

#### DIRECTIVE OF THE HEALTH OFFICER No. 2020-02gh

#### **DIRECTIVE OF THE HEALTH OFFICER**

#### OF THE CITY AND COUNTY OF SAN FRANCISCO DIRECTING ALL INDIVIDUALS EXPOSED TO A PERSON DIAGNOSED WITH OR LIKELY TO HAVEREGARDING COVID-19 TO SELF-ISOLATION AND QUARANTINE

(PUBLIC HEALTH EMERGENCY QUARANTINE DIRECTIVE) DATE OF DIRECTIVE: January 10June 6, 2022, updated April 8, 2022

Summary: SARS-CoV-2, the virus that causes Coronavirus 2019 Disease ("COVID-19"), is easily transmitted, especially in group settings, and the disease can be extremely serious. It can require long hospital stays, and in some instances cause long-term health consequences or death. It can impact not only those known to be at high risk but also other people, regardless of age or risk factors. The spread of COVID-19 (which includes people without symptoms) remains a danger to the health of the public within the City and County of San Francisco (the "City"), and in particular to people who are who are not up to date on their vaccines. Omicron, the latest variant of COVID-19, is spreading rapidly across the country and now throughout the Bay Area. Omicron is significantly more contagious than the Delta variant. Individuals in close contact with a person infected with the virus that causes COVID-19 may themselves easily become infected and may then inadvertently spread it even if they have no symptoms or only have mild symptoms or before they become symptomatic. To help slow COVID-19's spread and protect vulnerable individuals, it is necessary that anyone who is not up to date on COVID-19 vaccines who is exposed to a person diagnosed with or likely to have COVID-19 self-quarantine subject to the rules listed in this Directive. And all people who had close contact with someone with COVID-19 should self-monitor and then isolate if they develop symptoms. Quarantine separates an at-risk person who knows that they have been exposed to COVID-19 from others until it is determined that they are not at risk for spreading the virus. This self-quarantine requirement protects everyone in the City, including people who are not eligible for vaccinations (children under five) or boosters at this time, and those who are high risk for serious illness. The update to this Directive includes recently updated guidelines on shortened quarantine duration and exceptions to who must quarantine, but the rules listed below should be consulted for details. For additional information about quarantine requirements, see www.sfdph.org/dph/COVID-19/Isolation-and-Quarantine.asp. This directive was updated on April 8, 2022 to conform the definition of "Up-to-Date on Vaccination" to the definition in Health Officer Order No. C19-07v. Summary: SARS-CoV-2, the virus that causes Coronavirus 2019 Disease ("COVID-19"), can still be easily transmitted, regardless of vaccination status. This combined directive lists the current isolation rules and quarantine recommendations and requirements in the City and County of San Francisco (the "City") that apply to all people in the City in order to reduce the spread of COVID-19.



#### HEALTH OFFICER DIRECTIVE No. 2020-02gh

#### UNDER THE AUTHORITY OF CALIFORNIA HEALTH AND SAFETY CODE SECTIONS 101040, 101085, 120175, 120215, 120220, AND 120225 THE HEALTH OFFICER OF THE CITY AND COUNTY OF SAN FRANCISCO (<u>"HEALTH</u> <u>OFFICER"</u>) DIRECTS AS FOLLOWS:

#### 1. Definitions.

- a. *CDC*. "CDC" means the United States Centers for Disease Control and Prevention.
- b. CDPH. "CDPH" means the California Department of Public Health.
- c. *Close Contact.* "Close Contact" means being within six feet of sharing the same indoor airspace with a Person With COVID-19 for a total of 15 minutes or more in a 24-hour period while the person is contagious. A person is considered contagious if they *either* (i) had symptoms, from 48 hours before their symptoms began until at least five days after the start of symptoms, *or* (ii) -did not have symptoms but learned they were COVID-19 positive from a test, from 48 hours before their COVID-19 test was collected until five days after they were tested. (Note that Cal/OSHA may have different rules regarding being a close contact in the workplace, and those rules apply in the workplace setting.)

A health care professional who provides treatment to a Person With COVID-19 is not considered a Close Contact as long as the health care professional was wearing appropriate personal protective equipment during the contact as defined by their institution.

- d. *High Risk Setting.* "High-Risk Setting" means certain care or living settings involving many people, including many congregate settings, where vulnerable populations reside out of necessity and where the risk of COVID-19 transmission is high, consisting of general acute care hospitals, skilled nursing facilities (including subacute facilities), intermediate care facilities, residential care facilities for the elderly, homeless shelters, and jails (including, but not limited to, Juvenile Justice Center Juvenile Hall).
- d. *Isolate* and *Isolation*. "Isolation" means to avoid all contact with other people, including by trying to limit contact with other members of the same household, for the limited period described in this Directive while a person is a Person with COVID-19. To "isolate" means to be in Isolation.
- e. *Person With COVID-19.* "Person With COVID-19" means a person who tests positive for the virus that causes COVID-19 (SARS-CoV-2) or has been clinically diagnosed with COVID-19 by a healthcare provider. A person is no longer considered a Person With COVID-19 once <u>all</u> of the following occur: (a) at least one (1) day (i.e., 24 hours) has passed since their last fever (without use of fever-reducing medications), <u>and</u> (b) there has been improvement of other symptoms, <u>and</u> (c) at least five (5) days have passed since symptoms first appeared. A person who tested positive for COVID-19 but never had symptoms is no longer considered a Person With COVID-19 five (5) days after the date of their first positive test.



#### HEALTH OFFICER DIRECTIVE No. 2020-02gh

- f. Quarantine. "Quarantine" means to avoid all contact with other people, including by trying to limit contact with other members of the same household, for the limited period described in this Directive either immediately after being exposed to COVID-19 due to being a Close Contact.
- g. Up-to-Date on Vaccination. "Up-to-Date on Vaccination" means (i) two weeks after a person has completed the entire recommended initial series of vaccination (usually one or two doses) with a vaccine authorized to prevent COVID-19 by the FDA, including by way of an emergency use authorization, or by the World Health Organization (WHO) (also defined as being Vaccinated with a Complete Initial Series) and (ii) when the person has received atheir first Booster vaccine dose once a person is eligible for a Booster. Until a person is eligible for a Booster, they are considered Up-to-Date on Vaccination two weeks after completing their full initial series of vaccination.
- f.h. Vaccinated with a Complete Initial Series. "Vaccinated with a Complete Initial Series" means two weeks after completing the entire recommended initial series of vaccination (usually one or two doses) with a vaccine authorized to prevent COVID-19 by the FDA, including by way of an emergency use authorization, or by the World Health Organization (WHO). For example, as of the date of issuance of this Order, an individual has completed an initial vaccination series at least two weeks after receiving a second dose of the Pfizer-BioNTech (Comirnaty) or Moderna (Spikevax) COVID-19 vaccine or two weeks after receiving the single dose Johnson & Johnson's Janssen COVID-19 vaccine. A list of FDA-authorized vaccines is available at www.fda.gov/emergencypreparedness-and-response/coronavirus-disease-2019-covid-19/covid-19-vaccines. A list of WHO-authorized vaccines is available at https://extranet.who.int/pqweb/vaccines/covid-19-vaccines.

Other terms used in this Directive have the same meaning given to them in Health Officer Order No. <u>C19-07yC19-07</u>, including as that order may be updated in the future.

#### 2. Quarantine Requirement for Close Contacts of a Person With COVID-19.

3.2. Except as specifically stated below, any person—other than health care personnel—who has Close Contact with a Person With COVID-19 must follow the relevant guidelines for "Persons Who Are Exposed to Someone With COVID-19" set forth in the CDPHGeneral Rules and Recommendations Regarding Isolation and Quarantine. At this point in the pandemic, it is still important that we take steps to protect those around us if we are infected with the virus that causes COVID-19 or if we think we might be infected with that virus. CDPH has published recommendations, "Guidance on Isolation and Quarantine for COVID-19 Contact Tracing" (https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Guidance-on-Isolation-and-Quarantine-for-COVID-19-Contact-Tracing.aspx). Although the CDPH guidelines are only recommendations, here in the City this Directive makes some of those recommendations a mandated requirement.

In general, the rule is that anyone who has been diagnosed with COVID-19 (through a positive test or medical diagnosis), regardless of vaccination status, **must** isolate using the guidelines listed in the CDPH guidance. Anyone who has COVID-19 symptoms or who is a



# HEALTH OFFICER DIRECTIVE No. 2020-02gh

close contact of someone with COVID-19 is *strongly recommended* to follow the CDPH guidelines, and they **must** isolate if they test positive.

Given that there are a lot of nuances around isolation and quarantine in different settings, this Directive lists the rules and recommendations that apply in specific situations in the City. The table attached to this Directive as **Attachment A** lists the rules or recommendations that apply in each setting. Attachment A is incorporated into this Directive by this reference. If Attachment A is updated in the future, it may be revised and attached to this Directive without any need for further revision or amendment to this Directive. The date at the top of Attachment A lists the date of its revision.

You can find additional guidance on isolation and quarantine at:

- sf.gov/information/youve-had-close-contact-or-positive-test (isolation) sf.gov/quarantining-covid-19 (quarantine)
- a. Any health care personnel who has Close Contact with a Person With COVID-19 must follow CDPH "Guidance on Quarantine for Health Care Personnel (HCP) Exposed to SARS-CoV-2 and Return to Work for HCP with COVID-19" (https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-21-08.aspx).
- b. Any person who lives in a long term care facility who has Close Contact with a Person With COVID-19 must follow the quarantine guidelines set forth in the San Francisco Department of Public Health "Interim Guidance: Prevention and Management of COVID-19 in Long-Term Care Facilities" (<u>https://www.sfdph.org/dph/files/ig/COVID-19-</u> <u>Prevention Management LTCFS.pdf</u>).
- c. A person who works in a High Risk Setting and has a Close Contact with a Person With COVID-19 must notify their employer and follow any workplace policies and requirements concerning return to work.
- d. A person who is not Up-to-Date on Vaccination who has a Close Contact with a Person With COVID-19 cannot visit a High Risk Setting until 14 days after their last Close Contact. Any person who has a Close Contact with a Person With COVID-19 cannot visit a Skilled Nursing Facility until 14 days after their last Close Contact, regardless of their vaccination status.
- 4. Exceptions and Exemptions.
  - a. Minors and adults with special needs who are unable to care for themselves do not have to quarantine away from caregivers in their Residence. But, they should stay at their Residence and avoid people outside their Household except to receive medical care during the quarantine period. And those living with them or providing care to them are strongly encouraged to wear a Well-Fitted Mask and wash their hands frequently during the quarantine period; if their caregivers are not Up to Date on COVID-19 Vaccines, they must also quarantine per the terms of this Directive after their <u>last</u> Close Contact with the Person With COVID-19.



# Department of Public Health Health Officer Directive

#### HEALTH OFFICER DIRECTIVE No. 2020-02gh

- b. TK-12 students who are not Up to Date on Vaccination and have a Close Contact with a Person With COVID-19 in any school setting in which students are supervised by school staff (including indoor or outdoor school settings and school buses, including on buses operated by public and private school systems) may undergo a modified quarantine as detailed in CDPH's "COVID-19 Public Health Guidance for K-12 Schools in California, 2021-22 School Year" (available at https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/K-12-Guidance-2021-22-School-Year.aspx).
- c. Generally, children and youth who have Close Contact with a Person With COVID-19 <u>outdoors</u> at a school, childcare, or Program for Children and Youth will not be considered a Close Contact who is required to quarantine unless the Close Contact occurs (1) during a high-contact sport or dance or (2) while stationary (e.g., while eating a meal or otherwise seated close together). This is because quarantine is only required if the child is within six feet of the case for at least at least 15 minutes within a 24 hour period.
- d. A health care professional who provides treatment to a Person With COVID-19 is not considered a Close Contact as long as the health care professional was wearing appropriate personal protective equipment during the contact as defined by their institution.
- 5. This Directive is necessary in light of the ongoing pandemic, and although many people in the City have received several doses of vaccine, not everyone is eligible for vaccination or Up to Date on Vaccination and even people who have received all vaccine doses for which they are eligible can become infected by SARS CoV 2 and transmit to others, especially since the arrival of the Omicron variant.
- 6. If an individual who is subject to this Directive fails to comply with it in willful disregard of public safety, the Health Officer may take additional action(s), which may include issuing an individualized quarantine or isolation order and seeking civil detention at a health facility or other location, as necessary to protect the public's health.
- 3. This Directive becomes effective immediately on issuance and will be in effect until it is extended, rescinded, superseded, or amended in writing by the Health Officer. Also, effective immediately on issuance, this Directive revises and replaces Directive Number 2020-02f, issued December 30, 202102g, updated April 8, 2022.
- 4. For purposes of this Directive, any future changes provided online to the <u>IsolationCDPH</u> isolation and <u>Quarantine Instructionsquarantine guidance documents</u> or any other <u>CDPH</u> guidance listed in this Directive are automatically incorporated into this <u>Directive</u> by this reference. Any health and safety plan approved by the Health Officer addressing quarantine may continue to be followed.

Susan Philip, MD, MPH,	January 10	June 6, 2022 <del>, as</del>
1, , , ,	Juliuary 10	<u> </u>
updated April 8, 2022		
Health Officer of the		
City and County of San Francisco		

Setting*	Situation	Rules or Recommendations
<u>General</u> Public	COVID-19 Infection (positive PCR or	ISOLATION REQUIREMENTS
	antigen test or medical diagnosis)	<u>CDPH isolation recommendations <b>must</b> be followed in the City.</u> <u>Isolation is <b>required</b> regardless of vaccination status or recent infection. Use these rules:</u>
		1) Stay home for at least 5 days after start of symptoms (or after date of first positive test if no symptoms).
		2) Isolation can end after day 5 if symptoms are not present or are resolving and a diagnostic specimen (antigen test preferred) collected on Day 5 or later tests negative.
		3) If unable to test, choosing not to test, or testing positive on Day 5 (or later), isolation can end after Day 10 if fever-free for 24 hours without the use of fever-reducing medications.
		4) If fever is present, isolation must be continued until 24 hours after fever resolves.
		5) If symptoms, other than fever, are not resolving, continue to isolate until symptoms are resolving or until after Day 10.
		6) Per CDPH masking guidance, infected persons should wear a well-fitting mask around others for a total of 10 days, especially in indoor settings.
	Close Contact without COVID-19 Symptoms	<u>CDPH quarantine recommendations should be followed in the City.</u> <u>Quarantine is <i>recommended</i> regardless of vaccination status unless the person had a <u>COVID-19 infection in the prior 90 days (unless symptoms develop). Use these</u> <u>recommendations:</u></u>
		1) Test within 3-5 days after last exposure.
		2) Per CDPH masking guidance, close contacts should wear a well-fitting mask around others for a total of 10 days, especially in indoor settings and when near those at higher risk for severe COVID-19 disease.
		3) If symptoms develop:
		a) Test and stay home (see next section on symptomatic persons), AND
		b) If test result is positive, follow isolation requirements above.

Setting <sup>*</sup>	Situation	Rules or Recommendations
<u>General</u> <u>Public</u> (continued)	COVID-19 Symptoms without Close Contact	<u>CDPH "self-isolation" recommendations should be followed in the City pending a test.</u> <u>"Self-isolation" is regardless of vaccination status or recent infection. Use these recommendations:</u>
		1) Self-isolate and test as soon as possible to determine infection status. Knowing one is infected early during self-isolation enables (a) earlier access to treatment options, if indicated (especially for those that may be at risk for severe illness), and (b) notification of exposed persons (close contacts) who may also benefit by knowing if they are infected.
		For symptomatic persons who have tested positive within the previous 90 days, using an antigen test is preferred.
		2) Remain in self-isolation while waiting for testing results. If not tested, continue isolating for 10 days after the day of symptom onset, and if you cannot isolate, you should wear a well-fitting mask for 10 days.
		3) Consider continuing self-isolation and retesting in 1-2 days if testing negative with an antigen test, particularly if tested during the first 1-2 days of symptoms.
		<u>4) Continue to self-isolate if test result is positive, follow isolation requirements above, and contact your healthcare provider about available treatments if symptoms are severe or you are at high risk for serious disease or if you have any questions concerning your care.</u>

Setting <sup>*</sup>	Situation	Rules or Recommendations
Skilled Nursing Facilities (SNFs)	Close Contact without COVID-19 Symptoms -or- COVID-19 Infection (positive PCR or antigen test or medical diagnosis)	<ul> <li>Staff: SNF staff are subject to CDPH AFL 21-08 (and any future updates to that AFL) as well as any facility-specific rules.</li> <li>For Close Contact without COVID-19 symptoms:</li> <li>If Up-to-Date on Vaccination (including a Booster once eligible) or after recovery from a COVID-19 infection within the previous 90 days, there is no work restriction for staff if they have a negative diagnostic test (antigen or nucleic acid) upon identification of the exposure and again at 5-7 days after last exposure.</li> <li>For all others (meaning people who are unvaccinated or Vaccinated with a Complete Initial Series but without a Booster once eligible, and both without a COVID-19 infection within the previous 90 days), staff quarantine is required for at least 7 days, with a negative diagnostic test (antigen or nucleic acid) required upon identification of the exposure and again within 48 hours prior to the return to work. (Refer to the AFL for special rules during critical staffing shortages.)</li> <li>For COVID-19 Infection:</li> <li>If Up-to-Date on Vaccination (including a Booster once eligible), staff is required to generally follow the isolation requirements above, but isolation can end after 5 days with a negative diagnostic test (antigen preferred) on the same day as return or within 24 hours prior to return to work or can end after 10 days without a test. (Refer to the AFL for special rules during critical staffing shortages.)</li> <li>For all others (meaning people who are unvaccinated or Vaccinated with a Complete Initial Series but without a Booster once eligible), staff is required to generally follow the isolation can end after 7 days with a negative diagnostic test (antigen preferred) on the same day as return or within 24 hours prior to return to work or can end after 7 days with a negative diagnostic test (antigen or eligible), staff is required to generally follow the isolation requirements above, but isolation can end after 7 days with a negative diagnostic test (antigen orece eligible), staf</li></ul>

Setting <sup>*</sup>	Situation	Rules or Recommendations
General Acute Care Hospitals	Close Contact without COVID-19 Symptoms -or- COVID-19 Infection (positive PCR or antigen test or medical diagnosis)	Staff:       SNF staff are subject to CDPH AFL 21-08.8 (and any future updates to that AFL) as well as any facility-specific rules.         For Close Contact without COVID-19 symptoms:         If Up-to-Date on Vaccination (including a Booster once eligible) or after recovery from a COVID-19 infection within the previous 90 days, there is no work restriction for staff if they have a negative diagnostic test (antigen or nucleic acid) upon identification of the exposure and again at 5-7 days after last exposure.         For all others (meaning people who are unvaccinated or Vaccinated with a Complete Initial Series but without a Booster once eligible, and both without a COVID-19 infection within the previous 90 days), staff quarantine is <i>recommended</i> for at least 7 days, with a negative diagnostic test (antigen or nucleic acid) required upon identification of the exposure and again within 48 hours prior to the return to work. (Refer to the AFL for special rules during critical staffing shortages.)         For COVID-19 Infection:       If Up-to-Date on Vaccination (including a Booster once eligible), staff is required to generally follow the isolation requirements above, but isolation can end after 5 days with a negative diagnostic test (antigen preferred) on the same day as return or within 24 hours prior to return to work or can end after 10 days without a test. (Refer to the AFL for special rules during critical staffing shortages.)         For all others (meaning people who are unvaccinated or Vaccinated with a Complete Initial Series but without a Booster once eligible), staff is required to generally follow the isolation requirements above, but isolation can end after 5 days with a negative diagnostic test (antigen preferred) on the same day as return or within 24 hours prior to return to work or can end after 10 days without a test

Setting*	Situation	Rules or Recommendations
Adult and Senior Care Programs (as defined by Community Care Licensing, such as Adult Residential Facilities (ARFs); Residential Care Facilities for the Elderly (RCFEs); Residential Care Facilities – Continuing Care; Social Rehabilitation Facilities; Residential Care Facilities for the Chronically III (RCFCIs))	For staff only: Close Contact without COVID-19 Symptoms -or- COVID-19 Infection (positive PCR or antigen test or medical diagnosis)	<ul> <li>Staff: ASC program staff are subject to CCL PIN 22-09-ASC (and any future updates to that PIN) as well as any facility-specific rules.</li> <li>For Close Contact without COVID-19 symptoms: <ul> <li>If Up-to-Date on Vaccination (including a Booster once eligible), there is no work restriction for staff if they have a negative diagnostic test (antigen or nucleic acid) upon identification of the exposure and again at 5-7 days after last exposure.</li> <li>For all others (meaning people who are unvaccinated or Vaccinated with a Complete Initial Series but without a Booster once eligible), staff quarantine is required for at least 7 days, with a negative diagnostic test (antigen or nucleic acid) required upon identification of the exposure and again within 48 hours prior to the return to work. (Refer to the PIN for special rules during critical staffing shortages.)</li> </ul> </li> <li>For COVID-19 Infection: <ul> <li>If Up-to-Date on Vaccination (including a Booster once eligible), staff is required to generally follow the isolation requirements above, subject to these additional requirements: <ul> <li>Isolation can end after 5 days with a negative diagnostic test (antigen preferred) on the same day as return or within 24 hours prior to return to work or can end after 10 days without a test.</li> <li>Isolation must last for 20 days if the staff member had severe symptoms or is immunocompromised, using a test-based strategy (see PIN for details).</li> <li>If unable to test prior to return, then staff may provide direct care only for persons in care with confirmed COVID-19 infection, preferably in a cohort setting.</li> </ul> </li> <li>Staff must wear an N95 respirator for source control at all times within the facility and wear a mask in public until the isolation period has been completed.</li> <li>(Refer to the PIN for special rules during critical staffing shortages.)</li> </ul> </li> <li>For all others (meaning people who are unvaccinated or Vaccinated with a Complete Initial Series but without a Booste</li></ul>

Setting <sup>*</sup>	Situation	Rules or Recommendations
Adult and Senior Care Programs (continued)		Isolation can end after 7 days with a negative diagnostic test (antigen preferred) on the same day as return or within 24 hours prior to return to work or can end after 10 days without a test. Isolation must last for 20 days if the staff member had severe symptoms or is
		immunocompromised, using a test-based strategy (see PIN for details). If unable to test prior to return, then staff may provide direct care only for persons in care with confirmed COVID-19 infection, preferably in a cohort setting. Staff must wear an N95 respirator for source control at all times within the facility and wear a mask in public until the isolation period has been completed. (Refer to the PIN for special rules during critical staffing shortages.)
	In relation to residents only	The rules are complex. Please see the following Community Care Licensing Division PIN for the rules, including Appendix A (isolation) and Appendix B (quarantine): PIN 22-15-ASC - Resident Cohorting, Isolation and Quarantine, Staffing, and Use of Personal Protective Equipment Based on Resident Coronavirus Disease 2019 (COVID-19) Status

Setting <sup>*</sup>	Situation	Rules or Recommendations
Shelters	<u>Close Contact</u> ( <u>Note: if</u> <u>staff/residents have a</u> <u>COVID-19 Infection</u> ( <u>positive PCR or</u> <u>antigen test or</u> <u>medical diagnosis</u> ), <u>follow the isolation</u> <u>requirements above.</u> )	<ul> <li>Staff/clients/people experiencing homelessness: If Vaccinated with a Complete Initial Series or had a COVID-19 in the prior 90 days, quarantine is not required if no symptoms are present (subject to facility rules).</li> <li>If not Vaccinated with a Complete Initial Series or no COVID-19 infection in the prior 90 days, quarantine is <i>recommended</i> following these rules: <ol> <li>Quarantine for at least 5 days after last exposure.</li> <li>Quarantine can end after Day 5 if symptoms are not present and a diagnostic specimen collected on Day 5 or later tests negative.</li> <li>If unable to test or choosing not to test, and symptoms are not present, quarantine can end after day 10.</li> <li>Comply with CDPH masking guidance (i.e., universal masking and, in some cases, where surgical masks or higher filtration respirators may be required).</li> <li>Strongly encouraged to get vaccinated or boosted.</li> <li>If symptoms develop: <ul> <li>a) stay home (or isolate) and test as soon as possible; AND</li> <li>b) if test result is positive, follow isolation requirements above.</li> </ul> </li> </ol></li></ul>

Setting <sup>*</sup>	Situation	Rules or Recommendations
<u>Jails/</u> <u>Correctional</u> <u>Settings</u>	<u>Close Contact</u> ( <u>Note: if</u> <u>staff/residents have a</u> <u>COVID-19 Infection</u> ( <u>positive PCR or</u> <u>antigen test or</u> <u>medical diagnosis</u> ), follow the isolation requirements above.)	<ul> <li>Staff/residents: If Up-to-Date on Vaccination (including a Booster once eligible) or had a COVID-19 in the prior 90 days, quarantine is not required if no symptoms are present (subject to facility rules).</li> <li>If not Up-to-Date on Vaccination (meaning not Vaccinated with a Complete Initial Series or no Booster once eligible) or no COVID-19 infection in the prior 90 days, quarantine is required following these rules:</li> <li>1) Quarantine for at least 5 days after last exposure.</li> <li>2) Quarantine can end after Day 5 if symptoms are not present and a diagnostic specimen collected on Day 5 or later tests negative.</li> <li>3) If unable to test or choosing not to test, and symptoms are not present, quarantine can end after day 10.</li> <li>4) Comply with CDPH masking guidance (i.e., universal masking and, in some cases, where surgical masks or higher filtration respirators may be required).</li> <li>5) Strongly encouraged to get vaccinated or boosted.</li> <li>6) If symptoms develop: <ul> <li>a) stay home (or isolate) and test as soon as possible; AND</li> <li>b) if test result is positive, follow isolation requirements above.</li> </ul> </li> </ul>

Setting <sup>*</sup>	Situation	Rules or Recommendations
Other Healthcare Settings (staff only) Other Residential Living Facilities (staff and residents)	<u>Close Contact</u> ( <u>Note: if</u> <u>staff/residents have a</u> <u>COVID-19 Infection</u> ( <u>positive PCR or</u> <u>antigen test or</u> <u>medical diagnosis</u> ), <u>follow the isolation</u> <u>requirements above.</u> )	<ul> <li>Staff/residents: If Vaccinated with a Complete Initial Series or had a COVID-19 in the prior 90 days, quarantine is not required if no symptoms are present (subject to facility rules).</li> <li>If not Vaccinated with a Complete Initial Series or no COVID-19 infection in the prior 90 days, quarantine is <i>recommended</i> following these rules:</li> <li>1) Quarantine for at least 5 days after last exposure.</li> <li>2) Quarantine can end after Day 5 if symptoms are not present and a diagnostic specimen collected on Day 5 or later tests negative.</li> <li>3) If unable to test or choosing not to test, and symptoms are not present, quarantine can end after day 10.</li> <li>4) Comply with CDPH masking guidance (i.e., universal masking and, in some cases, where surgical masks or higher filtration respirators may be required).</li> <li>5) Strongly encouraged to get vaccinated or boosted.</li> <li>6) If symptoms develop:</li> <li>a) stay home (or isolate) and test as soon as possible; AND b) if test result is positive, follow isolation requirements above.</li> </ul>

\* Note that in some workplaces, employers are subject to the Cal/OSHA Aerosol Transmissible Diseases (ATD) Standard and should consult those regulations for additional applicable requirements.