

Outbreak Response Protocols: Child Care

Guidance for COVID-19 outbreak response in child care settings

Version 1.9: June 2, 2021

RHODE ISLAND

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Letter to Child Care Providers

We know reopening in the era of COVID-19 has not been easy and we hope this Child Care COVID-19 Outbreak Response Playbook will help you navigate the new normal when a child or staff member gets sick. While reviewing this Playbook, please keep in mind the following:

- As the COVID-19 pandemic continues, new science will emerge, and guidance may change. The Department of Human Services (DHS) and the
 Rhode Island Department of Health (RIDOH) will convene on an ongoing basis to review the Playbook, its protocols, and the implementation
 challenges and successes. Updates to the Playbook will be communicated by email to all licensed child care providers with clear notation on
 edits/additions/redactions.
- Because each case is unique, once a child or staff member becomes symptomatic or tests positive, reach out to RIDOH for guidance. RIDOH will assess each situation and provide recommendations on a case-by-case basis.
- Recommendations from RIDOH will clearly indicate whether the follow-up is required or recommended. Child care providers are also business owners and can institute more stringent requirements in an effort to prevent COVID-19 transmission, as long as it's reflected in the program's Parent/Family Agreement and adheres with CCAP Rules and Regulations (if serving families in the CCAP.)
- RIDOH and DHS are here to answer questions and provide guidance to help you through this historic pandemic.
 - RIDOH COVID-19 Health Information Line: 401-222-8022
 - DHS: 401-462-3009 (8:30AM-4PM, Monday-Friday) DHS.childCareLicensing@dhs.ri.gov

Purpose of Playbook

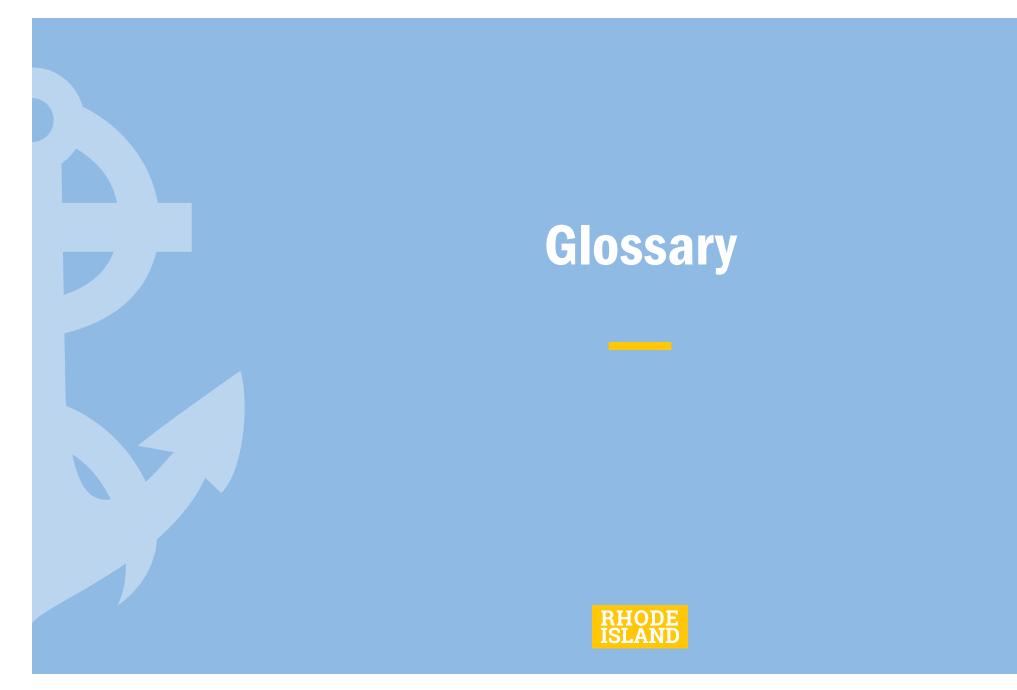
- This Playbook provides guidance on how to respond if a child or staff member is exhibiting symptoms of COVID-19
 or tests positive for COVID-19.
- The goal of this Playbook is to provide visibility into the process child care providers will engage in with RIDOH in different scenarios. The protocols included in this playbook are in line with RIDOH's overarching approach with child care providers to date.
- The Playbook does not replace direct engagement with RIDOH, but rather gives an overview of what will occur throughout that engagement process.
- The information shared in this document assumes that child care providers and parents/guardians are complying
 with current RIDOH guidelines, DHS COVID-19 Child Care Regulations and CDC guidance.

Please note that the material in this document may evolve as new guidance is released.

Use of Playbook

- Please keep this Playbook in an area which is easily accessible for reference.
- This Playbook is intended to share general best practices which can be used by all; it does not address unique, situation-specific questions that you may have.
- This Playbook is a reference guide to complement, but not replace, conversations with RIDOH.
- In the event of an outbreak, in addition to this resource, RIDOH and DHS Child
 Care Licensing Unit will support you throughout the process.

Please note that the material in this document may evolve as new guidance is released.



Glossary

Term	Definition
Asymptomatic	Refers to a person who does not have any symptoms
Close contact	Refers to a person who has been within six feet of an infected person (with or without a face mask) for a cumulative 15 minutes over a 24-hour period OR has had unprotected direct contact with secretions or excretions of a person with confirmed COVID-19 during the infectious period
Community transmission	Occurs when individuals acquire COVID-19 through contact with someone in their local community, rather than through travel to an affected location
Confirmed case	A person who has tested positive for SARS-CoV-2 infection (the virus that causes COVID-19)
Consistent/stable group	Each staff/child will be placed into "consistent/stable groups" of no more than 26 people and each group must physically distance themselves from other consistent groups. Child care centers may have multiple consistent/stable groups, while family child care homes only have one consistent/stable group
Contact tracing	Process of identifying individuals who may have had close contact (see definition above) with someone who tested positive for COVID-19
COVID-19	Abbreviation for the disease caused by the novel coronavirus SARS CoV-2

Glossary

Term	Definition
Incubation Period	The time between exposure to an infection and the appearance of first symptoms. The virus that causes COVID-19 has an incubation period of 2-14 days
Isolation	Process of separating individuals who are infected with COVID-19 from others
Probable case	Individual who has at least two of the following symptoms: fever, chills, rigors, myalgia, headache, sore throat, OR at least one of the following symptoms: cough, shortness of breath, new olfactory and taste disorder(s) or difficulty breathing
Quarantine	Process of separating and restricting the movement of individuals who were in close contact with someone who tested positive or had symptoms of COVID-19
RIDOH	Rhode Island Department of Health
Screening	Checking individuals for symptoms of COVID-19 verbally and by using temperature checks
Symptomatic individual	Individual who is showing the symptoms or signs of COVID-19 according to CDC guidelines

Symptoms of COVID-19 and Probable Case Definition



Symptoms of COVID-19

- Fever or chills
- Cough
- Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches
- Headache
- Sore throat
- New loss of taste or smell
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea



Probable Case of COVID-19

CDC defines a probable case as an individual who meets the following criteria:

or

One of the following symptoms:

Cough
Shortness of breath
Difficulty breathing
New loss of taste
New loss of smell

Two of the following symptoms:

Fever
Chills (rigors)
Muscle aches (myalgias)
Headache
Sore throat
Nausea or vomiting
Diarrhea
Fatigue
Congestion or runny nose

Probable Case FAQs

When do close contacts of a probable case need to quarantine?

- When a person has symptoms <u>and</u> meets the probable case criteria, the person's <u>household members</u> should quarantine while the person gets tested and is waiting for the test results.
- Child care contacts and other contacts of a probable case are not required to stay
 home while test results are pending. In certain situations, RIDOH may advise
 quarantine for child care contacts while test results are pending.

Mask Wearing in Child Care Settings

Updated June 2, 2021



New: Outdoor Mask Update (Updated June 2, 2021)

On June 1, Governor McKee and RIDOH announced updated guidance for mask wearing in Rhode Island.

- From June 2, <u>vaccinated and unvaccinated</u> individuals will not be required to wear masks outdoors in Rhode Island.
- Unvaccinated individuals are strongly encouraged to wear masks in crowded outdoor settings and during activities with sustained close contact with others that are not fully vaccinated, as well in locations of "substantial" or "high" transmission.
- This is applicable to all ages and settings, including child care and summer camps.

New: Indoor Mask Wearing in Child Care FAQ (Updated June 2, 2021)

Can individuals who are fully vaccinated take their mask off indoors?

- At this time, there are no changes to indoor masking guidance. Fully vaccinated individuals should continue to wear masks indoors when providing care to children.
- Fully vaccinated staff may take their masks off indoors in areas where it is permitted, including staff breakrooms, personal offices, designated "mask break" areas for staff, and etc.

Can I (the provider) choose to still enforce outdoor masking of staff and children?

 Yes, according to the <u>Executive Order</u>, you may choose to enforce mask wearing outdoors at your own discretion. <u>Note</u>: It is your facility's decision, and not the state's decision, to enforce mask wearing outdoors at your center.

COVID-19 Vaccination

Updated March 24, 2021



COVID-19 Vaccine Quick Tips

- The COVID-19 vaccine is safe, highly effective against serious illness, and may prevent you
 from being infected with COVID-19.
- A person cannot get COVID-19 from COVID-19 vaccines.
- Because there still may be a small chance you can become infected and spread the virus to others, please continue to practice good hygiene, follow CDC guidance, and get tested if you develop symptoms.
- Please visit the Rhode Island Department of Health website for other Frequently Asked Questions about the Vaccine COVID-19 Vaccine FAQs | RI COVID-19 Information Portal.

COVID-19 Vaccine and Immunity

When does a person have immunity after vaccination?

• It takes 14 days after the final recommended COVID-19 vaccination dose to have immunity from the virus.

How long does immunity last after COVID-19 vaccination?

- We won't know how long immunity lasts after vaccination until we have more data on how well COVID-19 vaccines work in real-world conditions. A growing number of national and international studies from real-world settings show them to be more than 90% effective in preventing mild and severe disease, hospitalization, and death.
- The protection someone gains from having an infection (called "natural immunity") varies depending on the disease, and it varies from person to person. If you got COVID-19 four or five months ago, you may not be immune to the variants of the virus that are circulating in Rhode Island now. You may be just as vulnerable as someone who never tested positive.

Quarantine Exemption for Fully Vaccinated Persons

Vaccinated persons with an exposure to someone with COVID-19 or who have recently traveled are <u>not</u> required to quarantine if they meet <u>all of the following</u> criteria:

- 1. Are <u>fully vaccinated</u>: it's been more than 14 days since getting the last recommended COVID-19 vaccination shot.
- 2. Have remained asymptomatic since the most recent exposure to COVID-19.

Note: On March 19, 2021, a <u>Rhode Island Executive Order</u> was released removing the 90-day limit on exemption for quarantine after vaccination.

Quarantine Exemption After Vaccination for COVID-19

After a person has completed vaccination for COVID-19, they are exempt from quarantine, if they		
 Have received all recommended doses of a COVID-19 vaccine; and 		
 Are >14 days after receiving the last recommended dose of COVID-19 vaccine. 		
Quarantine for close	Exempt, quarantine is not required if asymptomatic.	
contacts	Testing five to 10 days after exposure is highly encouraged; and	
	Always monitor for symptoms for 14 days after exposure.	
Quarantine for	Exempt, quarantine is not required if asymptomatic.	
domestic	Testing five to 10 days after return from travel is highly encouraged; and	
or international travel	Always monitor for symptoms for 14 days after exposure.	
Asymptomatic testing	Asymptomatic testing is encouraged.	
	The vaccine does not affect test results.	
Eligible populations	Exemption applies to all individuals <u>except</u> vaccinated hospitalized patients and vaccinated residents in long-term care settings like nursing homes and assisted living facilities. Vaccinated hospitalized patients and long-term care facility residents must still quarantine for 14 days after close contact.	

FAQ: Symptoms Immediately After COVID-19 Vaccination. What Do I Do?

- People are likely to experience symptoms after receiving a COVID-19 vaccine. This means the immune system is working. This is healthy, normal, and expected.
- You may experience a sore arm, headache, fever, or body aches, but they should go away in a few days.
- If you have any symptoms of COVID-19 following vaccination, isolate at home, call a health care provider, and get tested. Inform your healthcare provider of your vaccination status.

FAQ: A family has provided documented proof they are fully vaccinated and would like to escort their child into the classroom. Can I (the provider) allow the parent/guardian to enter the building?

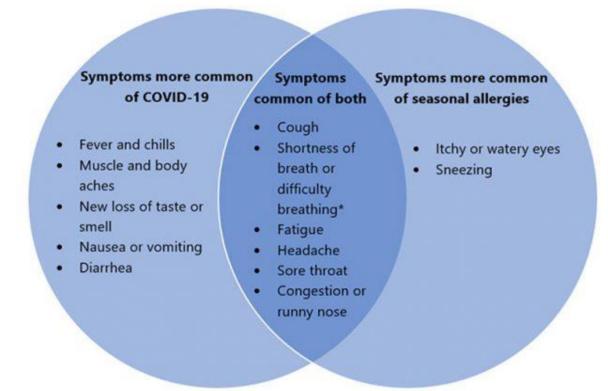
- Yes. RIDOH highly encourages providers to follow safe practices for escorting children to/from the classroom.
- It would be safe for a parent/guardian to escort a child to/from class, if the person
 - Is fully vaccinated;
 - Limits pick-up/drop-off to less than 15 minutes cumulative; and
 - Is masked.

COVID-19 and Allergies



New: COVID and Allergies

- COVID-19 and allergies share many of the same symptoms. It is difficult to know whether those symptoms are caused by COVID-19 or allergies without a COVID-19 test.
- When you have a <u>new onset</u> of ANY symptom, assume it's COVID-19, not allergies and
 - Stay home;
 - Get a tested for COVID-19; and
 - Get medical advice about your symptoms.



New: COVID and Seasonal Allergies

If you have new onset of ANY COVID-19 symptom, stay home and get a COVID-19 test:

- If the test result is negative, may return to child care after being fever-free for 24 hours and symptoms have improved.
 - If symptoms are a result of seasonal allergies, they may last for weeks or longer.
 - This child may attend child care as long as there is no fever, no <u>new</u> symptoms of COVID-19, and no sudden change or worsening of symptoms.

- If there is any new additional COVID-19
 symptom or sudden change or
 worsening of the same symptoms, then
 - Dismiss home;
 - Seek medical advice; and
 - Get tested for COVID-19, as required to return to child care.

Testing for COVID-19



K-12 & Child Care Test Scheduling Service

New: Anyone tested at a K12 site will get a PCR test only

Who can schedule a test for this service?

- Anyone associated with K-12 and/or child care (staff, student, van driver, coach, etc.)
- Students or staff members who have COVID-19 symptoms should get tested.
- Students or staff members who are told they were a close contact of someone else who tested positive for COVID-19 should get tested, even if they do not have <u>symptoms</u>. A close contact is someone who was closer than six feet for more than 15 minutes.

Note: You do not need to pay for this service, even if you don't have insurance.

How to schedule a test

- 1. Call **844-857-1814** on weekdays from 7:30 a.m. to 7 p.m. and weekends from 8:30 a.m. to 4:30 p.m.; or
- 2. Schedule through **portal.ri.gov** (children under 16 should be scheduled under their parent/guardian's account).

How Can I Access Test Results?

- If you were recently tested for COVID-19 in the state of Rhode Island, you can access a record of your test result at portal.ri.gov/results.
- What you need to access your test results:
 - Name;
 - Date of Birth; and
 - Date of Testing Appointment.
- COVID-19 Test Result Portal User Guide is available if you need assistance.

Other Testing Questions

If a <u>symptomatic</u> person gets tested for COVID-19, can the person return to child care while the test result is still pending?

No, a <u>symptomatic</u> person should <u>not</u> return until they receive the test results.

If I am in quarantine and I get tested, do I need to remain in quarantine while I wait for results?

• Yes. If you have been a close contact of someone with COVID-19 and you get tested, you should remain in quarantine while awaiting test results. If negative, you will still need to complete a seven-day minimum quarantine.

If I am <u>not</u> in quarantine and to go for asymptomatic testing, do I need to quarantine while I wait for results?

 No. If you are asymptomatic, not a close contact, and get tested, you do not need to quarantine while results are pending.

Does a Person Who Tested Positive Need a Negative Test to Return to Child Care?

No. A person with symptoms who tested positive for COVID-19 should follow the symptom-based strategy for ending isolation:

- 1. Must be fever-free for 24 hours without the use of fever-reducing medication; and
- 2. Symptoms have improved; and
- 3. It has been at least 10 days since symptoms first appeared (20 days if immunocompromised).
- A person without symptoms must remain in isolation for 10 days from the test date (20 days if immunocompromised).
- After completing isolation, a person is no longer considered contagious with the virus.
- It is neither required nor recommended for a person to provide proof of a negative test after meeting the criteria for ending isolation.

Testing of Close Contacts

Is testing on Day 5 or later of quarantine required?

• If you choose to follow a 7-day quarantine, then testing on Day 5 or later is required. It is recommended but not required with a 10-day or 14-day quarantine; however, in some situations testing may be strongly recommended before coming back to child care.

What are situations where testing may be strongly recommended by RIDOH?

- RIDOH has evidence of transmission within a stable group (2+ positive cases detected in 14 days).
- RIDOH may recommend testing in other situations, on a case-by-case basis.

Is there an alternative to end-of-quarantine testing if it is strongly recommended?

• The alternative to end-of-quarantine testing is to remain in quarantine for an additional 10 days.

This is to ensure that someone who has been infected with the virus is not still contagious to others when they are released from quarantine.

Confirming a Positive Asymptomatic Antigen Test



New Testing Protocol: Updated May 17, 2021

- In line with CDC guidance, Rhode Island adopted the confirmatory PCR protocol as community spread has lessened. With decreased prevalence of COVID-19, the antigen tests become less reliable.
 - For example, there is greater chance that the positive antigen test could be a "false positive".
- You can find the CDC's protocol on Slide 36 and on-line (scroll mid-way down the page): cdc.gov/coronavirus/2019-ncov/lab/resources/antigen-tests-guidelines.html
- The updated protocol supports Rhode Island's effective clinical use of rapid tests in different testing situations. A follow-up PCR test also confirms whether you and your close contacts need to isolate or quarantine.

New Testing Protocol: Updated May 17, 2021

- If a child with <u>no symptoms and no known exposure</u> tests positive on an antigen test, such as BinaxNOW, a confirmatory PCR is recommended.
- Child Care should:
 - Inform the child's parent/guardian of the positive BinaxNOW result.
 - Recommend that the child obtain a PCR test on the same day.
 - Instruct the child to isolate at home until they receive a PCR test result.
 - NOT start contact tracing at this point as this is not a highly probable case:
 - PCR results will be back within 24 hours; and
 - Do not recommend over-quarantine because it's better for kids to be in child care.

Results of the PCR Test

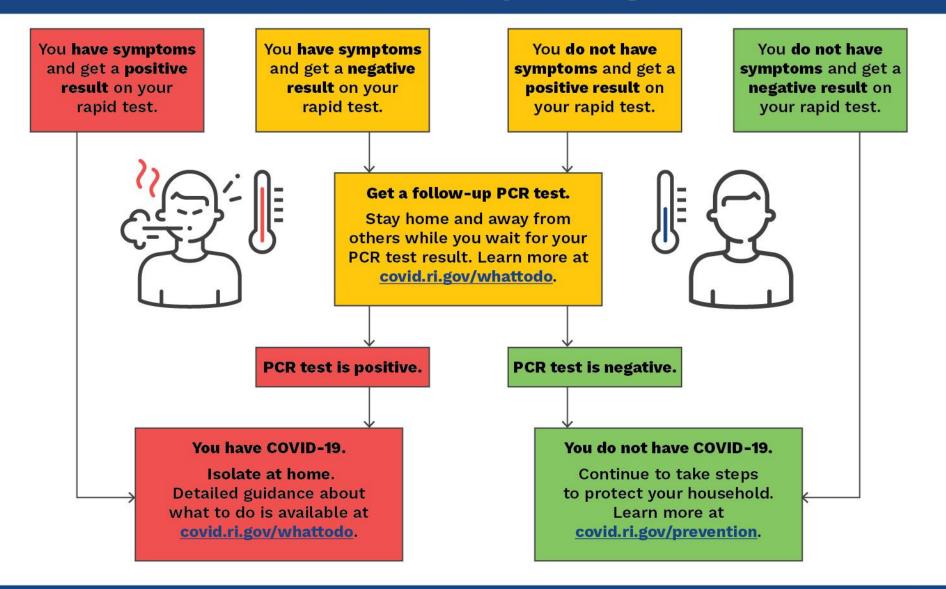
If the PCR result is negative:

- The asymptomatic person is <u>not</u> considered to be infected with COVID-19;
 - The individual will not be considered to have 90 days of immunity to COVID-19.
- Individual may return to school and all other activities; and
- Contact tracing and quarantining close contacts are not necessary.

If the **PCR** test is **positive** OR if no PCR results are received by RIDOH within 72 hours of the antigen test, then:

- The individual has COVID-19 and should isolate at home per RIDOH instructions; and
- Contact tracing is necessary and close contacts need to quarantine.

COVID-19 Confirmatory Testing Protocol









What Is the Infectious Period for COVID-19?

Symptomatic Cases are infectious:

Two (2) days prior to symptom onset until 10 days after symptom onset.

Asymptomatic Cases are infectious:

- Two (2) days prior to testing (the date the swabbing was conducted) until 10 days after the date of testing.
- In some cases where the case's exposure to COVID-19 is known, RIDOH may consider the infectious period to be more than two days prior to the test date.





Isolation

- Isolation is for the ill or infected:
 - Separate individuals who are infected with COVID-19 from others.
 - Stay home and isolate from household members as much as possible.

- The duration of isolation depends on whether the individual is
 - Symptomatic or asymptomatic; and
 - Immunocompromised.

Isolation for Symptomatic Individuals

Symptomatic

- At least 10 days since symptoms first appeared (20 days if severely immunocompromised); and
- At least 24 hours with no fever without fever-reducing medication; and
- Other symptoms of COVID-19 are improving.
 - Loss of taste and smell may persist for weeks or months after recovery and need not delay the end of isolation.

Isolation for Asymptomatic Individuals

Asymptomatic

- 10 days from the date of individual was tested (20 days if severely immunocompromised).
- If symptoms develop during isolation, follow guidance for isolation for symptomatic individuals on Page 41.

Quarantine



How Is a Close Contact Defined?

Close Contact

- Individual who has been within six feet of a person with COVID-19 (with or without a face covering) for 15 minutes over a 24-hour period during the infectious period,
 - i.e., Three, five-minute interactions during the day.
- Individual who has had unprotected direct contact with secretions or excretions of a person with confirmed COVID-19 during the infectious period,
 - i.e., Infected person coughed directly into someone's face.

RIDOH Quarantine Guidance for Close Contacts

On December 2, the CDC released updated quarantine guidance for close contacts.

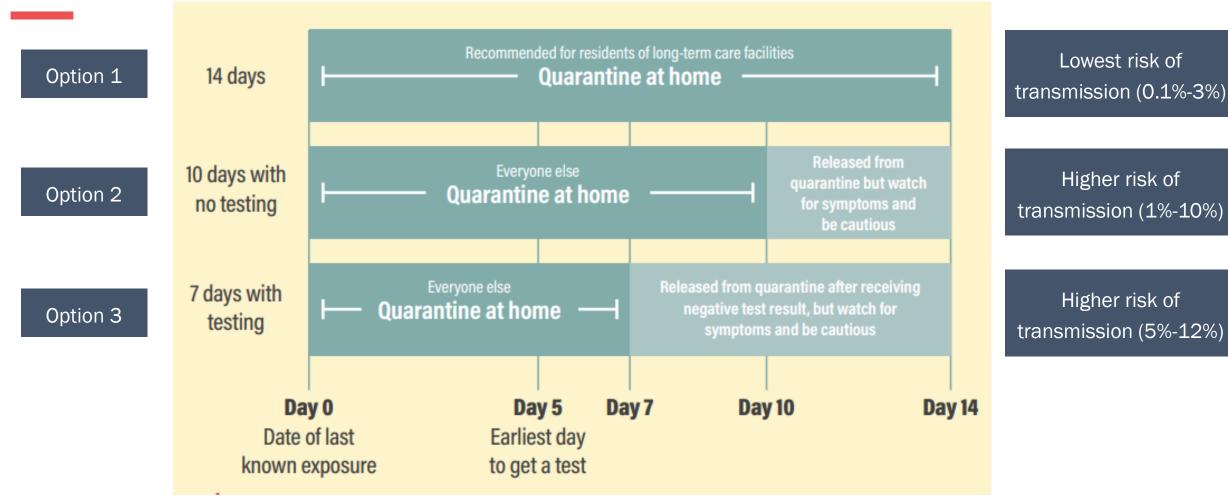
As of December 10, there are now three quarantine options for close contacts in Rhode Island:

- 1. Quarantine for 14 days since the last date of exposure (0.1%-3% risk of spreading the virus to others).
- 2. Quarantine for 10 days since the last date of exposure and if no symptoms have developed. May return to child care on day 11 after exposure (1%-10% risk of spreading the virus to others).
- 3. Quarantine for seven days since the last date of exposure, have a negative test result from a test (rapid or PCR) taken at least five days after the exposure, and if no symptoms have developed. May return to child care on day 8 after exposure (5%-12% risk of spreading the virus to others).

If you have been directed to quarantine, <u>watch for symptoms for the full 14 days</u>. If you develop symptoms of COVID-19, isolate at home, call your healthcare provider, and get a COVID-19 test.

Please see Page 47 for guidance on how child care providers should operationalize the new guidance

Illustration of Quarantine Guidance



Please note that residents of long-term care facilities who have been in close contact with a positive case must quarantine for 14 days. Child care is not considered a long-term care facility.

Child Care Implementation and Guidance

- Prior to December 10, the CDC and RIDOH only offered one quarantine option for close contacts: a 14-day quarantine. This 14-day quarantine is still the gold standard for ensuring effective control of COVID-19 spread.
- Recognizing local circumstances and resources where a full 14-day quarantine may be challenging, the CDC provided options for quarantine based on the current data.
- RIDOH and DHS recognize the importance of developing consistent guidance and support to child care
 providers during this pandemic. Consistency across settings is critical to ensuring RI families understand and
 appropriately implement quarantine guidelines to prevent the spread of COVID-19.
- Recommendation One (for children): RIDOH and DHS recommend child care providers adopt Option Two, a 10-day quarantine for close contacts for all families in their care. Testing is encouraged for all close contacts on or after day 5 of quarantine.
- **Recommendation Two (for staff):** Programs that have struggled with staffing may elect to accept a seven-day quarantine from teachers who can provide a negative test on day 5 or later.

Calculating Options for End of Quarantine

- Need help determining quarantine dates for the three different options?
- RIDOH has created a <u>COVID-19 Close Contact Quarantine Calculator</u>:
 - Click link above, and scroll down to the middle of the page to download the calculator

What to do if you or a close contact has COVID-19

- Learn about Rhode Island's close contact quarantine requirements.
 Requirements FAQ
- To calculate the length of quarantine for close contacts, use this <u>COVID-19 Close</u>
 Contact Quarantine Calculator.

Testing of ALL Close Contacts

RIDOH recommends <u>ALL</u> close contacts of people with COVID-19 get tested (with an antigen or PCR test) on day 5 of quarantine or later.

- The purpose of testing close contacts is to identify those who are infected and asymptomatic.
- If opting for the seven-day quarantine option, a test on day 5 of quarantine or later is <u>required</u>.
- If opting for the 14-day or 10-day quarantine option, a test on day 5 of quarantine or later is not required but <u>recommended</u>.

Quarantine Questions

If I get tested during quarantine and I'm negative, does my quarantine end?

• Yes. If you get tested on day 5 or later* (with a rapid test or a PCR test), you can end quarantine after day 7 (release on day 8) and continue to monitor for symptoms through day 14.

*If you get tested earlier than day 5 you cannot end quarantine on day 7.

If I get tested during quarantine and I test <u>positive</u> for COVID-19, how long do I need to stay home?

• If an individual on quarantine tests positive for COVID-19, they must isolate for 10 days from symptom onset or 10 days from the date of the specimen collection if the person is asymptomatic.

FAQs: Classmates of Children and Staff on Quarantine

An unvaccinated child/staff member was exposed to a person with COVID-19. They are now on quarantine. Do the classmates/students of the child/staff member need to quarantine as well?

- Only unvaccinated **close contacts** (within six feet for at least 15 minutes cumulative within 24 hours) of a person with COVID-19 need to quarantine. If the child/staff member was in close contact with a person with COVID-19, then the child/staff member needs to quarantine.
- Anyone who was in contact with the exposed child/staff member, but not with the actual person with COVID-19, does <u>not</u> need to quarantine.
- The exception would be if a child or staff member in quarantine develops symptoms or tests positive <u>and</u> was infectious on the days they attended the program. RIDOH will work with you to determine that person's infectious period and whether anyone else from the program needs to quarantine.

FAQs: Siblings of Children on Quarantine

- If a child was exposed to a person with COVID-19 in their classroom and the exposed child has a sibling in another classroom, does the sibling have to quarantine as well?
 - No. Only the child who as in **close contact** (within six feet, at least 15 minutes cumulative, across 24 hours) with a COVID-19 case needs to quarantine if unvaccinated.
 - If the sibling was in a separate classroom and did not have close contact with the COVID-19 case, then the sibling does not need to quarantine.
 - The exception would be if the child on quarantine tests positive or develops symptoms, in which case the sibling must stay quarantine.

FAQs: Close Contacts in Child Care

If we are notified of a positive case during the school day, do we need to send the unvaccinated close contacts home immediately?

• It is always preferable to send close contacts home as soon as possible. However, if it is not feasible to send someone home immediately, a close contact can remain in child care, follow the normal dismissal process, and begin their quarantine when they get home.

Can Child Care Programs Direct People to Quarantine?

- No. Only RIDOH has the authority to officially quarantine and release people from quarantine. Please contact RIDOH with any questions regarding an individual's quarantine period.
- While RIDOH completes the investigation, child care providers have the authority to close potentially impacted classroom(s) while awaiting RIDOH guidance.

* Note: Although fully vaccinated individuals do not need to quarantine, they do need to be included on direct contact lists if exposed so the RIDOH Contact Tracing Team can provide guidance specific to vaccinated individuals.

Travel and Quarantine



Quarantine After Domestic Travel

Domestic travel from an area of high community spread (a.k.a. "hot spot"):

- Those who arrive in Rhode Island from a state where more than 5% of COVID-19 tests are positive should quarantine.
- Those who have tested positive for COVID-19 in the last 90 days or are exempt from quarantine.
- New: Those who have received all doses of the COVID-19 vaccine, are 14 days after the final vaccine dose, and have no symptoms are exempt from quarantine after travel to hot spot states.

Those who are also exempt from quarantine include

- Public health, public safety, or healthcare workers; and
- Those traveling for medical treatment; to attend a court hearing; to attend funeral or memorial services; to
 obtain necessities such as groceries, gas, or medication; to drop off or pick up children from day care; or for
 anyone who must work on their boats.

Quarantine - Domestic Travel

What are the quarantine options for an unvaccinated person returning to Rhode Island after traveling to a US state where > 5% of COVID tests are positive? (click here for list of states)

- Option 1: Obtain a negative result for a COVID-19 test (rapid antigen or PCR) taken within 72 hours prior to arrival in Rhode Island;
- Option 2: Quarantine for 10 days once arriving in Rhode Island, until obtaining a negative result for a COVID-19 test (rapid antigen or PCR); or
- Option 3: Quarantine for 10 days once arriving in Rhode Island.
- Whichever option is chosen, travelers should self-monitor for symptoms for 14 days after arrival in Rhode Island.
- The CDC continues to endorse 14-day quarantine as the safest protocol but has released data to allow local public health officials to modify policies based on local conditions and needs.
- A child care program may decide which of the domestic travel quarantine options they will accept for children and staff after domestic travel.

Quarantine After International Travel

International travel

- Those who come to Rhode Island from a location outside the 50 states or US territories (for example, Puerto Rico) should quarantine.
- Those who have tested positive for COVID-19 in the last 90 days are exempt from quarantine.
- New: Those who have received all doses of the COVID-19 vaccine, are at least 14 days after the final vaccine dose, and have no symptoms, are exempt from quarantine after international travel.
- No other exemptions from quarantine apply after international travel, including based on profession or reason for travel.

Quarantine - International Travel

What are the quarantine options for an unvaccinated person returning to Rhode Island after traveling outside the 50 states or US territories?

- Option 1: Quarantine for 14 days after arrival in the US;
- Option 2: Quarantine for 10 days after arrival in the US; or
- Option 3: Quarantine for seven days, if a traveler obtains a negative result for a COVID-19 test (rapid antigen or PCR) taken at least 5 days after arrival in the US.
- Whichever option is chosen, travelers must monitor for symptoms for 14 days after arrival in the US.
- The CDC continues to endorse a 14-day quarantine as the safest protocol but has released new data to allow local public health officials to modify policies based on local conditions and needs.
- As a business, the child care program may decide which of the travel quarantine options they will accept from children or staff after international travel.

Quarantine Options for International Travel

- "Day 0" = day of arrival in the United States.
- The quarantine period may start in another state where the flight lands.

Example scenario - A person flies from Costa Rica, to Houston, to Providence:

- Arrives in Houston on 2/1/21 (Day 0 of quarantine);
- Arrives in Providence on 2/3/21 (Day 2 of quarantine);
- Using a calendar, mark 2/1/21 as 'Day 0"; or
- Using the Quarantine Calculator, enter date of arrival in US 2/1/21.
 - Fully vaccinated travelers are still encouraged to test five to 10 days after arrival but do not quarantine.
 - Covid.ri.gov/covid-19-prevention/travel-tofrom-ri

Quarantine and Isolation Within the Household



Isolation Within the Household

A person in isolation is considered separated from others while in isolation within the household if

- The isolated person remains in the household but stays in their own bedroom at all times and uses their own bathroom without sharing any common areas with others in the household;
- The isolated person remains in the household but on a completely separate floor or living area at all times; or
- Either the isolated person or the other household members temporarily move out of the household while the case is in isolation.

Quarantine for Household Members Who <u>Cannot</u> Separate from a Person in Isolation Within the Household

Unvaccinated household contacts need to quarantine while the individual with COVID-19 (infected person) is infectious (at least 10 days after symptom onset) and <u>then</u> start their quarantine.

The last day of isolation for the person with COVID-19 is Day 0 for household members.

Household members have three options for quarantine starting on Day 0:

- Option 1: 14 days (total of 24 days in quarantine-released on day 25);
- Option 2: 10 days (total of 20 days in quarantine-released on day 21); or
- Option 3: Seven days with a negative test result on day 5 or later (total of 17 days in quarantine released on day 18).

Quarantine for Household Members Who <u>Can</u> Separate from a Person in Isolation Within the Household

- If the individual with COVID-19 can avoid close contact with household members and keep a physical distance of six feet all the time, household members would only need to quarantine from the date of last exposure to the infected household member (Day 0).
- Day 0 is the last day that household members and the infected household member shared a living space, spent time in the same rooms, or were in close contact (within six feet for at least 15 minutes during 24 hours).
- Household members have three options for quarantine starting on Day 0:
 - Option 1: 14 days (released on day 15);
 - Option 2: 10 days (released on day 11);
 - Option 3: seven days with a negative test result on day 5 or later (released on day 8).

Guidance for Individuals Positive for COVID-19 in the Last 90 Days



If a Person Had COVID-19 Infection in the Last 90 Days

- A person with a COVID-19 infection is thought to have a 90-day immunity to the virus.
- 90-day calculation
 - If **symptomatic** (had COVID-19 <u>with</u> symptoms), then start the 90-day count from the date of symptom onset (Day 0); or
 - If **asymptomatic** (had COVID-19 <u>without</u> symptoms), then start the 90-day count from the date of specimen collection (Day 0).
- A person with a positive COVID-19 test result in the last 90 days does not need to
 - Quarantine if identified as a close contact (even if the close contact is a household member of the infected individual); or
 - Quarantine after domestic or international travel.

Quarantine Exemption After Infection with COVID-19

After a COVID-19 infection, a person has presumed immunity if a new exposure is

- Within 90 days of date of symptom onset; or
- Within 90 days of date of positive test if asymptomatic.

Quarantine for close	Exempt. Not required if close contact is asymptomatic; and		
contacts	Always monitor for symptoms for 14 days after exposure.		
Quarantine for	Exempt/Not required if close contact is asymptomatic; and		
domestic or	Always monitor for symptoms for 14 days after exposure.		
international travel			
Asymptomatic testing	ng Not recommended within 90 days of infection.		
	Exempt from work, school, or other asymptomatic surveillance testing.		
Eligible populations	Applies to all people, including those whose		
	Past infection was symptomatic or asymptomatic; and		
	Past infection diagnosed by either rapid test or PCR.		

Summary of Exemptions from Quarantine



Quarantine Exemption Summary

	After COVID-19 infection:	After COVID-19 vaccination:	
	Presumed immunity for 90 days	Presumed immunity >14 days	
	after infection	after last vaccine dose	
Quarantine for	Exempt, not required if asymptomatic.	Exempt, not required if asymptomatic.	
close contacts	Monitor for symptoms for 14 days after	Testing on Day 5-10 after exposure is encouraged.	
	exposure.	Always monitor for symptoms for 14 days after	
		exposure.	
Quarantine for	Exempt. Not required if asymptomatic.	Exempt. Not required if asymptomatic.	
travel domestic	Monitor for symptoms for 14 days after	Testing on Day 5-10 after exposure is encouraged.	
or international	last exposure.	Always monitor for symptoms for 14 days after	
		exposure.	
Asymptomatic	Not recommended within 90 days of	Allowed and encouraged.	
Testing	infection.		

Child Care Response Protocols

Return to Child Care



Clearance Protocols for Children & Staff Members to Return to Child Care

Symptom	Is a Test Required to Return?		
Cough (new)	Yes		
Shortness of breath or difficulty breathing	Yes		
New loss of taste or smell	Yes		
Fever (temperature higher than 100.4° or feels feverish to the touch)			
Chills			
Muscle or body aches	Yes, if two or more of these symptoms. No, if only one of these symptoms.		
Headache			
Sore throat			
Fatigue			
Congestion or runny nose (new)			
Nausea or vomiting			
Diarrhea			

If the PCR test is <u>negative</u>, a person can return when fever-free for 24 hours and symptoms improved (back to usual health). If the rapid or PCR test is positive, a person must isolate and can return when CDC guidance for release from isolation is met.

Protocol - Symptomatic Individual, Not a Probable Case

Situation	Isolation and quarantine protocol	Recommended testing protocol	Return to child care criteria
Staff or child has symptom(s) of COVID-19 but does not meet the CDC definition of a probable case	Symptomatic individual is isolated and sent home. No closure recommended for exposed classroom(s). No quarantine recommended for close contacts.	Advise symptomatic individual to seek medical advice and test if recommended by healthcare provider.* Some patients with COVID-19 have presented with only one mild symptom or atypical symptoms and patients or providers may prefer to test even when probable case definition is not met. *RIDOH may recommend testing for others in certain situations.	 Attestation that documents one of the following (parent/guardian attests for a minor): Not tested, has been fever free for 24 hours and symptoms improved (back to usual health); Tested negative for COVID-19, has been fever free for 24 hours and symptoms improved (back to usual health); Tested positive for COVID-19 and has since met RIDOH guidelines for ending isolation.

Protocol - Probable Case

Situation	Isolation and quarantine protocol	Recommended testing protocol	Return to child care criteria
Staff or child is a probable case (See Page 9)	Symptomatic individual is isolated and sent home. Household contacts and roommates must quarantine pending the probable case COVID-19 test result. Quarantine of additional close contacts pending probable case test results may be advised by RIDOH when: • One or more confirmed cases have occurred in the same stable group in the last 14 days; or • The probable case reports loss of taste or smell; or • The probable case had a known exposure to a positive case in the last 14 days.	Advise symptomatic individual to seek medical advice and obtain a COVID test. RIDOH may recommend testing for others in certain situations.	 Attestation from a parent or guardian that documents one of the following: Tested negative for COVID-19 (with a PCR test), has been fever free for 24 hours hours without use of fever-reducing medications, and symptoms improved (back to usual health); or Tested positive for COVID-19 (with a rapid test or PCR test) and has since met CDC/RIDOH guidelines for ending isolation.

Reporting Probable Cases

Probable cases are individuals who meet the symptom criteria on Page 10.

- If a child or staff member in your program is a probable case, please follow the **probable case protocol**:
 - The person should be tested and isolate at home until COVID-19 test results have been received. Household members must quarantine pending test results.
- Effective November 19, 2020, child care providers <u>no longer</u> need to report <u>all</u> probable cases to RIDOH. Instead, you should report a **probable case** (a person who meets the symptom criteria on Page 11) <u>who also meets</u> one or more of the following criteria:
 - The probable case has <u>loss of taste or smell.</u>
 - The probable case <u>has had contact with a person who tested positive for COVID-19</u> in the last 14 days.*
 - The probable case is in the <u>same stable group as a person who tested positive.</u>*
- RIDOH may advise quarantine for child care contacts for these special probable cases while awaiting
 test results. Close contacts who have <u>no</u> symptoms are <u>not</u> probable cases. These do not need to be
 reported.
- To report a probable case, you can send a secure message to RIDOH.COVIDChildCare@health.ri.gov.

Protocol – Positive Case

Situation	Isolation and quarantine protocol	Recommended testing protocol	Return to child care criteria
Staff or student tests positive.	Person testing positive is isolated per CDC/RIDOH guidelines. Close contacts are quarantined per CDC/RIDOH guidelines.	Close contacts in quarantine should self-monitor for symptoms for 14 days and seek medical advice as needed. RIDOH recommends all close contacts get tested on day 5 of quarantine or later. Close contacts who have tested positive in the past 90 days are not required to quarantine.	 Individuals who test positive must meet the CDC/RIDOH guidelines for ending isolation: RIDOH recommends the symptom-based strategy for ending isolation. Isolate until Fever free for 24 hours without use of fever-reducing medications; and Symptoms have improved; and 10 days since symptoms first appeared (20 days if severely immunocompromised). OR Time-based approach if asymptomatic when tested positive. Isolate until 10 days since date of specimen collection (20 days if severely immunocompromised). A negative test is not required to return; use the symptom-based strategy above.

Protocol - Close Contact of a Case

Situation	Isolation and quarantine protocol	Recommended testing protocol	Requirement to return
Staff or student is a close contact of a confirmed case. Close contacts who have tested positive in the past 90 days do not have to quarantine. Close contacts who are fully vaccinated do not have to quarantine.	A close contact is quarantined per the CDC/RIDOH guidelines (See Page 45). See Page 68 for guidance on when a close contact may be exempt from quarantine.	Close contacts in quarantine should selfmonitor for symptoms for 14 days and seek medical advice as needed. RIDOH recommends all close contacts get tested on day 5 of quarantine or later.	 Child or staff member must meet the CDC/RIDOH guidelines for ending quarantine before returning to child care: Remain asymptomatic; Complete one of the quarantine options 14 days; 10 days; Seven days with a negative test (antigen or PCR) on day 5 or later. If choosing a 10-day or 7-day quarantine, continue to monitor for symptoms for 14 days from last exposure.

Child Care Protocol Summary

	Any symptom (not probable case)	Probable case	Positive test result with rapid or PCR test	Negative test result with a PCR test
Symptomatic Person	Isolate. Medical advice. Test encouraged. If not tested/tested negative • Fever free for 24 hours; and • Symptoms improved (back to usual health).	Isolate. Medical advice. Test required.	 Isolate for 10+ days. Symptom-based strategy Fever free for 24 hours without use of fever-reducing medications; and Symptoms have improved; and 10 days since symptoms first appeared. 	 Fever free 24 hourswithout use of fever-reducing medications; and Symptoms improved (back to usual health).
Return to child care	Attestation form is signed stating that return to child care criteria have been met (parent/guardian signs for a minor).	Attestation form is signed stating that return to child care criteria have been met (parent/guardian signs for a minor) with a test result	Attestation form is signed stating that return to child care criteria have been met (parent/guardian signs for a minor).	Attestation form is signed stating that return to child care criteria have been met (parent/guardian signs for a minor).
Close Contacts	No action.	No action while waiting for test result. Quarantine may be advised by RIDOH with one or more cases in the child care within the past 14 days.	Quarantine from last date of exposure. See page 68 for guidance on when a close contact may be exempt from quarantine.	No action.

Additional Resources for Administrators, Teachers, Parents/Guardians and Children



Daily Checklist for Administrators/Supervisors, Staff, & Parents/Guardians



Administrators/Supervisors of Child Care

- ☐ Ensure that you are wearing face coverings that cover the nose and mouth and maintaining at least six (6) feet from all employees/visitors.
- ☐ Ensure that **self-attestation form** for symptom screening is posted in a visible area.
- ☐ Conduct **verbal screening** of children and staff for symptoms upon drop off. Temperature checks are recommended, but not required.
- ☐ Ensure that children/staff remain in their consistent groups, and each group is **physically distancing** (each consistent group should be separated with a wall, divider or partition) from others.
- ☐ Ensure all play areas/rooms have been **thoroughly cleaned** in adherence to CDC guidelines.
- ☐ Monitor children/staff for symptoms.
- ☐ Ensure **hand hygiene** (hand washing, hand sanitizer available).
- ☐ When not in the child care setting, follow State recommendations on physical distancing, wearing face coverings, and limiting attendance at social gatherings or large gatherings.



Staff

- ☐ Ensure that you are wearing face coverings that cover the nose and mouth and maintaining at least six (6) feet from all employees/visitors.
- ☐ Conduct **verbal screening** of children for symptoms upon drop off.
- ☐ Ensure that children/staff remain in your consistent group, and you are **physically distancing** (each consistent group should be separated with a wall, divider or partition) from other groups.
- ☐ Monitor children/staff within your consistent group for symptoms.
- ☐ Ensure **hand hygiene** (hand washing, hand sanitizer available).
- □ When not in the child care setting, follow State recommendations on physical distancing, wearing face coverings, and limiting attendance at social gatherings or large gatherings.



Parents/guardians

- ☐ Screen child for symptoms using self-attestation form or app prior to leaving home:
 - ☐ If child <u>fails</u> screening, communicate with child care immediately, keep child home and seek medical advice.
 - ☐ If child <u>passes</u> screening, take child to child care but continue to monitor for symptoms.
- □ Ensure that you are wearing face coverings that cover the nose and mouth and maintain at least six
 (6) feet from all employees/ other parents or guardians upon drop off.
- ☐ Ensure that you comply with **enhanced drop-off and pick-up protocols** established by the child care
 provider and in adherence with DHS COVID-19 Child
 Care Licensing Regulations.
- ☐ Ensure **hand hygiene** (hand washing, hand sanitizer available).
- □ When not in the child care setting, follow state recommendations on physical distancing, wearing face coverings, and limiting attendance at social gatherings or large gatherings.

Resources for Educating Teachers, Parents/Guardians, and Children

Resource	Source	Overview of contents	Link to access
Talking with children about Coronavirus Disease 2019	CDC	Recommendations to help adults have conversations with children about COVID-19	cdc.gov/coronavirus/2019-ncov/daily-life-coping/talking-with-children.html
Key Messages and Actions for COVID-19 Prevention and Control in Schools, March 2020	UNICEF, WHO	Guidance for operations of education facilities including educational checklists for school administrators, teachers/staff, parents/guardians and students/children	who.int/docs/default- source/coronaviruse/key-messages-and- actions-for-covid-19-prevention-and-control- in-schools-march- 2020.pdf?sfvrsn=baf81d52_4
Toolkit for Parents and Teachers	Department of Health Promotion Science, University of Arizona	Teaching resources/information sheets for parents, teachers, administrators and CDC Health Promotion Materials	publichealth.arizona.edu/news/2020/covid- 19-communication-toolkit-parents-and- teachers
Communicating with Children During the COVID-19 Outbreak	Michigan Department of Health and Human Services	Guidelines and resources catered to families to promote healthy and comforting conversations between children and parents/guardians	michigan.gov/documents/coronavirus/Talkin g_with_kids_about_COVID_FINAL_685791_7 .pdf
Child care guidance during COVID-19 Outbreak	CDC	Guidance for child care programs that remain open	cdc.gov/coronavirus/2019- ncov/community/schools- childcare/guidance-for-childcare.html

RIDOH and DHS Resources

Resource	Source	Overview of contents	Link to access
RIDOH COVID-19 Information	Rhode Island Department of Health	General information on COVID-19 in RI	health.ri.gov/covid/
RIDOH COVID-19 Data	Rhode Island Department of Health	Numbers and trends of COVID-19 in RI	ri-department-of-health-covid-19-data- rihealth.hub.arcgis.com/
COVID-19 testing in Rhode Island	Rhode Island Department of Health	Who should get tested for COVID-19 and locations for testing throughout RI	health.ri.gov/covid/testing/
DHS COVID-19 Information	Rhode Island Department of Human Services	Professional Development: Re-Opening Child Care//Reapertura de Cuidado Infantil	center-elp.org/center-pd/dhs-mandatory- trainings-to-re-open-child-care- entrenamientos-mandatorios-de-dhs- para-la-reapertura-de-cuidado-infantil/
Re-opening Rhode Island	State of Rhode Island	Guidance for re-opening RI	www.reopeningri.com/

Version 1.4 (December 15, 2020)

- Clarifying the infectious period for a person with COVID-19
- Clarifying the definition of a close contact
- New RI state guidance on quarantine for close contacts
- Reporting probable cases
- K-12 and child care test scheduling service Information
- Answers to frequently asked questions

Version 1.5 (January 20, 2021)

- COVID-19 Close Contact Calculator
- Testing of all close contacts
- Clarification of quarantine for household members given new guidance
- Testing at a K-12 Site for Symptomatic Individuals
- Frequently asked questions about rapid and PCR tests
- Clarification that individuals who test positive do not need a negative test to return to child care –
- Answers to common questions about classmates & siblings of children on quarantine

Version 1.6 (February 3, 2021)

Updated state quarantine guidance for domestic and international travel

Version 1.7 (March 11, 2021)

- Clarification of Isolation and Quarantine for Household Members
- New Quarantine Guidance for Individuals Who Have Been Fully Vaccinated Against COVID-19
- New Exemption from Quarantine After Domestic Travel
- New Exemption from Quarantine After International Travel

Version 1.8 (March 24, 2021)

 Update to guidance on quarantine exemptions for fully vaccinated individuals: Removal of the 90day limit

Version 1.9 (June 2, 2021)

- Re-ordered content so that each section includes all the slides for that topic (including FAQs)
- Update on Masking Wearing in Child Care Settings Page 13
- Guidance on COVID-19 and Allergies Page 23
- Updated information on K-12/Child Care Testing Sites Page 27
- Guidance on Confirming a Positive Asymptomatic Antigen Test Page 32

Questions? Contact Us!

- Call the COVID-19 info line at 401-222-8022.
- Email the COVID-19 Child Care Team at RIDOH.COVIDChildcare@health.ri.gov:
 - Please leave a call-back number in your email.
 - The inbox is monitored during business hours only. If you send a message after business hours, your message will be received the next business day.