

Childcare COVID-19 Toolkit

- Definitions
- Cloth Face Coverings Help Prevent the Spread of COVID-19
- Contact Tracing in the Childcare Setting
- Recommended Scripts for Communication
- Childcare Scenarios with Actions Steps
- Isolation/Quarantine Timeline
- Frequently Asked Questions

Definitions

Coronavirus: Coronavirus Disease (COVID-19) is an illness caused by a virus that can spread from person to person. The virus that causes COVID-19 is a new coronavirus that has spread throughout the world.

Contact Tracing: A strategy for slowing the spread of disease in which public health workers communicate with infectious people to identify their contacts. They then follow up with those contacts to provide guidance on how to quarantine themselves and what to do if they develop symptoms of disease.

Quarantine: The practice of keeping someone who might have been exposed to COVID-19 away from others. Quarantine helps prevent spread of disease that can occur before a person knows they are sick or if they are infected with the virus without feeling symptoms. People in quarantine must stay home (usually 14 days), separate themselves from others, monitor their health, and follow directions from their state or local health department.

Isolation: The practice of separating people infected with the virus (those who are sick with COVID-19 and those with no symptoms) from people who are not infected. People who are in isolation (usually for 10 days) must stay home until it's safe for them to be around others. In the home, anyone sick or infected must separate themselves from others by staying in a specific "sick room" or area and using a separate bathroom (if available).

Close Contact: A person who was within 6 feet of a person infected with COVID-19 for more than 15 minutes with or without a mask.

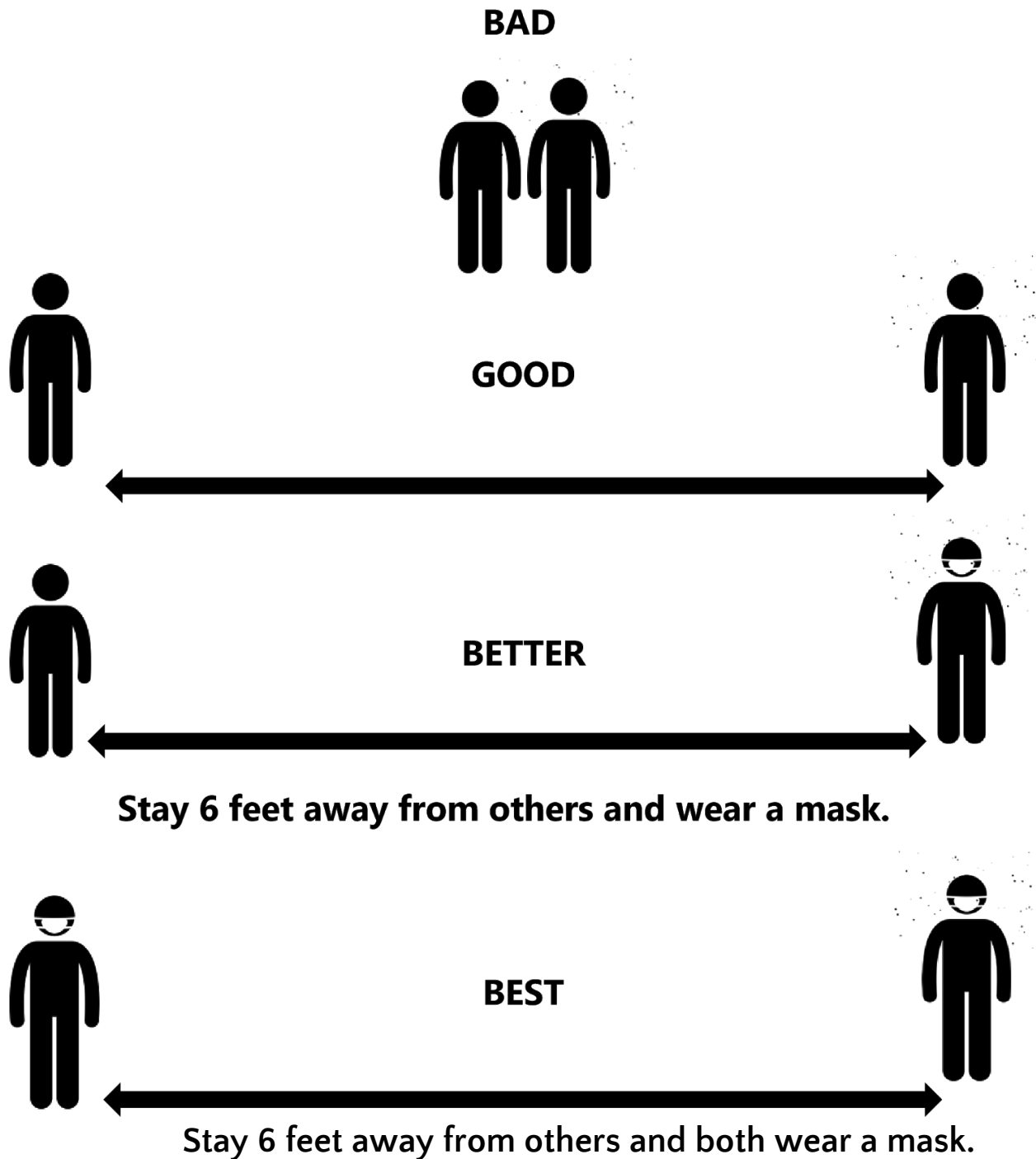
Examples of close contacts include individuals who were close to a person who is infected with COVID-19 by providing care to them at home, sharing a living space, having direct physical contact with them (touched, hugged or kissed them), and sharing eating or drinking utensils. People may also be close contacts if they were somehow exposed to droplets from an infected person (sneezed or coughed on).

Types of Masks:

- **Cloth Face Coverings:** Cloth face coverings are masks made from material that are meant to cover your nose and mouth and to be secured under the chin and are not considered personal protective equipment (PPE). These are effective in reducing the spread of the virus.
<https://www.cdc.gov/coronavirus/2019ncov/prevent-getting-sick/cloth-face-cover-guidance.html>

- **Surgical Masks:** Surgical masks were originally intended to be worn by health professionals and are considered personal protective equipment. These are effective in reducing the spread of the virus.
- **N95 or N95 respirator:** A N95 mask, also known as a respirator, filters particles that meet a certain standard for air filtration, meaning that it filters at least 95% of airborne particles. These are recommended only for use by healthcare personnel who need protection from both airborne and fluid hazards (e.g., splashes, sprays).

Cloth Face Coverings Help Prevent the Spread of COVID-19





Contact Tracing in the Childcare Setting

Contact tracing is a public health tool that is used to help stop the spread of certain communicable diseases. It involves identifying others that may have had recent close contact with a person confirmed to have the virus and giving those close contacts guidance on how to stay safe and protect others. This includes close contacts quarantining to prevent further spread of the virus. Quarantine is important with COVID-19 as a person can spread the virus before they know they are sick or if they are infected with the virus without feeling symptoms.

Symptomatic Case

Staff/child tests positive **after having symptoms.**

Symptoms include:

- Cough
- Shortness of breath
- Fever (Temp >100.4°F)
- Chills
- Repeated shaking with chills
- Muscle pain
- Headache
- Sore throat
- New loss of taste or smell

Date symptoms started: ___ / ___ / _____
48 hours prior to this: ___ / ___ / _____

Dates Staff/child attended the facility starting from 48 hours prior to onset of symptoms:

___ / ___ / _____ ___ / ___ / _____
___ / ___ / _____ ___ / ___ / _____
___ / ___ / _____ ___ / ___ / _____

**If the staff/child did not attend care during/after the 2-day window, the need to contact trace is up to childcare facility discretion.*

Close contacts on those dates:

**Close contacts are those who were in proximity to the infected person for >15 minutes and within 6 ft with or without a mask.*

Asymptomatic Case

Staff/child tests positive **and has NOT had symptoms.**

Symptoms include:

- Cough
- Shortness of breath
- Fever (Temp >100.4°F)
- Chills
- Repeated shaking with chills
- Muscle pain
- Headache
- Sore throat
- New loss of taste or smell

Test Date: ___ / ___ / _____
48 hours prior to test date: ___ / ___ / _____

Dates Staff/child attended the facility starting from 48 hours prior to onset of symptoms:

___ / ___ / _____ ___ / ___ / _____
___ / ___ / _____ ___ / ___ / _____
___ / ___ / _____ ___ / ___ / _____

**If the staff/child did not attend care during/after the 2-day window, the need to contact trace is up to childcare facility discretion.*

Close contacts on those dates:

**Close contacts are those who were in proximity to the infected person for >15 minutes and within 6 ft with or without a mask.*

Those who are identified as close contacts must quarantine (not leave the house unless necessary) for 14 days from last time of known exposure.

CDC Contact Tracing in the Childcare Setting

Helpful questions to consider when identifying close contacts in the childcare setting:

- Who is the staff/child near (less than 6ft) throughout the day?
- Has there been adequate physical distancing throughout the day?
- Are there any others at the childcare facility that live with the staff/child, or carpool with them?

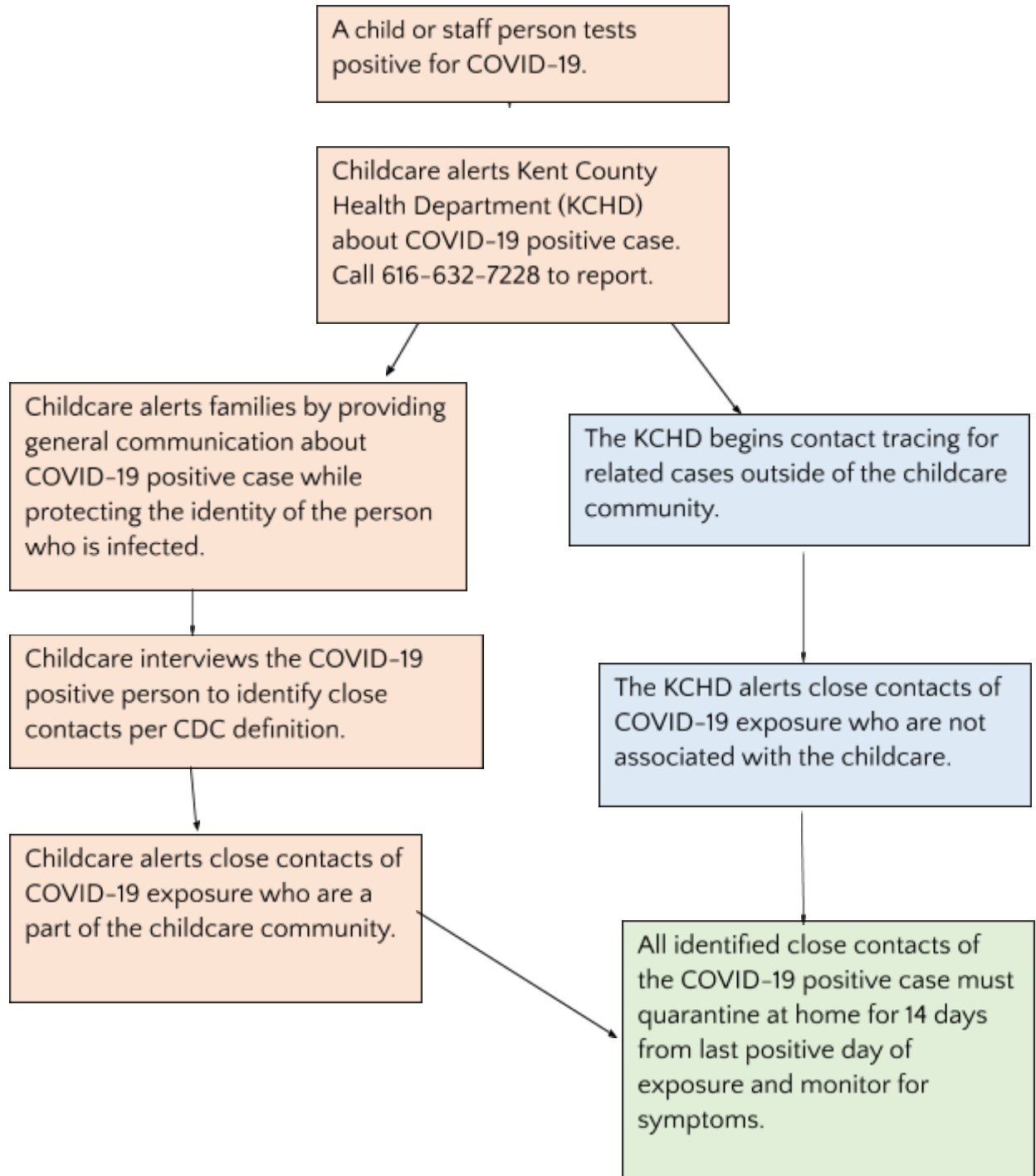
Other considerations for childcare when there is more than one positive case identified (to look for patterns/areas of concern):

- Did the childcare already know staff/child had been identified as a close/household contact of someone who was positive for COVID-19?
- Is there one location/classroom in the childcare that seems to be more affected?
- Is there something else in common with positive cases?
- Mask adherence in the childcare? (not just while in the hallway, but during classroom time?)

Contact Tracing Resources:

- **Contact Tracing:**
<https://www.cdc.gov/coronavirus/2019-ncov/php/openamerica/contact-tracing-resources.html>
- **Contact Tracer's Guide to COVID-19:**
<https://www.cdc.gov/coronavirus/2019ncov/php/notification-of-exposure.html>
- **Key Information to Collect During a Case Interview:**
<https://www.cdc.gov/coronavirus/2019-ncov/php/contact-tracing/keyinfo.html>
- **Quarantine Log:**
<https://www.cdc.gov/coronavirus/2019-ncov/downloads/php/14-DayTemperature-and-Symptom-Log-for-Contact-Tracing.pdf>

Contact Tracing in the Childcare Setting





Recommended Scripts for Childcare Community

General COVID-19 Exposure in a Childcare Setting

*“We recently became aware of a **[staff member/student/child]** in our **[school/childcare]** setting that tested positive for COVID-19. We found out on **[Insert Date Here]** that the test came back positive. We are responsible for informing all **[staff member/students/child(ren)]** who are considered “close contacts” by the CDC guidelines. If you are required to quarantine because of an exposure, we will contact you. If your **[student/child]** does not qualify as a close contact, you will not hear from us. We want to protect the confidentiality of this person unless there is a reason to inform you of this person’s identity. At this time, it is our role to tell all the families of **[Insert School/Program Name Here]** that we are moving forward under the guidance of the Kent County Health Department and that all measures have been taken to protect the wellbeing of your child(ren). Please monitor for onset of symptoms related to COVID-19, including fever, cough, difficulty breathing, headache, or new fatigue. If you note any change in the health of your child, please call your regular medical provider.”*

COVID-19 Exposure in a Specific Group in Childcare Setting:

*“A **[staff member/student]** involved with **[Insert Group Name]** was exposed to COVID-19. When the **[staff member/student]** became aware of this exposure, they were tested. The **[staff member/student]** was with the **[Insert Group Name]** on **[Insert Date Here]** for approximately **[Insert Amount of Time]**. If you are required to quarantine because of an exposure, we will contact you. If your **[student/child]** does not qualify as a close contact, you will not hear from us. We want to protect the confidentiality of this person unless there is a reason to inform you of this person’s identity. At this time, it is our role to tell all the families of **[Insert School/Program Name Here]** that we are moving forward under the guidance of the Kent County Health Department and that all measures have been taken to protect the wellbeing of your child(ren). Please monitor for onset of symptoms related to COVID-19, including fever, cough, difficulty breathing, headache, or new fatigue. If you note any change in the health of your child, please call your regular medical provider.”*

Childcare Scenarios with Action Steps

Child/Staff person is confirmed or symptomatic pending results or a close contact.



Scenario 1:	Scenario 2:	Scenario 3:
A child/staff person within the childcare is confirmed to have COVID-19.	A child/staff person within the childcare is symptomatic and pending lab result for COVID-19.	A child/staff person within the childcare is a close contact to a confirmed COVID-19 case.
<p>The child/staff person AND all household members of the child/staff person are immediately excluded from childcare.</p> <p>The confirmed positive child/staff person must isolate at home. The child/staff person must be excluded from childcare until</p> <ul style="list-style-type: none"> • 3 days with no fever (without the use of fever-reducing medication) and • Respiratory symptoms have improved (e.g. cough, shortness of breath) and • 10 days since symptoms first appeared. <p>Household members, classmates, and teachers of the quarantined child/staff person who are close contacts are excluded for 14 days after their last date of close contact.</p>	<p>The child/staff person is excluded from childcare until results of the test are negative.</p> <p>If positive, see scenario 1. If negative, the child/staff person must be symptom free for 24 hours without the use of medications prior to returning to childcare.</p> <p>Household members, classmates, and teachers of the pending case should be monitored for symptoms while waiting for test results. If symptoms develop, they should call their medical provider to be tested for COVID-19.</p>	<p>The child/staff person must quarantine for 14 days since last date of close contact.</p> <p>Household members, classmates, and teachers of the quarantined child/staff person may continue to attend childcare and should monitor for symptoms. If symptoms develop, they should call their medical provider to be tested for COVID-19.</p>

**Close contact with a confirmed COVID-19 case is defined as being within 6 feet of a person who has tested positive for at least 15 minutes with or without a mask.*

Childcare Scenarios with Action Steps

Household member of a child within the childcare facility is confirmed or symptomatic pending results or a close contact.		
Scenario 1:	Scenario 2:	Scenario 3:

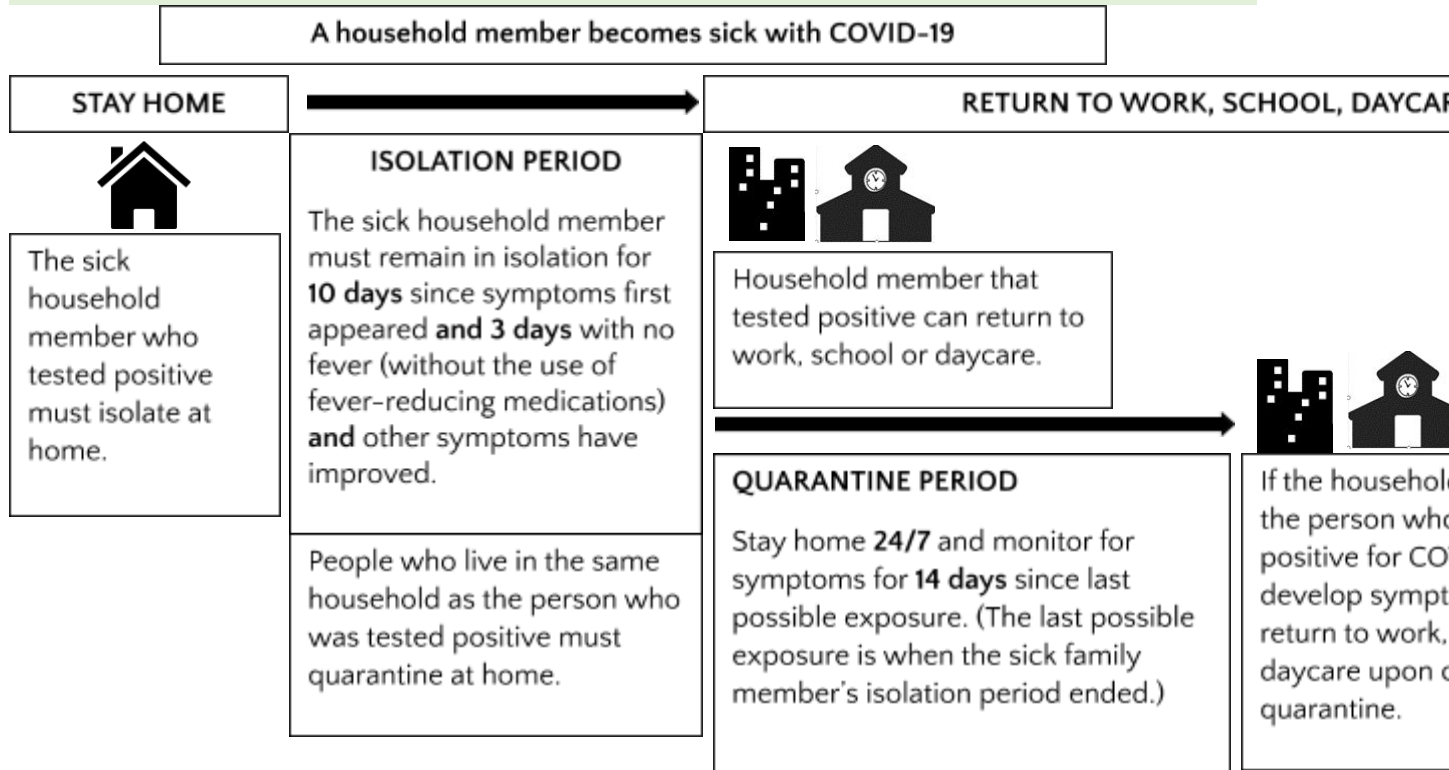


<p>1. Household member of a child within the childcare has been confirmed to have COVID-19.</p>	<p>2. Household member of a child within the childcare is symptomatic, pending results, and has had close contact with a known case.</p>	<p>3. Household member of a child within the childcare has had close contact to a known case of COVID-19.</p>
<p>Children who live in the same house as the COVID-19 positive person are excluded from childcare while the household member is in isolation (10 days). The child must quarantine for 14 days after the last date of close contact.</p>	<p>Children who live in the same household of the family member are excluded from childcare until test results are in.</p> <p>If the household member is positive, see scenario 1. If the household member is negative, child can return to childcare.</p>	<p>Child can remain in childcare but should be monitored.</p> <p>If COVID -19 symptoms develop in the household member, the child should be excluded from childcare, and should be treated as in Scenario 1 pending results.</p>

**Close contact with a confirmed COVID-19 case is defined as being within 6 feet of a person who has tested positive for at least 15 minutes with or without a mask.*



Isolation and Quarantine Timeline



Household members cannot attend work, daycare, or school **during the other household member's isolation** (10 days after the isolation period (quarantine)). If the quarantined household member **DOES** develop symptoms, they must isolate for **10 days** since first symptoms appeared **AND 72 hours** being fever-free **AND** other symptoms have improved. Isolation periods start over any time a new household member become sick with COVID-19.

Everyone should assume exposure to COVID-19 and monitor for symptoms. Check your temperature and watch for symptoms. Call your doctor if you develop symptoms. **QUARANTINE** keeps someone who was in close contact with someone who has COVID-19 away from others in case they become sick. They should stay home and monitor for symptoms. **ISOLATION** keeps someone who is sick or tested positive for COVID-19 from people who are not in their own home. In the home, anyone sick or infected should separate themselves from others by staying in a specific area and using a separate bathroom (if available). For more information on quarantine and isolation, visit <https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/quarantine>

Frequently Asked Questions for Childcare Facilities

1. What is the difference between isolation and quarantine?

Isolation is for people who are COVID positive. It separates people who are infected with the virus from people who are not infected. It usually lasts 10 days.

Quarantine is for people who are well but are exposed to someone who is COVID positive. It keeps someone who might have been infected with the virus away from others. It lasts 14 days since the last possible exposure.

2. How long must a teacher or staff person be out of the childcare facility if they test positive for COVID-19?

A teacher or staff person that tests positive for COVID-19 should isolate at home. The teacher or staff person may return to the childcare facility after 3 days with no fever **and** respiratory symptoms have improved (e.g. cough, shortness of breath) **and** 10 days have passed since symptoms first appeared.

<https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/end-home-isolation.html>

3. How long must a child, teacher or staff person be out of childcare facility if they have a family member in the same house as them that tests positive for COVID-19?

A child, teacher or staff person that lives in the same house as someone who tests positive for COVID-19 must remain out of childcare the entire time the family member is in isolation (typically 10 days) plus 14 additional days of quarantine. The total time out of childcare would be at least 24 days.

<https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/quarantine.html>

4. If a person tests positive but does not have symptoms, can they work from home?

Yes, if the childcare has a system in place for working from home this is encouraged. An employee with mild symptoms should be able to work from home as well.

5. If a teacher or staff member has a household member that tests positive but does not have symptoms, can the teacher or staff member come to work anyway and monitor for symptoms?

No, asymptomatic people who test positive can still spread the virus. A teacher or staff member that has a household member that tests positive and is considered a close contact must quarantine during the household member's isolation period and 14 days after the isolation period ends.

6. Must we close a classroom if a person with COVID-19 attended class in that classroom? If so, for how long?

Yes, the classroom should be closed, cleaned and disinfected. It is recommended to close off the area for at least 24 hours. If that is not feasible, wait as long as possible and then clean and disinfect the classroom following CDC guidance.

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

7. If a teacher or staff person was in a classroom full of children, and that teacher later finds out that they have COVID-19 while they were in the classroom, must all the class be quarantined, or only those children who were within 6 feet of the teacher for 15 minutes or more?

The entire class must be quarantined and monitor for COVID-19-related symptoms.

8. If the teacher was wearing a cloth mask in the classroom, and that teacher later finds out that they have COVID-19 while they were in the classroom, do the children still have to be quarantined?

Yes, the children who were in the classroom are still considered close contacts and must quarantine for 14 days and monitor for symptoms.

9. Does a sibling of a child in quarantine have to be quarantined?

No, if the sibling was not a direct contact of a person who tested positive for COVID-19, then they should monitor for symptoms and can continue attending childcare.

10. If a child has an illness that is not COVID-19, like a cold, does that child still have to be out of childcare until they are 72 hours fever free?

If the child is experiencing any COVID-19-related symptoms, they might have COVID-19 and they should not attend childcare. They should contact their regular medical provider and get tested for COVID-19.

If they test negative for COVID-19, then they can return after 24 hours with no symptoms and without the use of fever-reducing medications.

<https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/steps-when-sick.html>

11. Does the childcare have to inform families when a child is excluded from childcare because of COVID-19, or does the Health Department do that?

The childcare is responsible for communication to families. However, the Health Department can provide guidance as needed.

12. How many children have to be sick with COVID-19 before a childcare facility closes?

The Health Department will work closely with Childcare Administration recognizing there are many factors to be considered when closing a childcare facility.



13. Does a teacher, staff person, or child have to retest for COVID-19 after testing positive before they are allowed back to the childcare facility?

No, the teacher, staff person or child who tested positive can return to childcare after 3 days with no fever **and** respiratory symptoms have improved (e.g. cough, shortness of breath) **and** 10 days have passed since symptoms first appeared.

The health department does not recommend a retest. Sometimes a person will continue to test positive even though they are no longer infectious.

14. How can we know when a person is no longer infectious?

The general timeline is 10 days since symptoms first appeared.

15. If a child changes classes and is with many different children during the day rather than just one classroom of children, and that child tests positive, do *all* those children have to quarantine?

Yes, this is one reason it is wise to keep children in small cohorts.

16. Should all children get tested for COVID-19 prior to starting childcare?

No, the COVID-19 test only indicates the presence of the virus the moment the test is taken.

17. If a child, teacher or staff are told they are a close contact of a positive case and they get a COVID-19 test that is negative are they released from quarantine?

No, a person can become COVID-19 positive any time during quarantine (the 14 days after the exposure).

18. Should children get an anti-body test to prove that they have already had COVID-19 and thus do not need to quarantine if they are exposed again?

No, children who have already tested positive for COVID-19 will need to quarantine again. We are still learning about the virus and there is a possibility of reinfection.

<https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/quarantine.html>

19. If a child or teacher already had a proven case of COVID-19 and then has an exposure in childcare, do they have to quarantine anyway?

Yes, children or teachers with proven cases of COVID-19 will still need to quarantine. We are still learning about the virus and there is a possibility of reinfection.

20. Does the childcare have to tell families which child tested positive for COVID-19? Isn't that a violation of HIPAA?

The identity of the child or teacher should be protected as much as possible. Close contacts will be contacted and only given information related to their exposure. The name of the COVID-19 child or teacher will be shared on a need to know basis only.

21. Will children who are at the highest risk for complications, such as children with severe respiratory problems, be required to stay out of the childcare until this pandemic is over?

The decision to send a child to childcare or not will be made jointly by the parent and childcare facility with guidance from the child's medical provider.

22. What if a staff member/child goes out of state?

There are no current restrictions for staff members or children who travel out of state. However, everyone should assume COVID-19 exposure and monitor for symptoms.