



**ADOM POLICY REGARDING COVID-19 EXPOSURES and INFECTIONS,  
MASKS and SOCIAL DISTANCING, REPORTING REQUIREMENTS,  
TRAVEL, possible QUARANTINE and RETURN TO WORK/SCHOOL**  
*(Revision June 7, 2021)*

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All employees should remain at home if sick, or in contact with someone who is, or is thought to be, infected with COVID-19. ***This includes remaining at home while awaiting test results.*** In addition, they are directed to immediately notify their supervisor.

All students should remain at home if sick or in contact with someone who is, or is thought to be, infected with COVID-19. **This includes remaining at home while awaiting test results.** In addition, they should immediately notify their appropriate school official.

Consistent use of face coverings (masks) and social distance, frequent hand washing, normal cleaning of the work or school area, minimizing contact with others, avoiding crowds all help to mitigate the possibility of transmission of the virus. **EXCEPTIONS TO THE MASK REQUIREMENT FOR VACCINATED PERSONS ARE OUTLINED LATER IN THIS POLICY.**

Cooperation with quarantine (when exposed) or isolation (when infected) is vital to reducing the transmission of the virus. Pastors and principals, or their designees, are asked to continue reporting exposures or infections of any student, employee or priest to the Chancellors' Office using the ADOM form provided.

#### **POLICY GUIDELINES APPLICABLE TO ALL ENTITIES OF THE ADOM:**

1. REQUIRE All persons over 2 years of age to wear masks when with anyone – even if at a distance in excess of 6'. This applies to students and all adults (lay, religious, or priests) whether employees or volunteers – **including persons who have been fully vaccinated against COVID-19 or may have developed natural immunity by being infected with the virus.** Masks are to be used by all except children age two (2) or younger; or children in supervised school recess, outdoors and socially distant AND engaged in vigorous activity. Masks are not a *substitute* for social distancing. Both masks and social distancing are required practices for your safety and that of all others.
2. Masks may be removed when eating --- however, social distance becomes critical and should be absolutely maintained at 6' or MORE for all children and adults for as short a period as is reasonable.
3. Requirements with respect to wearing masks specifically for FULLY VACCINATED PERSONS, and specifically out of doors, can be found in the section titled **MASK REQUIREMENTS FOR FULLY VACCINATED PERSONS in this policy.**
4. REQUIRE everyone, staff as well as parents of children, **NOT TO COME TO school/work if sick and to inform the school if they are sick.**
5. REQUIRE everyone, staff as well as parents/children to avoid coming to school/work if they have been exposed (close contact as per CDC definition) to someone who may be sick or may be asymptomatic but is awaiting or has received positive test results. Call the school for directions.
6. REQUIRE employees or students who have had CLOSE CONTACT (as per CDC definition<sup>1</sup>) with a person infected with COVID-19 to quarantine according to the required quarantine protocol in this policy.
7. REQUIRE social distancing (minimum 6' distance except between children in cohort classrooms) in all areas of parish and school campus, offices, meeting areas, church,

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<sup>1</sup> As per CDC: *Someone who was within 6 feet of an infected person for at least 15 minutes (continuous or intermittent) starting from 2 days before illness on-set (or, for asymptomatic patients, 2 days prior to specimen collection) until the time the patient is isolated and continuing for 10 days.*

Data are limited to precisely define the “prolonged exposure” to determine “close contact,” however 15 minutes of close exposure can be used as an operational definition for contact investigation. Factors to consider when defining close contact include proximity, the duration of exposure (e.g., longer exposure time likely increases exposure risk), whether the infected individual has symptoms (e.g., coughing likely increases exposure risk) and whether either the case patient or contact were wearing an N95 respirator (which can efficiently block respiratory secretions from contaminating others and the environment).

sacristy, lunchrooms, school offices, maintenance shops, while on ADOM owned vehicles (such as school buses) or wherever.

8. **SOCIAL DISTANCING for children** in the classroom where the class remains as a cohort (cohort classroom) together during the day is defined as a minimum of 3' apart from all other children, 6' apart from adults AND masks are mandatory for children over 2 years old.
9. **SOCIAL DISTANCING for students who change classes or at sports/physical education** during the day is a minimum of 6' apart AND masks are mandatory for all (even if vaccinated) teachers and students (except when engaged in strenuous activity).
10. **SOCIAL DISTANCING for adults** is a minimum of 6' from children or other adults in every setting.
11. Persons are **FULLY VACCINATED** beginning two weeks after the final shot in their vaccination protocol (for example, 2 weeks after the 2<sup>nd</sup> shot for Moderna or Pfizer vaccine or 2 weeks after the only shot for J&J vaccine). All are encouraged to get vaccinated unless a physician has documented a medical reason that prohibits vaccination.
12. Establish procedures in reception area or gathering places so persons don't gather (wait outside, make appointments, etc. to reduce the occasion to gather) or mark off a buffer zone, so that staff and anyone coming in for assistance remain socially distant (more than 6' distance); even if vaccinated, all must wear masks
13. Conduct meetings via ZOOM or other equivalent to minimize inviting visitors/vendors or other outsiders into school or parish office.
14. Effective March, 2021, ministry and business activities may be conducted in-person consistent with the [guidelines](#) of this policy.
15. Parents should be reminded that the same level of caution taken by the schools should be implemented for the events in which their children participate outside of school. *Athletic events on community-based teams and family parties and gatherings continue to be major sources of infection causing quarantine of ADOM school children.*
16. In the event of an exposure from someone diagnosed as positive within the parish or school, to follow CDC guidelines on safely cleaning the area(s) involved.
17. Guidance from the county DOH will be followed. It is **required** to report the exposure to Sr Elizabeth Worley (eworley@theadom.org, 305.450.6420, with the use of the EMPLOYEE/STUDENT/PRIEST exposure forms) who will provide ADOM guidance.
18. Daily screening via Paylocity or other screening tool for employees and via parent's screening on the ADOM School tool is required -- with a call before coming to the school/work if *any* response is YES.
19. Measuring temperature as part of the screening upon entering the school campus is *optional unless required by early learning/pre-school agencies.*

## **MASK REQUIREMENTS FOR FULLY VACCINATED PERSONS**

Fully vaccinated persons (adults) are not required to wear face covering (masks)

- when out-of-doors
  - a. If not in a crowded area AND
  - b. If socially distant for more than 6' from all other non-vaccinated adults AND
  - c. If NO students are present regardless of social distance;
- when in-doors where all others are also FULLY VACCINATED;
- when in-doors where all others present are of only one household.

Fully vaccinated persons ARE REQUIRED to wear a mask **indoors, within** the ADOM school or parish buildings:

- a. when children/students or any other persons that are not fully vaccinated are present in the same room or indoor space, and
- b. when **outdoors** on duty as an employee and students are present.

Age eligibility for vaccination will continue to decrease as students will be eligible for vaccination. The rules above for fully vaccinated persons apply regardless of the person's age. Fully vaccinated teen-agers are required to wear a mask in school, on school bus, and when attending outdoor events such as sports and other events where groups of non-vaccinated persons are present.

## **DAILY SYMPTOM SCREENING FOR STUDENTS AND EMPLOYEES**

**STUDENTS will undergo symptom screening daily based on program and grade level, using a screening tool and data collection process determined by the school.**

Parents are the best persons to screen their child for symptoms of any illness. The school is asked to provide the screening questions to parents for their daily evaluation of the child. The method of distribution of the symptom checklist is at the discretion of the school. Additional information can be sought or if the checklist is to be submitted to the school, an identifier (name, e-mail address etc) needs to be added.

It is advisable, at a minimum, that the school develop a method by which the results of the parent's daily symptom screening be received by the school. That could be an electronic app sent from the parent to the school or it could be an e-mail from the parent to the teacher with the child's name and confirmation that all responses are negative.

Please note that the recommended text includes a request for the parent to contact the school if ANY response is YES. Symptoms of regular childhood illnesses can be easily confused with COVID. In an abundance of caution, the parent may be advised to keep the child home and contact the school the following day to report progress of the child. The CDC notes that children experiencing the usual childhood diseases should return to school once symptoms resolve in a day or two. Symptoms of COVID will take longer to resolve and return to school would be based on the protocol provided by the ADOM and the FL Department of Health (found on the DOH form for reporting exposure of students).

**If the child is showing symptoms, has been exposed to anyone who is sick, has been tested and is awaiting results or has traveled outside of S. Florida,** those YES answers are particularly important to be discussed with the school before the student comes to school, for the safety of the child and all other persons that might be exposed to that student.

### **Temperature Checks (OPTIONAL – at the discretion of the school/parish)**

*As per the CDC, many students testing positive for COVID-19 are asymptomatic. Thus, many who are infected do not have a fever. While taking temperatures may indeed locate a child who should be isolated and tested, it is more likely that the infected child does not have a fever. Taking the temperature of the children may provide a false sense of security that no one is infected if they do not have a temperature reading 100.4°F or higher.*

The school may, but is not required to, take the temperature of the student upon arrival and other times during the day. Temperature needs to be documented only if it is a disqualifier (at or above the threshold of 100.4°F). If there is documentation of temperature it does not

need to be signed by the parent, and can be, as determined by the school, verified by a second reading from another thermometer.

Temperature readings should not be taken immediately after the child has been exercising or has taken fever-reducing medication as the readings are generally affected by both exercise and medication and the reading is likely to be inaccurate.

***Exposure (close contact) of a student or a student possibly infected or already diagnosed, symptomatic or asymptomatic, must be reported to Sister Elizabeth via the [STUDENT EXPOSURE](#) form, and/or by telephone to 305.450.6420. Sister is available for consultation on decisions regarding quarantine or isolation of students and reporting to the Department of Health.***

**EMPLOYEES will be screened daily via Paylocity or other screening tool.**

Directions for implementing the screening tool in Paylocity (or other screening tool at the choice of the school) will be provided to the person responsible for payroll at each parish and school. Employees are required to complete and submit the Paylocity screening tool daily, with YES or NO responses, and the direction if ANY response is YES, is to call the entity before coming to work for guidance. The questions on the screening tool are unchanged. If the list of questions is needed, contact Sister Elizabeth.

The parish or school will receive the responses via Paylocity from the employees when submitted. An individual(s) should be assigned (HR or whomsoever the pastor/principal/director wishes to designate, to take a look at the responses and deal with any **DISQUALIFYING** response (**any YES answers**).

Some education should be provided to all employees to understand several points:

- Provide information on what is a “close contact” as per the CDC (*criteria for a close contact in footnote on page 2 of this policy*)
- Provide the ADOM requirements to wear a mask and always practice social distancing. A face shield may be used but always IN ADDITION to a mask unless a physician’s note is on file noting that the individual cannot safely wear a mask and instead is required to wear a face shield to adequately cover the face.
- Requirement of daily symptom screening on Paylocity
- Stay home when sick (with any disease, COVID-19 included) and notify the school/parish/entity.
- Notify the school/parish/entity by phone of an exposure from a close contact (*criteria for a close contact in footnote on page 2 of this policy*)
- Provide necessary information for the completion of the ADOM Exposure Form
- Follow the directions provided by the school including directions to be tested for COVID-19 and/or to quarantine or isolate related to an exposure.

***All exposures (close contact) of an employee or an employee possibly infected or already diagnosed, symptomatic or asymptomatic, are to be reported to Sister Elizabeth via the [EMPLOYEE EXPOSURE](#) form (or [PRIEST EXPOSURE](#) form), and/or by telephone to 305.450.6420. Sister Elizabeth is available for consultation on decisions regarding quarantine or isolation of employees or priests.***

**TRAVEL and POSSIBLE NEED TO QUARANTINE**

The need to travel out of S. Florida, to another State in the US, or outside the country is best discussed with the pastor, principal or school leader ahead of the travel. Schools are asked to provide the **ADOM TRAVEL FORM All Persons** to anyone considering travel outside of the Archdiocese (Broward, Miami-Dade and Monroe Counties). Guidance is available from Sr Elizabeth. The ADOM TRAVEL FORM provides information to parent/student and/or priest or lay employee regarding safe procedures to follow when traveling and the possible requirement of quarantine and testing upon return to S. FL.

The ADOM TRAVEL FORM should be filled in and submitted to the parish or school **BEFORE** travel. Upon return the FORM assists the school or parish personnel in dialogue with the parent or adult traveler regarding the activities and persons encountered while out of S. Florida to determine need for quarantine.

If an individual (adult or student) indicates the individual is a fully vaccinated person, it is acceptable to ask for documentation of the vaccination including the date of the last shot in the vaccination protocol before omitting any needed quarantine protocol.

### **TRAVEL WITHIN UNITED STATES FOR UNVACCINATED PERSONS**

If the screening questions triggers a YES from the employee/student who has traveled upon their return from travel outside S. FL, requiring a call to the school or workplace before coming in, conversation with the school/supervisor regarding the risks encountered in travel and compliance with mask use and social distance while traveling allows the school/entity to determine if, in the interest of safety, quarantine and testing might be required prior to a return to school/work. Quarantine is **OPTIONAL** depending on the risk of **PROBABLE** exposure during travel.

An employee or student returning from travel within the United States who is required by his/her ministry or school to quarantine (*optional, at the determination of the ADOM entity*) because of concerns regarding probable exposure while traveling and/or activities during the travel must quarantine for at least seven (7) full days of quarantine (not including the day of travel to return to S. FL) including testing no sooner than day 6 (PCR test for COVID-19, not antigen testing) and remain quarantined until negative test results are received. Negative test results are then presented to the school or entity to authorize returning to school or work.

Employees should be aware that if they are asked to quarantine related to personal travel, that the days out of work will be paid as vacation/personal days, if the employee has vacation/personal time available. Quarantine time following personal travel is **NOT** paid as sick time.

### **TRAVEL WITHIN UNITED STATES FOR FULLY VACCINATED PERSONS**

Wear a mask when traveling as per federal guidelines except in private automobiles. Avoid crowds and social distance at least 6'. Upon your return **NO** quarantine and **NO** testing is required.

This same guidance applies to persons who have recovered from symptoms of COVID-19 and developed *natural immunity* within 90 days prior to travel.

**SUMMARY: QUARANTINE – TRAVEL WITHIN USA - PCR protocol**

*Need for quarantine is determined by the school/entity depending on risk of travel*

Day 0 travel back to S Fl

**FOR UNVACCINATED PERSONS.....**

Day 1, Day 2, Day 3, Day 4

three full days' quarantine at home, minimize exposure to family, stay home, use vacation or personal time

Day 5 - 6 get tested – PCR test required and continue quarantine, remain quarantined for 7 days even if negative test results received; if negative, present results to school/parish;

Day 8 return to school/work

If diagnosed positive, then follow protocol for positive diagnosis.

**FOR FULLY VACCINATED PERSONS.....**

No quarantine needed upon return

No testing needed or required

**INTERNATIONAL TRAVEL FOR UNVACCINATED PERSONS (upon return, mandated quarantine and PCR testing)**

An employee or student returning from international travel **must** quarantine for at least seven (7) full days of quarantine (not including the day of travel) once returned to the US, followed by testing (PCR test for COVID-19, not antigen testing) and remain quarantined until negative test results are received. Negative test results are then presented to the school or entity to authorize returning to school or work.

Employees should be aware that quarantine related to personal travel will be paid as vacation days or personal days, if the employee has vacation or personal time available. Quarantine time following personal travel is NOT paid as sick time.

**INTERNATIONAL TRAVEL FOR FULLY VACCINATED PERSONS** returning from international travel, there is no need to quarantine. However, PCR testing is required within 3-5 days after return to US. Report test results to ADOM school or entity

**The requirements related to travel are applicable to all clergy, religious, lay employees and students working or studying in the entities of the Archdiocese.**



## **SUMMARY: QUARANTINE – INTERNATIONAL TRAVEL - PCR protocol**

Day 0 travel back to S Fl

### **FOR UNVACCINATED PERSONS.....**

Day 1, Day 2, and Day 3

three full days' quarantine at home, minimize exposure to family, stay home, use vacation or personal time

Day 3 – 5 get tested – PCR test required and continue quarantine

Day 7 remain quarantined for 7 days even if negative test results received; if negative, present results to school/parish;

Day 8 return to school/work

If diagnosed positive, then follow protocol for positive diagnosis.

### **FOR FULLY VACCINATED PERSONS.....**

No quarantine needed upon return

Day 3 – 5 get tested – PCR test required

Present results to school/entity when received

## **RESPONDING TO A POSSIBLE EXPOSURE**

All exposures must be reported to the Chancellors' Office (Sr Elizabeth Worley) using the electronic exposure forms:

- **ADOM COVID EXPOSURE REPORT – EMPLOYEE** for employees or volunteers, and
- **ADOM COVID EXPOSURE REPORT – STUDENT** for students.

If it is determined that the infection exposure is potentially school based or may have affected persons in the school community, the exposure is also reported to the County Department of Health. Specific forms and guidance are available from Sister Elizabeth for reporting to the DOH.

All exposures are reviewed as per the ADOM protocol below, including:

- communication regarding the exposure or infection, including to the DOH, and
- required consultation for clearance before the employee or student returns to work/school

Procedures for isolating a possibly infected student and contacting parent/guardian is outlined in the School's *Return to School Plan*.

As per the CDC guidelines anyone with a **close contact** to **someone who is infected with COVID-19** needs to quarantine using either **QUARANTINE 7 DAYS + PCR** or **QUARANTINE 10 DAYS** protocols outlined on page 10 in this policy.

### **According to the CDC, a close contact may have occurred if:**

*Someone who was within 6 feet of an infected person for at least 15 minutes (intermittent or continuous) starting from 2 days before illness onset (or, for asymptomatic patients, 2 days prior to specimen collection (testing)) until the time the patient is isolated and for 10 days thereafter.*



Data is limited to precisely define the “prolonged exposure” to determine “close contact”, however 15 minutes of close exposure in a 24 hr period can be used as an operational definition for contact investigation. Factors to consider when defining close contact include proximity, the duration of exposure (e.g., longer exposure time likely increases exposure risk), whether the individual has symptoms (e.g., coughing likely increases exposure risk), whether either the case patient or contact were wearing an N95 respirator (which can efficiently block respiratory secretions from contaminating others and the environment) and whether the exposure was outdoors or indoors.

Regarding quarantine for those with natural immunity or persons fully vaccinated, please see [\*\*IMMUNITY – WHEN QUARANTINE IS NOT REQUIRED.\*\*](#)

### **SCHOOL EXPOSURE**

If there is a possible exposure on the school campus from a sick child or adult, as well as providing for the needs of the sick child or adult:

- The School notifies the pastor for elementary schools, and the Office of Schools as quickly as reasonably possible; *Exposure forms for employees and/or children, as applicable, are filled in sent by e-mail to Sr Elizabeth.* Communication with Sister Elizabeth determines the reportability of the case to the DOH.
- Guided by directions from Sr Elizabeth, the School notifies the County Department of Health (DOH) for guidance regarding management of the exposure.
- Any classroom or school-wide closure is determined in collaboration with the County Department of Health and the ADOM Office of Catholic Schools with consultation with Sister Elizabeth.
- If classroom closure is necessary, cleaning and sanitization protocols consistent with the CDC guidelines and the local ordinances will be implemented and reopening will occur only after the risk of exposure has been fully evaluated.

### **EMPLOYEE EXPOSURE**

If there is a possible exposure on the school campus from a sick employee (or contractor)

- the employee/contractor is sent home or contact made at the request of the employee/contractor for transportation home; testing may be recommended.
- If it is a school employee and a reasonable expectation that the exposure may have occurred at school, Sister Elizabeth is notified and the DOH is contacted by the school as per guidance from Sister Elizabeth.
- Any classroom or school-wide closure is determined in collaboration with the County Department of Health and the ADOM Office of Catholic Schools with consultation with Sister Elizabeth.
- Any closure of parish offices or other entity offices is determined in collaboration with the pastor/administrator and the Chancellors’ Office based on the guidance of the County Department of Health.
- Cleaning protocols consistent with the CDC guidelines will be implemented. Reopening will occur only after the risk of exposure has been fully evaluated.
- Return of the employee/contractor to work follows this ADOM protocol.

All exposures or infections, students or employees or priests, must be reported to the Chancellors’ Office (Sr Elizabeth Worley) using the electronic form sent by e-mail:

**ADOM COVID EXPOSURE REPORT – EMPLOYEE** for employees or volunteers,  
**ADOM COVID EXPOSURE REPORT – STUDENT** for students

**ADOM PROTOCOL FOR TESTING, QUARANTINE/ISOLATION, AND RETURN TO WORK**  
**TESTING and QUARANTINE for symptomatic patient to rule out COVID infection**

The ADOM protocol is based on the CDC determination based on symptoms and approved by the FL Department of Health (DOH).

1. A person may be tested when he/she is symptomatic and testing is sought to confirm or rule out COVID-19 infection,
2. A person who is awaiting COVID-19 test results (as in #1) must remain self-quarantined until results are received.
3. A person who is symptomatic and who receives negative test results to rule out COVID-19 is able to return to school or work 24 hrs after the symptoms resolve.

**TESTING and QUARANTINE for individuals who have had CLOSE CONTACT with infected patient**

1. A person may be tested when there is reason to believe a close contact with an infected person has occurred (*a CLOSE CONTACT (within 6' (or, with the cohort classroom, a minimum of 3') for up to 15 minutes, intermittent or continuous) with the infected person up to 2 days before that person's on-set of symptoms or testing or for 10 days thereafter*).
2. Anyone who has experienced a close contact (as defined by the CDC) and has negative results from a COVID-19 test must still follow the defined **quarantine protocol** (SEE BELOW) for the full 14 day incubation period of the virus as counted from the date of the LAST exposure to the infected person who was the close contact (*criteria for a close contact in footnote on page 2 of this policy*) unless they qualify under the Section [IMMUNITY – WHEN QUARANTINE IS NOT REQUIRED](#).
3. A patient who is quarantined after a close contact (see #1 in this section, above), who later develops symptoms while on quarantine is required to have a minimum 10 days' isolation for resolution of symptoms, counted from the date of on-set of symptoms, before returning to school or work. NO ADDITIONAL TESTING IS NEEDED OR RECOMMENDED.

**QUARANTINE PROTOCOL**

Quarantine applies to those who are potentially exposed to COVID-19 via CLOSE CONTACT with an infected person. One who is quarantined must stay at home, avoid contact with others, and is recommended to wear a mask at home when with others.

<p><b>ADOM PREFERRED:</b></p>	<p><b>QUARANTINE 7 DAYS + PCR and caution until 14<sup>th</sup> day</b> 6 full days of quarantine - then Testing no sooner than day 6 or later, PCR test required quarantine continued until NEGATIVE results received quarantine must include at least 7 full days present negative results to supervisor/school return to normal life after negative results and completion of 7 full days of quarantine EXTRA caution for 7 more days/monitor symptoms for full 14 days' incubation period</p>
<p><b>IF ELECTING NOT TO TEST:</b></p>	<p><b>QUARANTINE 10 DAYS and caution until 14<sup>th</sup> day</b> 10 full days of quarantine NO testing Return to normal life after 10 full days of quarantine if NO symptoms have begun EXTRA caution for 4 more days/monitor symptoms for full 14 days' incubation period</p>

## **IMMUNITY – WHEN QUARANTINE IS NOT REQUIRED**

Persons who have natural immunity by having recovered from COVID do not need to be quarantined from a close contact exposure if the recovery from the virus occurred **within 90 days of the exposure**. If longer than 90 days prior to the current exposure (close contact), quarantine is necessary.

Fully vaccinated persons do not need to be quarantined from a close contact exposure.

Unvaccinated persons who have tested antibody positive within 3 months before or immediately following an exposure to someone with suspected or confirmed COVID-19 and who have remained asymptomatic since the current COVID-19 exposure do not need to quarantine, provided there is limited or no contact with persons at high risk for severe COVID-19 illness, including older adults and persons with certain medical conditions.

**TESTING POSITIVE: requires ISOLATION** *for individuals infected with COVID-19; exposure form must be sent to Sr Elizabeth.* Isolation applies to those who have tested positive with COVID-19, whether symptomatic or asymptomatic and lasts for at least 10 days from on-set of symptoms or date the patient tested positive. **NO REPEAT TESTING** is recommended or required by the CDC, ADOM or DOH.

1. Anyone who tested **positive and has remained asymptomatic** must isolate for a minimum of 10 days from testing date before consideration to return to work; if any symptoms appear, including fever, report immediately to the individual's supervisor; after 10 days, supervisor confirms clearance via Chancellor's office for employee/student to return to work/school **(NO repeat testing needed)**
2. Anyone who had tested **positive and has mild to moderate symptoms** of the disease, the symptoms, including temperature, should be monitored and reported to supervisor; that once the symptoms resolve AND a minimum of 10 days has passed from the onset of symptoms AND at least 2 days had passed without fever, supervisor confirms clearance via Chancellor's office for employee/student to return to work/school **(NO repeat testing needed)**
3. Anyone who had **serious symptoms** of the disease (and likely was treated in a hospital) will need to contact their physician and will require medical clearance from a physician to return. The physician may prescribe additional tests. The individual must remain isolated until medical clearance is received to return to work. **Contact Sr Elizabeth Worley with questions (305.450.6420, eworley@theadom.org)**

## **DETERMINING IF AN ENCOUNTER REQUIRES QUARANTINE**

It can sometimes be confusing to determine if an encounter that occurred with an infected person is actually a CLOSE CONTACT as per CDC – or if it is NOT a close contact. **A CLOSE CONTACT is believed to be one in which transmission of the virus can occur from the infected person to other person(s).** There are several specific thresholds and all must be met for an encounter to be a CLOSE CONTACT – and require person(s) to be quarantined.

The quarantine protocol is based on the fact that the corona virus has a 14-day incubation period within the person who has contracted the virus and that almost all persons who will develop the virus will do so within the first 7 days of that 14-day period -- which is exactly why quarantine period protocol (outlined on page 10) is based on a mandatory 7-day

quarantine + PCR testing and if negative, return to normal life *with extra caution for the remainder of the 14 day period.*

The protocol for determining a close contact is based on *distance from*, and *time with a contagious person* – and therefore the mandatory quarantine for the person depends on **ALL** of the following criteria:

1. DISTANCE - Was the person within 6' of the infected (COVID positive) person (or, for a student in the cohort classroom, within 3' of an infected classmate)? **AND**
2. TIME - Was the person that close (within 6' of the infected (COVID positive) person (or, for a student in the cohort classroom, within 3' of an infected classmate)) in excess of 15 minutes, either for short periods or for continuous contact during a 24 hr period? **AND**
3. CONTAGIOUS PERIOD - Was the encounter in #1 and #2 (above) within 2 days of the onset of symptoms of a symptomatic patient or the date the infected person tested positive or even after the infected person tested positive?

If the answer to #1, #2, and #3 are ALL YES, then there is a reasonable probability that the encounter was a CLOSE CONTACT and transmission of the virus may have occurred from the infected person to another person(s) who met those criteria. Quarantine is required unless the person having the close contact has natural immunity from having the virus within the last 90 days or has been fully vaccinated.

If the answer to any one of the questions above, #1, #2, and #3, is NO, then the probability of transmission is less (risk of illness is lowered) – but not able to be eliminated or specifically quantified.

### **Questions and answers**

- Q. What if the date of onset of symptoms of the infected person is not known or if they were asymptomatic?
- A. Use the 2-day time period prior to the testing date (when positive test result was received) to answer #3.
- Q. What if the person is determined to have had a CLOSE CONTACT and the person gets tested (PCR) and receives negative results? Are they virus free and can they return to school or work?
- A. Absolutely not. A negative test result for someone in quarantine as a result of a CLOSE CONTACT with a person who is POSITIVE for the COVID-19 virus *only confirms that as of the day of their test, the symptoms have not yet developed.* It is necessary that the entire Quarantine protocol be followed for the full 7 days and PCR testing NOT OCCUR until day 6 following the exposure to the infected person.
- Q. What if the person is determined to have had a CLOSE CONTACT and the person gets tested and receives positive results or symptoms do develop during the quarantine?
- A. The person is required to isolate for a minimum of 10 days from date of testing, if asymptomatic, or date of on-set of symptoms, if symptomatic.

A minimum of ten days of isolation is required although more may be need for resolution of symptoms. And the last two (2) days of the isolation period, the person must have a normal temperature without the use of fever reducing medication before return to school or work. This isolation period may be shorter or longer than the 14-day quarantine

already underway, depending on when the virus causes symptoms or the testing (which was positive) occurs.

Once a person on quarantine develops symptoms or receives positive test results, the protocol for isolation until resolution of symptoms (for a minimum isolation of 10 days for mild or moderate symptoms), becomes the determinant for the length of isolation and eventual clearance to return to school or work.

- Q. What if the person who experiences a close contact with one who is infected and has had COVID-19 within the last 90 days, or has been fully vaccinated?
- A. The person does not need to quarantine because of the vaccination or if relying on natural immunity, as long as the exposure was within the 90-day look-back period.

### **FMLA**

For employees out of work because of a COVID related exposure or employees who are sick, the usual process toward implementing FMLA is used; bookkeepers should contact ADOM HR with questions

### **COMMUNICATION**

- With the County Department of Health is required if an exposure occurs in school. Contact the Chancellors' Office for guidance
- With the parents, faculty or school staff, in the event of a school exposure, contact the Chancellors' Office for guidance (sample notification below)

### **SAMPLE NOTIFICATION TO SCHOOL COMMUNITY OR THIRD PARTIES**

*Please edit as needed given the circumstances of the exposure. Schools should share with the Office of Schools before release. Communications Office is available to assist at any time and should be asked to assist for any communication to be sent outside of the immediate school community of parents and employees.*

We care about the health and safety of our school community and in this time of an unprecedented pandemic we are treating health and safety as a top priority guiding our operational decisions. We recently learned that one of our (students/employees/ contractors in [identify grade or other descriptor]) tested positive for COVID-19. You or your child may have had close contact with the infected individual and this requires self-monitoring as to symptoms. If you or your child develop COVID-19 symptoms, you should contact your physician. Please see our school re-entry plan for additional details.

[Additional directives from the Archdiocese of Miami and Department of Health specific to the particular facts and circumstances, such as classroom or school closure, should be included as well.]

We have notified those employees and others who to our knowledge potentially have been exposed to the infected individual through close contact at work directing them to remain quarantined as per the CDC protocol and should practice social distancing and actively monitor for symptoms.

In addition to notifying those individuals who may have come into contact with the infected student, we are taking additional measures to ensure our facility is properly cleaned and disinfected.

We reiterate our commitment to the health and safety of our school community, and others with whom we interact. Thank you for your understanding during this challenging time.

Please contact Sr Elizabeth Worley with respect to possible exposures experienced by anyone in parishes, schools or other entities of the ADOM. 305.450.6420 or [eworley@theadom.org](mailto:eworley@theadom.org).

#### **MIAMI DADE DEPARTMENT OF HEALTH CONTACT**

##### **Stephanie Calle**

Florida Department of Health in Miami-Dade County  
Biological Scientist IV  
[Stephanie.Calle@flhealth.gov](mailto:Stephanie.Calle@flhealth.gov)  
(305) 470-5660

#### **BROWARD DEPARTMENT OF HEALTH CONTACT**

##### **Melissa Jiha**

Epidemiologist, Department of Epidemiology  
Florida Department of Health in Broward County  
780 SW 24<sup>th</sup> Street, Fort Lauderdale, Florida 33315  
Office: 954-847-8153  
Fax: 954-467-4870 or 954-713-3169  
Email: [Melissa.jiha@flhealth.gov](mailto:Melissa.jiha@flhealth.gov)

#### **MONROE DEPARTMENT OF HEALTH CONTACT**

##### **Dana Portillo, RNC, BA**

FDOH-Monroe School Health Coordinator  
Monroe County School District  
[Dana.Portillo@flhealth.gov](mailto:Dana.Portillo@flhealth.gov) | [Dana.Portillo@keysschools.com](mailto:Dana.Portillo@keysschools.com)  
Phone#: 305-587-7703

#### **CLEANING AND SANITIZING FACILITIES**

COVID-19 virus can land on surfaces and it is possible for transmission occur from a surface to a person if they touch a virus contaminated surface and then touch their hand to eyes, nose or mouth. However, in most situation, the risk of infection from touching a surface is low. The CDC guidance on cleaning and disinfecting surfaces has changed reducing the guidance for spraying/disinfecting all areas on a daily basis.

The most reliable way to prevent infection from surfaces is hand hygiene: wash hands regularly and/or use hand sanitizer (at least 60% alcohol). When no one with confirmed or suspected COVID-19 is known to have been in a space, cleaning with soap and water once a day is usually enough to sufficiently remove any virus that may be on surfaces and help maintain a healthy facility. Only if there is high transmission of virus in the community, low use of masks and infrequent hand hygiene, then disinfecting space may be advisable.

If a person diagnosed with COVID has been in a room within the last 24 hrs, then the space should be ventilated, then cleaned and disinfected. Otherwise, regular daily cleaning is sufficient.

Areas used for young children or persons without masks may need more frequent cleaning. High touch areas should be cleaned at least once daily. Disinfect if a person who is COVID positive has been present in the space within the last 24 hrs. After 24 hrs. regular cleaning is sufficient.



## **IN-PERSON MEETINGS IN SCHOOLS AND PARISHES**

In all activities sponsored by the parishes and schools of the Archdiocese of Miami and within the property and facilities of the Archdiocese, the following basic principles must be observed by all persons at all times. These principles apply to everyone, including persons who have been vaccinated and/or developed natural immunity by previously contracting the COVID-19 virus with a subsequent full recovery.

1. Persons who are diagnosed with COVID-19 or sick with COVID-19-like symptoms, those who have been exposed to one infected with the virus and are themselves within the proper quarantine period, or those who have been tested for the presence of the virus and are awaiting test results ARE NOT PERMITTED to participate in-person in any meetings, activities or fund raisers as outlined in this policy.
2. Persons who participate in parish meetings, pastoral activities, social or fund-raising events MUST wear a face mask, at all times when with any other person(s) except when eating. For vaccinated persons, please review [MASK REQUIREMENT FOR FULLY VACCINATED PERSONS](#).
3. Arrangement of tables and seating in meeting rooms, classrooms or conference rooms; seating within the church or parish hall; set-up of booths at outside events or any similar grouping of furniture that will likely determine where participants will gather must provide for a minimum of 6' distance between each person in all directions around each person. Theater style arrangements are preferred where possible. If persons are seated at tables, table must be at least 6' wide with 6' space between individuals to the right and left on each side. For tables that are less than 6' in width, persons may not be seated directly across from each other but must be staggered so that distance diagonally across the table, person to person, meets the 6' distance minimum. Masks are required in addition to 6' social distance.
4. The pastor has the authority to delegate to the leader of a parish ministry or organization that meets at/in the parish property so that the leader may have the responsibility to direct participants' compliance with all provisions of this policy, for their safety and the safety of all present.
5. Traffic into and out of an enclosed area (conference room, classroom, parish hall, church, etc) should be managed with the use of signage such that traffic is one-way at entrance and exit points, avoiding when possible persons passing in close space, face to face.
6. Assure that meeting space or indoor gathering space is of sufficient size that the participants remain socially distanced (at least 6'), that the space is well ventilated, is regularly cleaned and that hand sanitizer is always available to participants.
7. Additional attention must be paid to restrooms provided for participants in meetings and/or social or fund raising activities to have them cleaned frequently throughout the time they are in use and be fully cleaned once the usage is completed at the end of the day.
8. If parish or school kitchen facilities are used, the number of persons in the area must be kept to a minimum, each person should have sufficient space to meet the social distance requirement, the period of time working in the kitchen should be kept to a minimum, and masks must be used.



9. Whenever possible, cooking of food for parish fund raising events should be safely conducted outdoors.
10. Food to be served and/or sold at a parish event is best ordered in advance, paid in advance, maintained at a safe temperature (hot or cold) depending on the food served, and picked up by the customer to be consumed off-site, ideally, through a drive-through distribution point. While this may require additional coordination, it provides the safest delivery to the participants.
11. If food is to be served and consumed on-site, a designated seating area must be provided for the consumption of the food, with the arrangement of the seating to be OUTDOORS ONLY, with seating socially distant as per the requirements of the CDC (a minimum of 6' in every direction) and participants remaining in the area as brief a period of time as possible.
12. If it is required that participants wait for a particular service, minimize the wait by taking reservations, having participants wait in their car, or if on foot, marking floor or pavement in order to space individuals with sufficient distance (6') from each other and from those providing the service.
13. Movement of participants in and around the activities planned (games, rides, sports participants, sports observers, food booths, or whatever) must be carefully planned to observe social distance at all times and in all places. Contracts with vendors (such as carnival vendors) need to be adjusted as to spacing of rides, queueing of lines for rides, spacing of persons on rides, etc.
14. While the positivity rate and the vaccination rate of the local area may be favorable to reduce transmission, food or carnival ride vendors may reside in an area of the country that is less favorable. Rules of social distance and masks apply to vendors and their employees at all times while on ADOM property. Any contracts signed related to events should include a statement to comply with ADOM policy regarding COVID-19 procedures. An ADOM parish carnival contract must carry a policy revision date of March 15, 2021 or later in order to ensure this language has been included.
15. Rides or games that have space (seats on rides, for example) used by participants or items touched by participants (ring toss, for example) should either be disinfected between each use or closed and not made available to the participants.
16. Kiddie rides should be disinfected between rides or be closed and not made available to the participants.
17. Security and safe management of participants at fund-raising events remains a concern and should be adequately addressed in the planning of event. Trained volunteers can be of great assistance in supporting a safe and enjoyable fund-raiser by directing traffic on foot or in cars, assuring that participants are wearing face masks and socially distancing.
18. Signage providing reminders about COVID-19 safety (masks, social distance, hand washing), and directions for movement of people or cars should be used as needed. A public address sound system, if available, can enhance the parish's ability to broadcast information and directions to a large group of persons to improve safety.
19. Limit attendance at events, discourage gathering in crowds, reduce the need to line up for events/services, direct pedestrian traffic in one-direction, and use the PA to frequently make announcement reminders to comply with the use of mask and social distance.
20. In order to expect participants to understand requirements for attendance at meetings, parish activities or fund-raising activities, communication before the event

and communication and signage before and at the event are critical and should be included in planning.

21. ADOM License for Space Use and ADOM Carnival Contract should carry a revision date of March 15, 2021 or later in order to assure that the language requiring compliance with the ADOM COVID-19 policy is agreed to. The documents are in Facilities folder of e-library. The person(s) or vendor signing the License or Carnival Contract should be provided a full copy of the ADOM current COVID-19 policy.
22. Parishes are asked to provide (one time only) notice of Re-opening Pastoral Activities and are asked to provide (each time) notice of their plans for Parish Fund-Raising Activities. Forms are to be sent to [eworley@theadom.org](mailto:eworley@theadom.org).
23. Parishes and Schools are asked to provide (each time) any requests to license parish or school space to be used by person(s) or organizations outside the parish. The parish or school should submit BOTH the form showing the planning for the Activity and the License for Space Use or Carnival Contract. Forms, and provide a copy of the ADOM current COVID-19 policy to the entity seeking to use the space. The forms for signature are to be sent to [eworley@theadom.org](mailto:eworley@theadom.org) along with any questions.

### **SUMMER CAMPS/SUMMER SCHOOL PROGRAMS**

Please present plans for summer camps or programs to [eworley@theadom.org](mailto:eworley@theadom.org) for review and approval. Summer school sessions should operate under the same protocol as has been used during the regular school year as outlined in this policy. See the next section regarding mask usage.

### **MASKS FOR CHILDREN/STUDENTS AT SUMMER PROGRAMS/CAMPS**

While parents are strongly encouraged to have their child (12 or older) vaccinated during the summer, summer programs and camps sponsored by the ADOM entities or on ADOM property must operate in a manner that presumes that many participants and possibly adult staff are not yet fully vaccinated.

As of Jun 7, variants of the COVID-19 virus continue to be encountered in other countries and have the potential of transmission into the US. Even fully vaccinated persons in the US are susceptible to transmission of the COVID-19 virus and may become symptomatic. Thus, use of masks and social distancing remain requirements on ADOM properties/schools/churches for the safety of everyone, regardless of vaccination status.

**For classroom and other indoor space, mask and social distancing requirements continue through the summer of 2021 as they have been in place during the school year, with ONE change.**

Children of any age, regardless of vaccination status, are NOT required to use masks for OUTDOOR activities as long as social distancing at a minimum of 6' apart can be maintained.

However, mask usage outdoors remains optional. Some parents may recognize that it is beneficial for their child to use a mask outdoors and that parental decision is to be supported by the staff of the school or parish.

## Summary of changes as of June 7, 2021

### **MASK REQUIREMENTS FOR FULLY VACCINATED PERSONS**

#### **See p. 3 of the ADOM policy**

Fully vaccinated persons (adults) are not required to wear face covering (masks)

- when out-of-doors
  - a. If not in a crowded area AND
  - b. If socially distant for more than 6' from all other non-vaccinated adults AND
  - c. If NO students are present regardless of social distance;
- when in-doors where all others are also FULLY VACCINATED;
- when in-doors where all others present are of only one household.

Fully vaccinated persons ARE REQUIRED to wear a mask **indoors, within** the ADOM school or parish buildings:

- a. when children/students or any other persons that are not fully vaccinated are present in the same room or indoor space, and
- b. when **outdoors** on duty as an employee and students are present.

Age eligibility for vaccination will continue to decrease as students will be eligible for vaccination. The rules above for fully vaccinated persons apply regardless of the person's age. Fully vaccinated teen-agers are required to wear a mask in school, on school bus, and when attending outdoor events such as sports and other events where groups of non-vaccinated persons are present.

### **MASKS FOR CHILDREN/STUDENTS AT SUMMER PROGRAMS/CAMPS**

#### **See p. 17 of the ADOM policy**

While parents are strongly encouraged to have their child (12 or older) vaccinated during the summer, summer programs and camps sponsored by the ADOM entities or on ADOM property must operate in a manner that presumes that many participants and possibly adult staff are not yet fully vaccinated.

As of June 7, variants of the COVID-19 virus continue to be encountered in other countries and have the potential of transmission into the US. Even fully vaccinated persons in the US are susceptible to transmission of the COVID-19 virus and may become symptomatic. Thus, use of masks and social distancing remain requirements on ADOM properties/schools/churches for the safety of everyone, regardless of vaccination status.

**For classroom and other indoor space, mask and social distancing requirements continue through the summer of 2021 as they have been in place during the school year, with ONE change.**

Children of any age, regardless of vaccination status, are NOT required to use masks for OUTDOOR activities as long as social distancing at a minimum of 6' apart can be maintained.

However, mask usage for children/youth outdoors remains optional. Some parents may recognize that it is beneficial for their child to use a mask outdoors and that parental decision is to be supported by the staff of the school or parish. As noted above, fully vaccinated adults – even outdoors – are required to wear a mask if students are present.