



March 16, 2022

Dear School and Child Care Administrators:

The Georgia Department of Public Health (DPH) recognizes the importance of safely maintaining in-person learning and childcare. Although COVID-19 cases in Georgia are declining, identified cases and close contacts must continue to follow safe protocols to prevent further viral spread and schools and early care and education (ECE) programs (i.e., childcare programs) should remain vigilant to limit transmission within their facilities. Vaccination remains the best method for preventing illness and limiting the spread of SARS-CoV-2, the virus that causes COVID-19. CDC recently updated their COVID-19 guidance for the general population and based recommendations on [COVID-19 Community Levels](#). **K-12 schools and ECE programs should follow the new recommendations for the general population.** Please note the following updates to reporting, notification, and quarantine for K-12 schools and ECE programs.

Updated COVID-19 Reporting Requirements

- Schools and ECE programs are only required to report COVID-19 cases if the testing is performed by the school or ECE program (e.g., by a school nurse and not an external lab).
 - Cases reported to the school or ECE program by families or by external lab testing services (e.g., as part of screening testing) do not need to be reported to the local public health district.
- Schools and ECE programs are required to report any clusters of COVID-19 to their local public health districts regardless of where testing occurs.
- For ECE programs, all cases and clusters are required to be reported to DECAL through the normal notifiable disease reporting system.

Notification of COVID-19 Cases in K-12 School or ECE Programs

Schools and ECE programs are not required to conduct contact tracing and are not required to close a classroom after a child, student, or staff member has COVID-19 while in the classroom. It is **strongly recommended that schools and ECE programs notify any groups or classrooms** that may have been exposed when a case is reported so that staff and/or families may determine the need for quarantine, testing, or additional precautions to protect themselves and their family members.

Modified Quarantine in K-12 Schools and ECE Programs

At-home quarantine for 10 days after exposure to someone with COVID-19 is the safest way to prevent further spread of the virus. However, DPH recognizes the importance of in person learning. Therefore, K-12 schools and ECE programs may decide to allow close contacts to return to school and childcare early based on a Standard Quarantine protocol, or they may implement a Modified Quarantine (see below) as stated in the DPH Administrative Order.

Standard Quarantine

For standard quarantine, all close contacts in private and public schools and ECE programs must be quarantined and excluded from the school and ECE setting and all extracurricular activities

(see [quarantine guidance](#)), according to the Public Health Administrative Order¹.

Modified Quarantine

A modified quarantine protocol allows children, students, and staff to continue to attend school or childcare in-person during the quarantine period so long as they remain asymptomatic. According to the DPH Administrative Order, only close contacts from an exposure in the ECE or K-12 school setting may be allowed to follow a modified quarantine protocol. If the exposure occurred outside of the ECE or school setting, children, students, and staff are **required** to follow the standard quarantine protocol. Schools and ECE programs may decide whether to allow participation in extracurricular activities during the modified quarantine period.

During the entire 10-day period, close contacts are **strongly encouraged** to:

- Correctly and consistently wear a mask (except while eating and drinking or napping), regardless of the school or ECE program's mask policy, if age appropriate.
- Physically distance to the extent possible from other children, students, and staff for the entire 10-day period.
- Not participate in any extracurricular activities until after day 10.
- Participate in daily symptom monitoring.

K-12 schools may consider implementing surveillance testing or [Test to Stay](#) protocols to rapidly identify cases and further reduce the spread of COVID-19 within schools. Contact your local health district or covid-k12-testing@dph.ga.gov if you are interested in learning more about options for on-site screening or diagnostic testing. ECE programs may be eligible for funding for surveillance testing through [Operation Expanded Testing](#).

Working together with schools and ECE programs statewide, DPH is committed to keeping children, students, and staff safe during the COVID-19 pandemic. Schools and ECE programs are strongly encouraged to maintain open lines of communication with their local public health districts. The need for specific prevention strategies will vary based on [COVID-19 community levels](#), [vaccination coverage](#), COVID-19 outbreaks or increasing trends in the school, facility, or [surrounding community](#). To develop a long-term COVID-19 prevention plan, schools and ECE programs should weigh the logistical, behavioral, and developmental challenges related to prolonged, intensive mitigation measures against the risks associated with COVID-19.

Sincerely,



Kathleen E. Toomey, M.D., M.P.H.
Commissioner and State Health Officer

¹ Please find the updated DPH administrative orders at <https://dph.georgia.gov/administrative-orders>