



## **GEAUGA PUBLIC HEALTH**

*Promoting and Protecting Community Health*

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### **Modified Quarantine Policy – Effective February 17, 2021**

#### **Background**

##### ***The reasons we quarantine people who have been exposed:***

The incubation period for SARS-CoV-2, the virus that causes COVID-19, is 14 days. Someone who is exposed is presumed not to have been infected if they remain symptom free after 14 days post exposure. Someone who has been exposed may have a negative test result during the initial days following exposure. This is why people who are exposed are ordered to keep away from others for a period of 14 days to limit the chance of subsequent transmission to others.

##### ***The reasons we are modifying our 14-day quarantine policy:***

There is a natural tension between the efforts to reduce the risk of viral transmission and the need to educate children in-person and return employees to the workplace. These are all positive goals but they are incompatible without some compromise. On the disease control end of the tug is the knowledge that if you successfully separate contagious individuals from others, they can't expose them and the spread of disease stops. Children could then go back to classrooms without exposing each other or the adult staff in the school and employees could return to work without exposing each other and the customers who do business in their establishments. Efforts to quarantine all exposed individuals have not been successful. Too many cases have been unwilling or unable to identify those whom they have exposed and the contacts are not identified. The volume of cases and contacts due to lax implementation of social distancing and masking strategies has made it impossible to identify and contact all who are exposed in a timely manner. There have been cases where students are missing extended periods of class time and employees on extended leave from work as a result of multiple exposures. These multiple exposures are the upstream culprit as too many students are increasingly placed in close contact through extracurricular activities that pose a higher risk of exposure than experienced in a classroom and too many employers are not enforcing disease prevention strategies in the workplace for employees or customers.

The 14-day standard for quarantine has also become complicated as more people acquire some degree of immunity either due to contracting the virus and naturally developing antibodies or by getting vaccinated and developing antibodies. It remains unclear to what degree this immunity impacts the transmission of virus from the person with immunity to others without it. Immunity is not a protective bubble around a person. They can still contract the virus. They are just less likely to experience illness as a result. In that way, they are similar to an asymptomatic subclinical case. That is, they are potentially capable of exposing others to the virus. There is insufficient evidence at this time to know how likely this is given the assumption of a lower viral load in individuals with immunity.

There is also increasing access to testing. Quarantine orders are issued by the Health Commissioner when informed of a positive test result and exposed individuals are identified. Not all individuals who are exposed are identified as this would only occur if every positive case were identified and if every one of those individuals was

willing or able to identify all those with whom they may have had close contact. Some individuals opt to get tested as evidence that they are not infected and potentially contagious to others. A negative tests only demonstrates that an individual did not have a positive test at that time. As stated earlier, a test administered in the first week after exposure may be negative when, in fact, the individual is positive and contagious. Even a true negative test has no value as soon as that individual is in subsequent close contact with someone else as they may be positive and represent a new exposure.

### ***Stakeholder Input Guiding the Modification:***

There is value in seeking guidance from those impacted by a policy. Geauga Public Health has been working closely with all of the schools in Geauga County since the beginning of the pandemic and values the input of the school leaders. The review of this policy was triggered in part by the increased frequency of questions about how to handle unique exposure circumstances and changing state policy. Geauga Public Health issued a survey to all local school district superintendents and private school principals on February 4, 2021. The survey had an 87% response rate and represented a student census of 14,217 and a staff census of 2,624. The majority (9,773, 69%) of students in the responding schools are in classrooms separated by only 3 feet. Only 3,931 (28%) are in classrooms separated by 6 feet or more. All but 263 (2%) of the students are in schools that permit athletic events that place students in close contact with each other. The majority of students (7,874, 53%) are in schools that do not permit other extracurricular events in which students are in close physical contact. Schools were asked to rate, on a scale of 1 (not at all) to 5 (a great deal), how much quarantines have interfered with staffing levels. Two schools, representing 390 (19%) of the total staff included rated this as 5 (interfering a great deal). An additional 6 schools, representing another 1,243 (47%) of the total staff included rated this as a 4. Schools were also asked the same question as it applied to student attendance. Six schools, representing 8,803 (62%) of the students involved rated this as a 4 or 5. When asked if a 14 day or 10 day quarantine would be preferred 12 of the 15 schools indicated a preference for a 10-day quarantine. When asked why, most comments were about the impact on staff levels and student attendance. The three respondents who preferred a 14-day quarantine focused their comments on the 14-day incubation period and the need to reduce risk of exposure. When asked about a combination approach where there would be a 14-day quarantine for some and a 10-day quarantine for others, most were willing to apply it but there were several concerns about trying to explain it and implement it.

### ***The modified quarantine policy:***

- Geauga Public Health will reduce the original 14-day quarantine order to a **10-day minimum quarantine order for all exposed individuals**. However, Geauga Public Health will continue to recommend a 14-day quarantine period for all exposed individuals and will support all schools and businesses who choose to extend the ten day period for 4 additional days to cover the incubation period of the virus.
- Contacts who remain without symptoms at the end of the 10 day quarantine are released from the 10 -day quarantine order.
- An exception to this 10-day quarantine order will be made if a K-12 student is considered to be a contact due only to a **classroom** exposure that occurred in a classroom where masking is enforced AND where all students are separated by a minimum of 6 feet. In that limited set of circumstances, the exposed student may return to the classroom but will otherwise still be in quarantine for a minimum of 10-days. If the quarantined student remains without symptoms at the end of the 10 day quarantine the student is completely released from the 10 -day quarantine order.
- Geauga Public Health will review this policy as more evidence emerges regarding the impact of immunity on the transmission of the virus from those with immunity.
- This modification to the Geauga Public Health quarantine policy does not impact in anyway the policy regarding Isolation orders for ALL positive cases.

This policy will be in effect beginning February 17, 2021.