close contact)
- If no symptoms, get tested at least 5 days after the last close contact.

§ If the person tests negative, they may return to work, school or child care IF they wear a well-fitting mask when around others* until 10 days after their last close contact;

§ If the person tests positive, they should follow the recommendations for isolation above;

- If the person develops symptoms they should get tested immediately and remain at home; if the test is positive, they should follow the recommendations for isolation above.
- If the person is unable to mask around others, they should remain at home for 10 days from the date of last close contact

If you have had a confirmed positive result of COVID19 in the last 90 days:

- If you tested positive for COVID-19 within the previous 90 days and subsequently recovered and remain without COVID-19 symptoms, you do not need to quarantine or get PCR tested after close contact.
- If you tested positive for COVID-19 within the previous 90 days and subsequently recovered and remain without COVID-19 symptoms, you do not need to complete the weekly on campus PCR testing for that duration.
- Proof of positive test is required in order to meet these qualifications