Operating Schools After Vaccination

In January and February 2021, Kentucky’s educators will have the opportunity to receive vaccinations against the COVID-19 virus. This document provides guidance and considerations for school operations after vaccinations have been distributed.

Considerations for In-Person Schooling

While widespread vaccination is likely to expedite the return to normalcy, the exponential spread of the COVID-19 virus and new variants will remain a threat to communities for many months. Even after fully vaccinating faculty and staff, schools must carefully consider the way they operate in-person schooling.

The vaccination against COVID-19 prevents severe illness but does not prevent against infection or limit the ability of an individual to spread the disease. Students currently are ineligible to receive the vaccination as it has not been approved for use in children, and remain at risk for COVID-19. Infected students also may spread COVID-19 to family members who have not yet been vaccinated, leading to increased community spread.

Due to this, and pursuant to Executive Order No. 2020-1041 (EO 2020-1041), all schools must continue to follow the five Safety Expectations outlined in the Guidance on Safety Expectations and Best Practices for Kentucky Schools, updated Dec. 7, 2020, including those regarding:

- Social distancing;
- Cloth face coverings, school health policies and personal protective equipment;
- Screening and school exclusion;
- Sanitation and environmental factors; and
- Contact tracing.

Schools also are encouraged to continue to use the COVID-19 Daily Case Incidence Rate Maps and follow the guidance outlined in the COVID-19 Mode of Instruction Metrics for K-12 Education to determine if in-person schooling is appropriate for their communities. Regardless of the mode of instruction selected, schools are required to offer a fully virtual option for any student who requests it (EO 2020-1041). Resources for designing quality virtual instruction can be found on the KDE’s COVID-19 Reopening Resources webpage.

Considerations for Remote Work

Pursuant to EO 2020-1041, school districts must provide an alternative or virtual work assignment to any employee who requests accommodation and meets the following criteria for a high risk individual developed by the Food and Drug Administration:
Has a body mass index (BMI) greater than or equal to 35;
Has chronic kidney disease;
Has diabetes;
Has immunosuppressive disease;
Is currently receiving immunosuppressive treatment;
Is equal to or greater than 65 years of age; OR
Is equal to or greater than 55 years of age AND has
  o Cardiovascular disease,
  o Hypertension, or
  o Chronic obstructive pulmonary disease/other chronic respiratory disease.

The requirement to offer accommodations extends until the eligible employee is at least seven calendar days past the final dose of the complete vaccination series for the applicable vaccine.

Item six of EO 2020-1041 states that the requirement to accommodate high risk employees “does not apply to employees who decline the vaccine for reasons other than CDC or FDA recommendations.” Therefore, once the employee has been offered and declines the vaccine, he/she would no longer be entitled to accommodation assuming the employee didn’t decline based on CDC or FDA recommendations to not take the vaccination. If the employee declined the vaccine based on guidance from the CDC or FDA that individuals with conditions the employee possesses shouldn’t take the vaccine, then the accommodations would still apply. Districts should consult with their board counsel if an employee declined the vaccine for religious reasons but still wishes to take advantage of the accommodation in EO 2020-1041.

Districts are still required to follow the Americans with Disabilities Act (ADA) and Section 504 of the Rehabilitation Act with regard to accommodating employees with disabilities. Districts should review their policies and consult with their board counsel regarding any accommodation that may be necessary under the ADA or Section 504.

Quarantine Procedures

Districts should continue to maintain strict quarantine procedures even after the faculty and staff have been fully vaccinated against the COVID-19 virus. As has been stated, the vaccination against COVID-19 prevents severe illness but does not prevent against infection or limit the ability for an individual to spread disease. As such, the U.S. Centers for Disease Control and Prevention (CDC) recommends that vaccinated individuals continue to follow established quarantine protocols after an exposure to someone with COVID-19.

For individuals who have not been vaccinated, the CDC recommends a 14-day quarantine. In instances when a 14-day quarantine is not possible, the CDC recommends the following two alternative models:
Quarantine can end after day 10 without testing and if no symptoms have been reported during daily monitoring. With this strategy, residual post-quarantine transmission risk is estimated to be about 1% with an upper limit of about 10%.

Quarantine can end after day 7 if the quarantined individual tests negative and if no symptoms were reported during daily monitoring. The testing sample may be collected and tested within 48 hours before the end of the scheduled quarantine period, but quarantine cannot be discontinued earlier than day 8. With this strategy, the residual post-quarantine transmission risk is estimated to be about 5% with an upper limit of about 12%.

Individuals who have received a full series of the COVID-19 vaccination that experience a close contact with an individual infected with COVID-19 and remains asymptomatic after exposure are not required to quarantine if their contact is more than 14 days and fewer than 90 days from their final dose of the COVID-19 vaccine.

Contact tracers may, in accordance with more detailed guidance provided by the CDC, recommend specific quarantine guidelines based on the unique circumstances of each exposure. Schools and districts should defer to the recommendation of contract tracers.

Quarantine procedures will be updated to align with the most current CDC guidelines.

Post-Vaccination Scenarios

- A teacher who has had their first vaccination shot is exposed to COVID-19 while visiting with family.
  - Since the teacher has only received the first vaccination shot, the CDC recommends that the teacher continues to follow existing quarantine protocols.

- A teacher who has received their final dose of the COVID-19 vaccine on Feb. 1 and is exposed to COVID-19 at a birthday party on Feb. 3.
  - While this teacher has had a full course of the COVID-19 vaccine, their exposure was within 14 days of their final dose of the COVID-19 vaccine and should follow existing quarantine protocols.

- A teacher who has received their final dose of the COVID-19 vaccine on Feb. 1 and is exposed to COVID-19 on March 15.
  - This teacher has been fully vaccinated against the COVID-19 virus. They were exposed more than 14 days and fewer than 90 days from their final dose of the COVID-19 vaccination. This teacher is not required to quarantine as long as they remain asymptomatic.

- A teacher who has received their final dose of the COVID-19 vaccine on Feb. 1 and is exposed to COVID-19 on March 15 and shows symptoms of COVID-19 following exposure.
  - This teacher has been fully vaccinated against the COVID-19 virus and was
exposed more than 14 days and fewer than 90 days from their final dose of the COVID-19 vaccination. However, since this teacher is showing symptoms of COVID-19, this teacher is required to quarantine.

- A teacher who has been assigned to teach a summer intensive program received their final dose of the COVID-19 vaccine on Feb. 1. During the program, the teacher is exposed to the COVID-19 virus on June 3.
  - While this teacher has had a full course of the COVID-19 vaccine, their exposure was more than 90 days from their final dose of the COVID-19 vaccine. This teacher should follow existing quarantine protocols.
- A student tests positive for COVID-19 after the faculty have been fully vaccinated.
  - The COVID-19 vaccination has not been approved for use on children. The school should continue to follow existing protocols for student contact tracing and quarantine.