

Childcare Guide for COVID-19 Isolation and Exposure

May 23, 2022
1:32 pm

If An Attendee...

- **Has one or more symptoms** that are consistent with COVID-19 (fever, chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting and/or diarrhea) **or tests positive for COVID-19, the child must isolate.**
 - If not already done, testing should be done immediately if the symptoms are not otherwise explained by a documented chronic illness.
 - The attendee can return on day 6 from start of symptom onset (use collection date if no symptoms) as long as the child is fever free and other symptoms improving. Day 0 is the day of symptom onset or collection date if no symptoms, and day 1 is the next day.
 - Antigen testing on day 5 prior to return to childcare is recommended, especially for those who are not able to or are too young to mask.
 - If the case is tested on day 5 and continues to test positive, isolation should continue until either a negative test is obtained or 10-full days have passed since symptom onset (use collection date if no symptoms) and the child is fever free with other symptoms improving. If fever is present, isolation should continue until fever is resolved.
 - Exception: If symptoms are followed with a negative molecular test or 2 negative antigen tests, and in the absence of any positive test, the child may return once fever free for 24 hours (without fever reducing medication) and with other symptoms improving. Initial negative tests (molecular or antigen) must be collected after symptom onset, and second antigen tests must be collected at least 12 hours after the previous negative antigen.
- **Has been identified as a close contact or a member of an exposed group and does not have symptoms, quarantine** may be considered due to exposure, including staying home for 5-10 full days following last date of exposure to a positive case OR providers may consider permitting asymptomatic exposed children to continue to attend care.
 - Testing is recommended immediately, as well as on day 5 following last date of exposure. Those within 90 days of a previous infection do not need to test if asymptomatic. Day 0 is the last date of exposure, and day 1 is the next day.
 - Members of an exposed group should be monitored for symptoms daily. If symptoms occur or the attendee tests positive for COVID-19, they should follow the above guidance for isolation.
 - Emphasis should be placed on all exposed children 2 years and older to wear an appropriate well-fitted mask around others through day 10, especially if remaining at care.
 - Providers may allow asymptomatic exposed children to remain at care regardless of vaccination status, age, or location of exposure. If the provider chooses to exclude exposed contacts, return on day 6 is permitted as long as no symptoms have developed and no positive test has resulted.

If a Worker

- **Has tested positive and does not have symptoms, use the Asymptomatic Positive Tree for Workers**
- **Has symptoms, use the Symptom and Isolation Tree for Workers**
- **Is identified as a close contact or member of an exposed group and does not have symptoms, use the Close Contact and Exposure Tree for Childcare Workers**

Asymptomatic Positive Tree for Childcare Workers

A person (vaccinated or unvaccinated) has tested positive for COVID-19 using any test type and does not have symptoms
Confirmation testing is not recommended

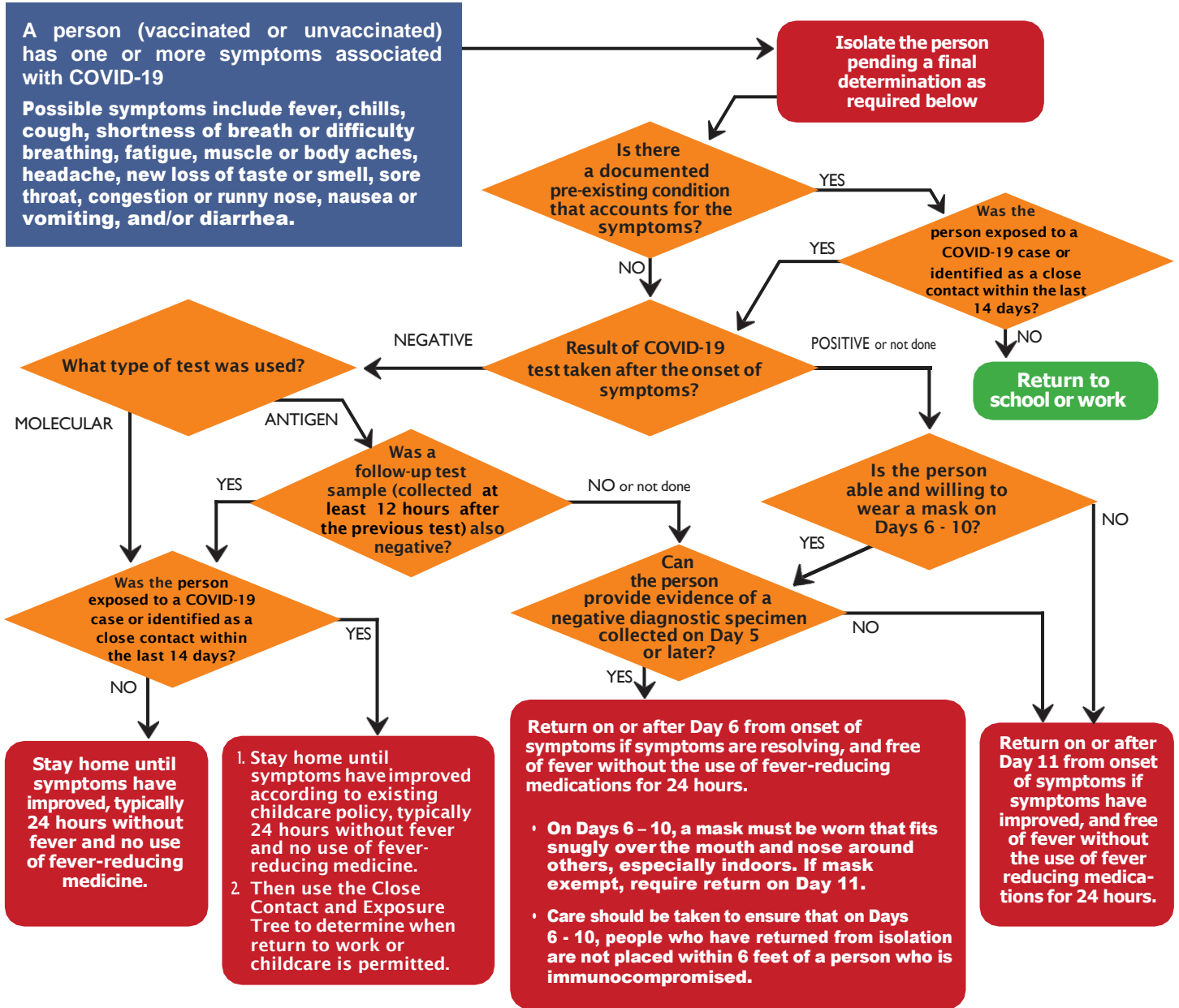


Isolate at home for 5 days from the date on which the first sample was collected.

- Return on or after Day 6 with evidence that a diagnostic sample collected on or after Day 5 is negative.
- On Days 6 – 10, a mask must be worn around others that fits snugly over the mouth and nose, especially indoors.
- If unable or unwilling to test or mask as required, return on Day 11.
- If symptoms develop, isolate immediately and follow the *Symptom and Isolation Tree*.



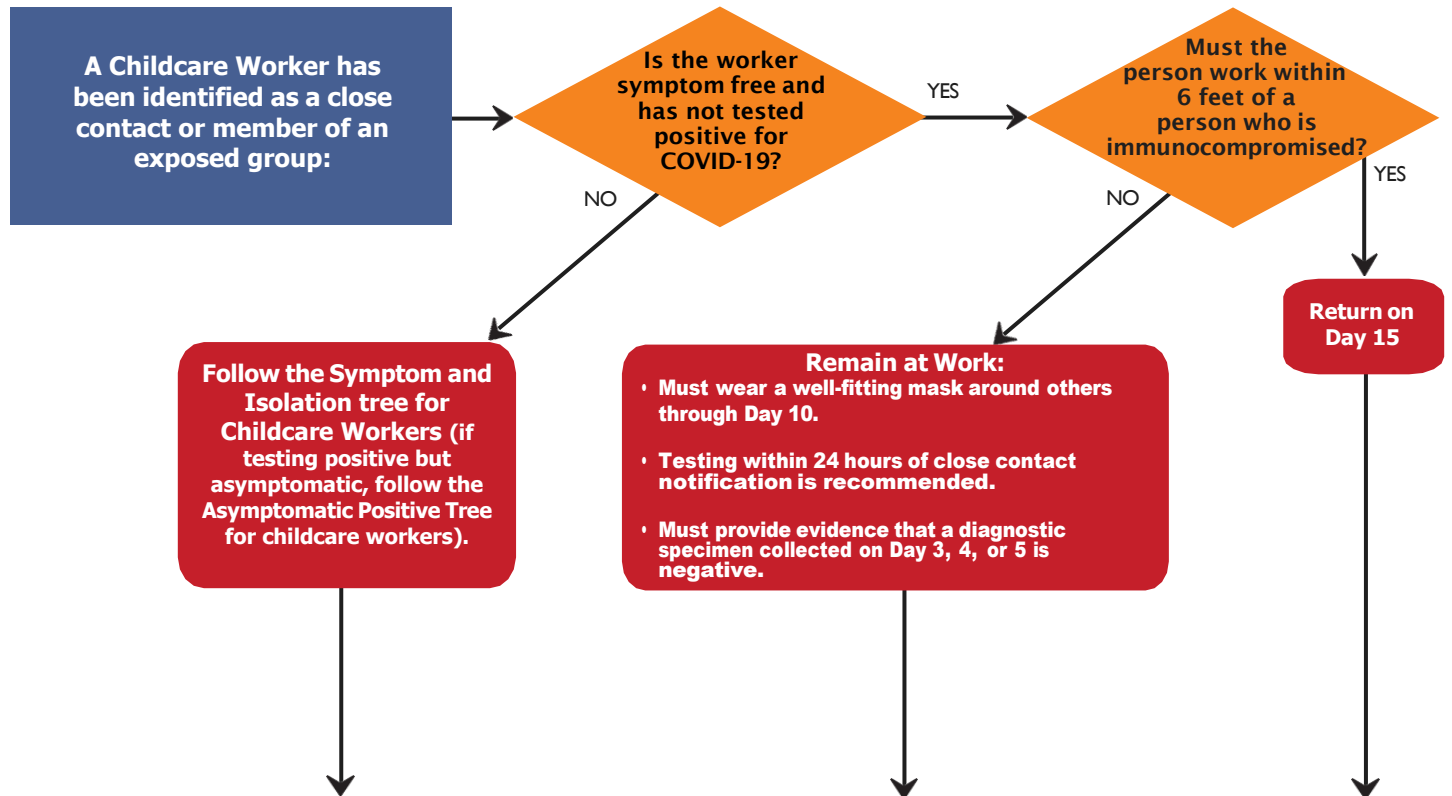
Symptom and Isolation Tree for Childcare Workers



Other Notes on Isolation for Workers:

- Persons returning to work prior to day 11 must wear a well-fitting mask and maintain distance from others to the maximum extent possible through day 10.
- Those returning from isolation must be fever free for 24 hours prior to return (without having to take fever reducing medication) and other symptoms must be improving.
- A negative test on day 5 or later is required for early release from isolation. This result must be received prior to returning to work anytime between days 6-10 (before day 11). If the person is unwilling or unable to adhere to the testing requirement, or any other requirement, the person must be excluded for a full 10-days.

Close Contact and Exposure Tree for Childcare Workers



Household Exposures: If the close contact occurred with a COVID-19 positive household member, day 1 of the quarantine is the day after the COVID positive household member's isolation is complete or effective home isolation has begun. If testing is required for the exposed individual, guidance for testing also follows the same timeline. See Decision Tree FAQs answer No. 4 for additional information on ongoing exposures.

Other Notes on Quarantine for Workers:

- **Persons remaining at work must be symptom free. If symptoms develop, or if the individual tests positive, they should immediately isolate and follow the appropriate isolation tree for workers.**
- **Exposed workers must wear a well-fitting mask around others for 10 days following their last exposure, especially in indoor settings. Workers should also maintain distance from others to the maximum extent possible through day 10.**
- **Exposed workers must provide a negative test on day 3, 4, or 5 to remain at work. Those within 90 days of a prior infection do not need to test unless symptomatic.**
- **If the person is unwilling or unable to adhere to the testing requirement, or any other requirement, the person must be excluded for a full 10-days after last exposure to the infectious case. Additionally, the facility may choose to issue stricter requirements for workers, including a standard 5-10 day quarantine period for any exposed worker.**

Test Types By Situation

Situation	Appropriate Test Types
Post-exposure & close contact testing	<ul style="list-style-type: none"> • Antigen • PCR or other NAAT
Return from isolation before Day 11	<ul style="list-style-type: none"> • Antigen is recommended because it is less likely to detect the virus beyond a person's contagious period. • PCR or other NAAT are acceptable.
Person with symptoms	<ul style="list-style-type: none"> • Antigen is acceptable, but if a person with symptoms receives a negative result from the initial antigen test, confirmation with another test (PCR, antigen, or other NAAT) is necessary to accept the negative result if seeking return prior to day 6. If any prior positive result is received, a minimum 5 day isolation period is still required. • PCR, antigen, or other NAAT. Antigen testing is preferred for those within 90 days of previous positive test.
At-Home Testing	
<p>Childcares should use one or more means described in the Over-The-Counter Tests Guidance to verify the results on tests administered at home. See the FAQ section, answer #10, for specific recommendations.</p>	

Frequently Asked Questions

1. What is the difference between **quarantine** and **isolation**?

Quarantine: People who have been identified as having been in close contact with or exposed to someone with COVID-19 may be required to quarantine away from others because they may become infected with COVID-19 from 2 to 14 days following their last contact with a person who had COVID-19, though this risk decreases after day 5.

- When calculating quarantine period, last date of contact with or exposure to the positive case is day "0"

Isolation: People who have one or more of the symptoms associated with COVID-19 and/or have lab confirmed COVID-19 are required to isolate away from others while they may be contagious with COVID-19. A person:

- With symptoms is contagious from 2 days before their symptoms began to 5 - 10 days after.
- Who has tested positive and does not have symptoms is considered contagious from 2 days before the date their first positive test sample was collected to 5 - 10 days after, if they remain asymptomatic.
- Who tested positive while they were asymptomatic, and develops symptoms later, is considered contagious from 2 days before the first positive test sample was collected to 5 - 10 days after symptoms began.
- Likelihood of contagious infection being present decreases after day 5, especially if a negative antigen test result is obtained.
- When calculating isolation period, date of symptom onset or test collection date (if no symptoms) is day "0"

2. What counts as a **close contact** or **exposure**?

A "close contact" is a person who has contact with a COVID-19 positive person that occurs anywhere between 2 days before the positive person's symptoms began (or, for asymptomatic cases, 2 days prior to test specimen collection), and until the positive person is no longer required to be isolated, and where they:

1. Were within 6 feet of a COVID-19 positive person for a cumulative total of 15 minutes or more over a 24- hour period; or
2. Had unprotected contact with the body fluids and/or secretions (including, but not limited to, being coughed on or sneezed on, sharing utensils, or drinking out of the same container) of a COVID-19 positive person.

Per CDPH, in childcare settings where it may be difficult to identify individual contacts, all those in a shared indoor airspace for at least 15 minutes with an infectious person may be considered exposed.

3. Who may be **exempt from quarantine**?

Providers may consider permitting exposed children or workers *without symptoms* to continue to attend care or remain at work as long as they remain symptom free. Specific testing and masking requirements pertain to workers (see worker tree above). If symptoms occur in anyone (attendee or worker) following exposure (even people who are fully vaccinated, and those who have already had COVID-19 in the preceding 90 days), they are required to isolate immediately and test.

Frequently Asked Questions continued . . .

4. **How long do I have to quarantine if a member of my household is COVID positive?**

Providers may still consider permitting exposed, asymptomatic workers or attendees to remain at work or care even if the exposure is from a member of the same household, though these cases are generally considered to have higher risk of transmission and exposed persons should be extra vigilant in taking recommended precautions.

If not permitted to remain at work or care, and there is ongoing exposure to a positive case, such as a household contact, and the case and contact continue to share a home, the close contact's quarantine will begin once the positive case's isolation period has ended. Typically, this is a period of 10-20 days (5-10 day isolation period + 5-10 day quarantine, with the last day of isolation being the contact's last day of exposure). If the positive case meets all criteria to end isolation on day 6, day 5 can be used as the contact's last day of exposure. If the contact qualifies for a 5 day quarantine period, the period may be as short as a 10-day period (5 day isolation period + 5 day quarantine period). If the COVID-19 positive person is not able to isolate in a separate residence, the county's [home isolation instructions \(translations\)](#) describe the specific requirements for isolation in a home occupied by others. If the person is able to comply with these instructions, quarantine of close contacts can begin when the COVID-19 positive person begins isolation. If a close contact with ongoing exposure starts exhibiting symptoms but does not test positive for COVID-19 or does not test, they must finish out the remainder of their quarantine period (either 5 or 10-days from the **last** date of exposure). If the close contacts test positive for COVID-19, then the isolation and symptom guidance should be followed.

5. **Does the K-12 guidance apply to childcare settings serving preschool age children on school campuses?**

No, CDPH has published guidance for each sector, K-12 in conjunction with Department of Education and Early Childhood Education in conjunction with Community Care Licensing. As K-12 and ECE serve different populations and have different methods of instruction, different precautions are needed in the ECE setting. The Childcare Decision Tree is based on the CDPH Child Care Providers and Programs guidance, Cal/OSHA Emergency Temporary Standards, the local public health orders, pertinent executive orders, and answers received directly from the CDPH. CDPH has allowed for childcare facilities serving school age children (typically TK and up) and located on K-12 campuses, to follow K-12 guidance. It is anticipated more changes will follow over time. Preschools on K-12 campuses must continue to follow this childcare guidance.

6. **Is contact tracing required for attendees and staff in outdoor childcare settings?**

Based on guidance from the CDPH, not all encounters in outdoor settings need to be identified by schools for individual contact tracing. Focus on encounters that are indoors, in enclosed outdoor spaces (e.g. 3+ sided tents), and with the people the individual normally associates with, including prolonged time spent in close proximity outside.

7. **How should childcare manage eating, drinking, and nap time for attendees who return from isolation or quarantine before Day 11?**

Children who return from isolation or quarantine before Day 11 should wear a mask that fits snugly over their nose and mouth around others, especially in indoor settings, on Days 6 – 10 from the onset of their symptoms or last date of exposure. Childcares should make arrangements for attendees to eat and drink outside with physical distancing. Physical distancing should be implemented during nap time since masks are not worn during this time.

8. **When does it make sense to confirm an antigen test with another test?**

When the person's symptoms don't match the antigen test results.

- A symptomatic person with a negative antigen test should isolate until confirmatory results are available.

9. **What type of test can be used to confirm an initial negative antigen test for a symptomatic individual?**

A follow up molecular (PCR or other NAAT) or antigen test is acceptable to confirm the negative results. An antibody test is not acceptable. The follow up confirmatory test must be collected at least 12 hours after the initial negative antigen test, and must also show a negative result.

Frequently Asked Questions continued . . .

10. Can **home testing** be used to satisfy testing requirements?

The CDPH Over-The-Counter (OTC) testing guidance allows at-home tests to be used to end isolation and quarantine, and encourages childcare to establish requirements for verification of the test results for attendees. The guidance suggests:

- Use of a digital (app-based) platform for test verification, which often includes scanning barcodes; these are available for certain brands of self-tests.
- Having parents write the name and date of the child that was tested on the test card results and requiring them to send a picture of the card to the request return.
- Create an attestation form and require signature declaring that the test specimen was obtained from the individual represented on the form, including the date the specimen was collected, and that the test was processed according to the test kit instructions.
- For workers, a COVID-19 test may be both self-administered and self-read only if another means of independent verification of the results can be provided (e.g. a time-stamped photograph of the results).

11. What are the requirements if a person **tests positive but has no symptoms**?

If the person remains asymptomatic, they are required to self-isolate for at least 5 days past the date on which the positive test was collected. Attendees can return after day 5 if symptoms have not developed. A test is recommended for attendees on day 5, and masking should be actively encouraged for children 2 years and older through Day 10. To return to work the staff member must provide a negative test collected on day 5 or later if returning prior to day 11. The worker must also wear a mask that fits snugly over their nose and mouth (indoors and within 6 feet of others outdoors) on Days 6 - 10. If the worker is unable or unwilling to do this, they must remain in isolation through Day 10.

12. What **changes to masking guidance** were implemented on **March 12th, 2022**?

As of March 12th, 2022 masking is no longer required indoors in childcare settings for day-to-day operations. This guidance applies to children, staff, and visitors. However, CDPH still strongly recommends that masking is used indoors for the childcare setting, especially for those with recent COVID-19 symptoms, diagnosis, or exposure. Cal/OSHA still requires staff who have tested positive for COVID-19, or who have been exposed to COVID-19, to mask through day 10. Each facility may choose to set their own masking policy, including stricter requirements. Per CDPH [Guidance for Face Coverings \(ca.gov\)](#) masks, especially those that offer the best fit and filtration (e.g. N95s, KN95s, KF94s), remain a critical component of our multi-level approach for protection against COVID-19 infection," though "vaccines remain the ultimate exit strategy out of the COVID-19 pandemic." CDPH [Guidance for Child Care Providers and Programs](#) states that "promoting vaccination, including boosters, among all eligible individuals can help child care programs protect staff and children in their care, as well as their families."

13. What is the recommended guidance for an individual who develops **symptoms, but is within 90 days of a previous COVID-19 infection**?

Regardless of previous infection or vaccination status, anyone who develops otherwise unexplained symptoms consistent with COVID-19 should isolate and seek testing. Antigen testing is preferred for those who are symptomatic and within 90 days of previous infection (potential reinfections) because it is less likely to detect the virus if the individual is no longer contagious to others, while molecular testing may remain resulting positive for some months after initial infection. If antigen testing is positive, or in the absence of a test result, the person should isolate for 5 full days past onset of symptoms, and until fever free with other symptoms improving. If antigen testing is negative and symptoms are not due to chronic illness, it may be necessary to seek a medical provider's evaluation prior to returning to care or work.