

https://www.cdc.gov/coronavirus/2019-ncov/php/contact-tracing/contact-tracing-plan/outbreaks.html

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Nearly every type of healthcare setting has been impacted by transmission of SARS-CoV-2, and guidance on preventing transmission has been provided by CDC and by OSHA . State governments have different degrees of regulatory authority over healthcare settings. Personnel collaborating with hospitals and other healthcare entities should have knowledge of applicable legal requirements.

Nursing homes and other long-term care facilities (LTCF) have been especially vulnerable to COVID-19 outbreaks. Recent experience with outbreaks in nursing homes has also reinforced that residents with COVID-19 may not be willing or able to report typical symptoms such as fever or respiratory symptoms; some may not report any symptoms. CDC has guidance on how LTCF and nursing homes can be prepared to prevent COVID-19. The Centers for Medicare and Medicaid Services (CMS) also provides guidance for nursing homes.

Infection control practitioners may or may not be familiar with COVID-19 case investigations and contact tracing. An investigation should be planned jointly as a collaboration between the facility and the health department, including the facility's occupational health services and infection protection and control stañ. Initial discussions should cover data sharing and division of responsibilities.

In healthcare settings, there may be unique concerns about liability, conì dentiality, media coverage, and occupational hazards. <u>OSHA</u> has guidance to assist employers in understanding the agency's requirements. OSHA's regulations might require hospital administrators to report when employees have been diagnosed with COVID-19 from occupational exposure. Note: Twenty-two states operate <u>individual plans</u> covering both private sector and state and local government workers. Public health oï cials should consider inviting legal counsel to the initial planning sessions with healthcare administrators.

## Schools and Child Care Settings

This category includes childcare centers, preschools, primary through secondary schools, vocational schools that replace or immediately follow secondary school, and colleges and universities. CDC issued guidance for administrators of public and private child care programs and K-12 schools, as well as guidance for administrators of public and private institutions of higher education (IHE) and guidance for child care programs that remain open.

During an outbreak in these settings, a coordinated investigation that includes communication and collaborative decision making with education agencies and parents can increase the eï ciency and success of the process. Consent, assent, and disclosure of information are more complex for non-emancipated minors than for adults. Each interaction with a minor is also a potential interaction with the family. The health department typically has limited alternatives for evaluating a minor if permission is not granted. Anticipatory legal consultation is recommended.

The presence of COVID-19 in schools often generates publicity. Ideally, the health department should transparently communicate with the school and parents/guardians. Public health oï cials should anticipate media coverage and plan a collaborative strategy.

Public health or cials should consider whether extramural activities add other exposure sites and contacts. Clubs, sports, and certain classes require the case investigator to obtain additional information when interviewing the client, the client's parents/guardians, and school personnel. For clients with COVID-19 who ride school buses, a bus company might keep a roster of riders with addresses.

The strategy for case investigation and contact tracing in child care centers, preschools, and primary schools depends on whether the person diagnosed with COVID-19 is a child or an adult (e.g., a teacher or caregiver). In a case investigation of a child aged <5 years who has COVID-19 and who attends preschool or child care, all adults in these settings should be included if the source of the child's infection has not been located in the family or household. Certain home-based child care centers include adults who do not provide child care but still share space or interact with the children.

School breaks, vacations, graduations, and transfers can disrupt the case investigation and contact tracing. In collaboration with school oï cials, the health department can notify students and other contacts who will be unavailable at the school. These contacts should be referred for testing.

## Shelters and Other Settings Providing Services for People Experiencing Homelessness

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