



ACE COVID-19 Response Guide 2.0

This document aims to provide helpful information and guidance for how to address the circus education industry’s current needs with regard to COVID-19. This document is likely to change over time as new guidance and legal ramifications emerge.

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Brought to you by the ACE COVID-19 Task Force:

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AYCO/ACE and the individuals on the COVID-19 Task Force are not legal or health experts, and do not assume liability for any action taken based on this compiled information.

Specific guidance may vary based on state and local mandates for various industries, so we recommend checking with your local jurisdiction before changing any COVID-related policies.

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Vaccination

- **Should/can I have separate policies for vaccinated and unvaccinated community members?**
 - Current scientific information indicates that vaccinated people do have decreased risk of contracting COVID-19 and also of transmitting COVID-19, compared to unvaccinated people (see last question in this section, about immunity and transmission in vaccinated people).
 - Source:
<https://www.ibtimes.com/can-fully-vaccinated-people-still-transmit-covid-19-3200591>
 - Vaccine access varies based on age, location, race/ethnicity, health conditions, and many other factors. Not everyone is able to get vaccinated or has the same opportunities to, and while differentiating service between vaccinated and unvaccinated people may be legal, it's important to consider the ethical implications as well.
 - Federal, state, and local governments may have separate mandates or guidelines for vaccinated people and unvaccinated people.
 - Source: CDC guidelines for unvaccinated people:
<https://www.cdc.gov/coronavirus/2019-ncov/vaccines/fully-vaccinated.html>
 - However, policies about requirements like masking and social distancing are usually up to private businesses to set, as long as those policies follow the law, and can be more restrictive.
 - For instance, if the law requires unvaccinated people to wear masks, your policy can require *all* your staff and participants to wear masks, regardless of vaccination status. In that instance, you also cannot allow people to go unmasked without knowing their vaccination status (see next question about finding out about vaccination status).
 - Or, if the law doesn't require anyone to wear masks regardless of vaccination status and also doesn't forbid mask wearing, your policy can still require *everyone* to wear masks.
 - If you are allowed to and decide to have less restrictive policies for vaccinated people, consider whether to keep other general policies more stringent (for instance, if masks are not required for vaccinated people, perhaps continue to clean equipment in between uses and to make sure to have high efficiency ventilation).
 - The burden of enforcing separate policies, and the impact on your organization's culture and community, are also important factors to consider when deciding.
- **Can I require my staff to be vaccinated? Can I require my students to be vaccinated? Can I ask members of my community (students, staff, etc) if they have been vaccinated? Can I ask them to show their vaccine card?**
 - This seems to vary state to state and is highly subject to interpretation by individual state legislators and authorities, as well as health and legal experts. Because all of the COVID vaccines in the US currently only have emergency use authorization, it is uncharted legal territory. In Colorado, the Attorney General has declared that employers can require that workers get vaccinated for COVID-19 and furnish proof, as long as you are not violating the Americans with Disabilities Act or not honoring religious exemptions. In Florida, the interpretation is that employers may ask about status, but cannot require documentation. In Texas, state and federal agencies under the jurisdiction of the governor may not ask, but it's

unclear whether private businesses are allowed and we are already seeing precedents in the cruise industry to require proof for boarding.

- Source:
<https://krdo.com/news/top-stories/2021/05/17/colorado-employers-can-legally-require-covid-19-vaccination-and-ask-for-proof/>
- Source:
<https://www.wfla.com/8-on-your-side/florida-employers-can-require-covid-19-vaccine-but-cant-ask-for-proof/>
- Source:
<https://www.khou.com/article/news/health/coronavirus/vaccine/vaccination-proof-business-school-travel/285-3bc2a06a-4d48-4386-a7a5-db4c7de094e2>

- **What is the best way to ask members of my community if they have been vaccinated?**

- Consider asking directly but making it not mandatory to answer. If your organization is implementing different policies for vaccinated people and unvaccinated people, make sure it is clear that not answering means following the policies for unvaccinated people. This way, the information is voluntary and not required. (Keep in mind that state and local laws for requiring health information from employees may be different than laws for customers).
- If you don't have different policies based on vaccination status, there is no need to ask.
- **Communication Strategies Based On Your Approach:**
 - Vaccine Verification (if you are requiring proof):
 - Studio: "Are you willing to share with me your vaccination status?"
 - If No: "OK, here are our policies for people with unverified vaccination status."
 - If Yes: "Can you show me your vaccination card or other proof of vaccination? We will document your status in our system and not share that information outside of our system'."
 - Continuing Conservative Risk Mitigation (if you do not have separate rules):
 - You do not need to ask if you are planning on having the same rules for everyone, regardless of vaccination status.
 - Communicate the rules that everyone must follow in written, digital, and verbal formats.
 - Honor System (if you are not requiring proof, but have different rules based on different vaccination status):
 - Communicate the rules that each group (vaccinated and unvaccinated) must follow in written, digital, and verbal formats.
 - We do not recommend going this route as there is a potential for distrust within your studio community.

- **Can I keep copies/records of community members' vaccinations cards or their vaccination statuses on file?**

- The Health Insurance Portability and Accountability Act (HIPAA) applies to healthcare settings ("covered entities"), not to private businesses such as circus schools. As long as health information is **voluntarily supplied** by the person, they have given their consent for your

organization to view it (as opposed to in healthcare settings, where the health information is generated and not necessarily supplied by the person).

- **However, there has not yet been a legal court case testing this exact situation.**
- **Based on current legal expertise, it is commonly accepted that it is OK to keep a record of who is vaccinated and not vaccinated. We do not recommend keeping a photo of their vaccination card.**
- Best practice is to NOT share a person's health information with anyone outside of your organization, and show reasonable best efforts to keep the information private (locked physical files, password-protected digital files, etc). Having a written policy about who has access and how information is stored is recommended.
 - Source: <https://www.cdc.gov/vaccines/imz-managers/laws/hipaa/overview.html#admin>
 - Source: <https://www.miamiherald.com/news/coronavirus/article251474853.html>

- **Can a person still get or spread COVID even once fully vaccinated (2 weeks after last dose)?**

- **What risks do vaccinated individuals pose to each other and to non-vaccinated individuals?**

- The vaccines currently available in the US are effective. Vaccinated individuals have a sharply decreased risk of contracting COVID-19.
 - Source: https://www.cdc.gov/coronavirus/2019-ncov/vaccines/effectiveness.html?s_cid=10464:vaccine%20effectiveness:sem.ga:p:RG:GM:gen:PTN:FY21
- One observation study shows that individuals who are 12+ days out from their first dose of the mRNA vaccine show decreased viral load, likely indicating lower ability to shed the virus and be contagious to others.
 - Source: <https://www.nature.com/articles/s41591-021-01316-7>
- Vaccinated individuals who experienced a “break-through infection” (testing positive after being fully vaccinated) have lower viral load and therefore lower risk of transmission to other individuals.
 - Source: <https://www.jwatch.org/na53497/2021/04/27/viral-load-breakthrough-infection-after-receiving-pfizer>

Masking/Face Coverings

- **What information/metrics can I use to determine if it's time to end our mask requirement?**
 - Make sure to research and follow state and local mandates. Your organization may choose to be more cautious or have more restrictive policies than those legally mandated. You may choose to use metrics like national, state, and local vaccination, case, and death rates to determine whether or not your policy will be more restrictive than the law. You may also choose to allow or encourage masking, even if not required. The exact percentage of the population needed to be vaccinated to achieve herd immunity from COVID-19 is unknown.
 - Source: https://www.who.int/news-room/q-a-detail/herd-immunity-lockdowns-and-covid-19?gclid=Cj0KCQjw7pKFBhDUARIsAFUoMDaZOxxcTQ73dlz-zfbLT6BZVFpS9t7vPNpdqhnVHsOy9yclYnPEfsaAkuOEALw_wcB#
 - Guidance from the CDC indicates that fully vaccinated individuals may “resume activities without wearing a mask or staying 6 feet apart, except where required by federal, state, local, tribal, or territorial laws, rules, and regulations, including local business and workplace guidance”. You may choose to have separate social distancing policies for vaccinated and unvaccinated people.
 - Source: <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/fully-vaccinated.html>
 - Example from Sky Candy:
 - For now, we're officially keeping masks on indefinitely for most activities. This is for several reasons: (1) many of our youth students are not yet eligible for any form of vaccine, (2) we wanted to prioritize making other changes around distancing and apparatus sharing, (3) we wanted to honor the many concerns shared by staff and students around their feelings of safety and distrust of folks without masks, (4) we do not want to engage in vaccine verification and maintaining potentially sensitive medical data in order to ensure only vaccinated individuals were not masking in our space.
 - We will revisit our mask policy when (a) Austin, TX reaches Stage 1 in our COVID risk metrics, (b) vaccines become widely available to all age groups we offer services to at our studio, and/or (c) the CDC shifts guidance on masking for unvaccinated individuals.
- **How can I respond to students who say that our mask policies are not in line with CDC or other governmental organization's guidelines?**
 - As long as your policies are not more lenient than what is required by law, you can explain that as a circus community, you are maintaining policies in alignment with what you feel is safest for *all* participants, including those who are not able to or choose not to vaccinate.
 - Your reasons for wanting to have more strict making policies than the CDC may stem from a number of areas, including:
 - We serve a large youth population that has not yet had access to a vaccine for their age group (under 12).
 - We polled our community and there are still lots of feelings of fear coming out of this traumatic year we have all experienced together and we have decided to move more slowly / conservatively than the CDC as we make this transition.

- We do not feel comfortable with or have the administrative capacity to maintain records for vaccine verification and feel more comfortable maintaining the same rules across the board at the moment for all studio participants.
- We have decided that as an organization, we would like to wait until vaccination rates in our local community have reached X threshold before we feel comfortable with removing masks.
- As a private business, I get to set the rules.

Equipment & Surface Cleaning

- **What is the risk of spreading COVID-19 by touching surfaces?**

- The CDC states: “The principal mode by which people are infected with SARS-CoV-2 (the virus that causes COVID-19) is through exposure to respiratory droplets carrying infectious virus. It is possible for people to be infected through contact with contaminated surfaces or objects (fomites), but the risk is generally considered to be low.”

- Source:

- <https://www.cdc.gov/coronavirus/2019-ncov/more/science-and-research/surface-transmission.html>

- Source:

- <http://www.corrections.com/news/article/51707-how-long-does-the-coronavirus-really-live-on-surfaces->

- **Do I need to keep up the extra cleaning, and if so, what is most important to focus on?**

- While COVID-19 fomite transmission risk is minimal, there are a number of other infectious diseases that are commonly spread via surface contact, including MRSA, staphylococcus, flu, etc. Consider maintaining some of your newfound regular cleaning activities in order to prevent the spread of these diseases.
- Reminder to change your air filters as recommended for airflow (i.e. MERV-13 change every 1-2 months pending on use of your HVAC system)
- If no specific state or local mandates apply, CDC guidelines state, “When no people with confirmed or suspected COVID-19 are known to have been in a space, cleaning once a day is usually enough to sufficiently remove virus that may be on surfaces and help maintain a healthy facility” and “You may want to either clean more frequently or choose to disinfect (in addition to cleaning) in shared spaces if certain conditions apply that can increase the risk of infection from touching surfaces:

- High transmission of COVID-19 in your community,
- Low number of people wearing masks,
- Infrequent hand hygiene, or
- The space is occupied by certain populations, such as people at increased risk for severe illness from COVID-19”

- Source:

- <https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html>

- **Can my students/staff start sharing equipment again?**

- If no state or local mandates apply, since the scientific information indicates that the risk of transmission is low via contact with contaminated surfaces or objects (fomites), you may choose to allow shared use of equipment without cleaning in between users, alongside other risk reduction practices like handwashing and daily cleaning. You could also choose for sharing equipment to be a policy only for vaccinated individuals, or only masked individuals, since there is evidence that droplet transmission rates are lower in those circumstances.
- Definition of Sharing:

- **Sharing:** Two or more individuals using the same apparatus without cleaning in between.
 - **Sharing in same day.** This is very low risk activity based on the information we now have about fomite transmission.
 - **Share within the same class.** This is low risk due to fomite transmission but think about the air space that is being shared. Consider having students sanitize hands between turns. Ensure that your space is adequately ventilated for the number of participants in the space.
 - Source: CDC Cleaning guidelines: <https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.htm>
 - Source: Effectiveness of face masks: <https://msphere.asm.org/content/5/5/e00637-20>
 - Source: CDC report on masking: <https://www.cdc.gov/coronavirus/2019-ncov/science/science-briefs/masking-science-sars-cov2.html>
 - Source: Decreased viral load of vaccinated people: <https://www.nature.com/articles/s41591-021-01316-7>
 - Source: Breakthrough infections for vaccinated people: <https://www.jwatch.org/na53497/2021/04/27/viral-load-breakthrough-infection-after-receiving-pfizer>
 - Source: USA Gymnastics cleaning and sharing protocols: https://usagym.org/PDFs/About%20USA%20Gymnastics/covid/aai_cleaning.pdf
 - Source: Climbing Wall Association cleaning guidance: <https://www.reopen.climbingwallindustry.org/cleaning>
- **What about the “rest period” between apparatus use? Do we still need to wash silks between every use? Can we start taping trapeze bars and lyras again?**
 - Similarly to the sharing question, since the scientific information indicates that the risk of transmission is low via contact with contaminated surfaces or objects (fomites), having a “rest period” between apparatus use, washing silks between every use, or not using tape on trapeze bars/lyras is not necessary, though other risk reduction practices like handwashing and daily cleaning are recommended.
 - **Can I put our furniture/marketing materials/children’s toys/other ‘touch share’ items back?**
 - Since the scientific information indicates that the risk of transmission is low via contact with contaminated surfaces or objects (fomites), you may choose to allow “touch share” items, alongside other risk reduction practices like handwashing and daily cleaning.

Social Distancing

- **What information/metrics can I use to determine if it's time to end our social distancing requirement?**

- The exact number of vaccinations needed for herd immunity from COVID-19 is unknown. You may also choose to allow or encourage social distancing, even if not required.
 - Source: https://www.who.int/news-room/q-a-detail/herd-immunity-lockdowns-and-covid-19?gclid=Cj0KCQjw7pKFBhDUARIsAFUoMDaZOxxcTQ73dlz-zfbLT6BZVFpS9t7vPNpdqhnuVHsOy9yclYnPEfsaAkuOEALw_wcB#
- Guidance from the CDC indicates that fully vaccinated individuals may “resume activities without wearing a mask or staying 6 feet apart, except where required by federal, state, local, tribal, or territorial laws, rules, and regulations, including local business and workplace guidance”. You may choose to have separate social distancing policies for vaccinated and unvaccinated people.
 - Source: <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/fully-vaccinated.html>
- You can use this resource from MIT (their Indoor COVID Safety Calculator) to help you determine what may be an appropriate maximum capacity for your space based on size, number of participants, masking behavior, ventilation system, activity, etc.
 - *From their disclaimer: The COVID-19 Indoor Safety Guideline is an evolving tool intended to familiarize the interested user with the factors influencing the risk of indoor airborne transmission of COVID-19, and to assist in the quantitative assessment of risk in various settings. We note that uncertainty in and intrinsic variability of model parameters may lead to errors as large as an order of magnitude, which may be compensated for by choosing a sufficiently small risk tolerance. Our guideline does not take into account short-range transmission through respiratory jets, which may substantially elevate risk when face masks are not being worn, in a manner discussed in the accompanying manuscript (Bazant & Bush, 2020). Use of the COVID-19 Indoor Safety Guideline is the sole responsibility of the user. It is being made available without guarantee or warranty of any kind. The authors do not accept any liability from its use.*
 - Source: <https://indoor-covid-safety.herokuapp.com/>
 - Source: https://docs.google.com/document/d/1fB5pysccOHvxphpTmCG_TGdytavMmc1cUum8m0pwzo/edit

- **Can I allow parents/guardians/visitors/observers back in the space?**

- Capacity and social distancing may be mandated by state and local mandates for various industries. Make sure that the total number of people in the space and their distance apart (whether based on vaccination status or not) follows those mandates. Anyone in the space should be required to follow the same policies, whether they are staff, students, or visitors. If you have separate policies for vaccinated and unvaccinated people, visitors must follow the appropriate policies.
- You will want to ensure that any parents, guardians, visitors, observers, etc are aware of any safety policies you have regarding masking, distancing, etc and/or have participated in vaccine

verification if they wish to occupy your space under rules for vaccinated individuals. As long as these extra individuals in your space do not exceed your operating capacity, as defined by local ordinances or your own calculations based on acceptable risk, it is up to you if you would like to invite non-student participants back into your space.

Other Policies

- **Should we continue to have students/staff fill out our Safety Agreement/health screening questionnaire?**
 - Consider modifying your primary waiver to include coronavirus safety procedures rather than continuing to use a separate agreement.
 - Source: https://www.cdc.gov/coronavirus/2019-ncov/community/guidance-business-response.html#anchor_1609683211941

- **Should we continue to take temperatures as part of a health screening prior to entry?**
 - Half to two-thirds of infected people have no symptoms. Temperature screening is an easy way to remind people to follow your other COVID procedures, but in and of itself is probably not a critical process.
 - Source: <https://www.littler.com/publication-press/publication/wont-hurt-bit-employee-temperature-and-health-screenings-list>
 - Source: <https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html>
 - Accuracy of Temperature Checks Source: <https://www.msn.com/en-us/health/medical/are-temperature-checks-to-screen-for-covid-19-still-worth-doing/ar-BB1eT3YX>

- **Should we continue to require hand washing/sanitizing before entry?**
 - Yes. Handwashing (especially before eating and after using the bathroom) is a best practice for reducing transmission of many diseases and promoting good hygiene and health.
 - Source: <https://www.cdc.gov/handwashing/index.html>

- **Should we still require participants (staff as well as students) to quarantine after travel?**
 - According to the CDC, people who are fully vaccinated do not have to get tested or quarantine after domestic travel.
 - Unvaccinated people should get tested with a viral test 3-5 days after travel AND stay home and self-quarantine for a full 7 days after travel. If they don't get tested, they should stay home and self-quarantine for 10 days after travel.
 - Source: <https://www.cdc.gov/coronavirus/2019-ncov/travelers/travel-during-covid19.html>
 - For international trips, the CDC recommends all travelers get tested 3-5 days after travel, and unvaccinated people also quarantine for 7 days.
 - Source: <https://www.cdc.gov/coronavirus/2019-ncov/travelers/after-travel-precautions.html>

Equity, Diversity, and Inclusion Considerations

This is not an exhaustive list. We encourage you to engage with your local community to determine pertinent EDI considerations.

- **Vaccination access and comfort varies widely. Racism and discrimination are a significant factor for many individuals in racial and ethnic minority groups when it comes to vaccines. It is important to engage empathetically with those who may be hesitant about vaccination, especially among these demographics.**
 - When creating vaccination status policies for your community, consider hesitation and reduced access to vaccination based on historic racism and discrimination. There are significant reasons that some individuals may be more hesitant about the vaccine than others.
 - Source:
https://www.cdc.gov/coronavirus/2019-ncov/community/health-equity/race-ethnicity.html?s_cid=10497:equitable%20vaccine%20distribution:sem.ga:p:RG:GM:gen:PTN:FY21
- **Youth under 12 are not yet able to access the vaccine, and youth ages 12-15 have not been eligible to be fully vaccinated (2 weeks after last shot) at the time this was published. Minors 12 and up may be subject to parental approval to get vaccinated depending on the state.**
 - Consider the dynamics of unvaccinated youth when creating policies with the awareness that they will inherently be singled out of any policies relegated for vaccinated people.
 - Source:
<https://www.osfhealthcare.org/blog/plan-activities-with-unvaccinated-kids-in-mind/>
 - Consider that there may be minors who wish to be vaccinated whose parents do not allow them to - their right to be vaccinated varies by state.
 - Source:
<https://www.vaxteen.org>
- **It is not clear what the efficacy of the vaccine is for immunocompromised people.**
 - Consider that even though someone who is immunocompromised is vaccinated, they may not be comfortable without a mask given the lack of current research findings.
 - Source:
<https://www.cdc.gov/vaccines/covid-19/info-by-product/clinical-considerations.html#:~:text=No%20data%20are%20available%20to%20administered%20to%20immunocompromised%20people.>
- **You can prepare to have conversations about vaccination status in a compassionate and empathetic way.**
 - Consider this resource [bot from the NY Times](#) that helps you respond to vaccination questions.
 - Consider the multitude of factors behind hesitancy before having the conversation.
 - Source:
<https://www.statnews.com/2021/03/26/users-guide-covid-19-vaccine-hesitant/>