

## DECE COVID-19 Case Reporting and Tracing

The situation regarding COVID-19 is rapidly changing, as is our knowledge of this new disease. The guidance below is based on the best information currently available. This guidance for DOE-contracted early childhood programs is intended to supplement all relevant city, state and federal law and guidance, including guidance issued by New York State and the NYC Department of Health and Mental Hygiene (DOHMH).

### COVID-19 Testing

#### **Affiliated Providers**

Affiliated providers should ask all program staff to be tested for COVID-19 at least seven days prior to the start of in-person services. Participation in COVID-19 testing for program staff is entirely voluntary. Program staff members should also be encouraged to opt into monthly repeat surveillance COVID-19 testing. Testing may occur at any location, but staff are encouraged to use City-run testing sites.

#### **Networks**

A best practice would be for Network leaders to ask all Network staff to be tested for COVID-19 at least seven days prior to resuming in-person duties. Participation in COVID-19 testing is entirely voluntary. Network staff members might also be encouraged to opt into monthly repeat surveillance COVID-19 testing. This guidance is intended to supplement, but not supplant guidance issued by your organization's Human Resources department. Please connect with your HR department to understand the policies they have put in place.

#### **Isolation Space**

Affiliated providers must have a private area (such as an enclosed room, but at a minimum a cot in a private area) provided for separating symptomatic children under direct adult supervision until a family member can pick up the child, or symptomatic staff members until they can safely leave the facility.

- Affiliated providers must maintain a supply of medical and emergency equipment and supplies in the designated isolation space, including go bags/kits and appropriate personal protective equipment (PPE), including, but not limited to N95 respirators, gloves, gowns, and face shields or goggles.
- Family Day Care programs who only have one program staff on site, must ensure that all children are in line of sight even when the symptomatic child is separated from the rest of the children.

#### **Symptomatic Children and Staff**

- All Network staff, affiliated providers, program staff, and families must be familiarized with the symptoms of COVID-19. These symptoms may include:

- Fever or chills,
- Cough, shortness of breath or difficulty breathing,
- Fatigue,
- Muscle or body aches,
- Headache,
- Loss of taste or smell,
- Sore throat, congestion or runny nose,
- Nausea or vomiting,
- Diarrhea.
- If a child is showing any symptoms of COVID-19, program staff should:
  - Escort the child to the isolation space while wearing appropriate PPE.
  - Designated staff should assess if the child is in acute respiratory distress for 911 activation:
    - Affiliated providers may consult the nursing triage hotline if needed (more details to come).
    - If 911 is called, complete and submit a [DECE Occurrence Report](#).
  - If the child is stable enough, notify the child's parent/guardian to come and pick up the child. Strongly advise the family to visit a doctor and get the child tested for COVID-19, and provide the information of the [closest testing site](#), if asked.
  - Upon completing the supervision of the child (transferring custody to the parent/guardian), the staff member should remove gloves (taking care to touch only the inner surface of the glove) and wash hands. Then remove the following in this order taking care to touch only the back of the items: face covering, smock, then wash hands. Hands should be washed after removing each item. All items should be disposed of in a regular garbage bin, or washed for reuse, as appropriate.
- If a staff member is symptomatic upon arrival at work or becomes sick with COVID-19 symptoms while at work, the staff member must be separated and sent home immediately. If the employee does not feel well enough to leave on their own, the program leader should assist with arrangement of ambulance services, if appropriate, or other safe transportation home, such as calling a family member to accompany the staff member home. If 911 is called, complete and submit a [DECE Occurrence Report](#). Any adults waiting with the employee should stay at least six feet away from the employee in the designated isolation space. Strongly advise the staff member to visit a doctor and get tested for COVID-19, and provide the information of the [closest testing site](#), if asked.
- Immediately close off areas used by any person with COVID-19 symptoms.
  - Thoroughly clean and disinfect any affected areas according to the CDC guidance on [Cleaning and Disinfecting Your Facility](#).
  - Open outside doors and windows to increase air circulation in the affected areas, to the extent practicable while maintaining all health and safety standards.
  - Wait 24 hours before you clean and disinfect the affected areas. If 24 hours is not feasible, wait as long as possible (at least 2 hours).

- Clean and disinfect all areas used by the person with COVID-19 symptoms, such as the isolation space, bathrooms, common areas, and shared equipment.
- After cleaning and disinfecting the affected areas, these areas can be used for other purposes.
- If a child or staff member is exhibiting COVID-19 symptoms, but there is no laboratory-confirmed positive test result, there is no requirement to close the program
- If the symptomatic individual gets tested, the person must stay home while waiting for their test results for at least 10 days and cannot attend the program (or any other child care program).
  - If a positive case is confirmed, affiliated providers must follow the protocols in the next section.
  - If a negative laboratory-confirmed test result is received, the individual may return to the program if they have been fever-free for 24 hours without the use of fever-reducing medication AND their overall illness has improved.
- If the symptomatic individual does not get tested, then the individual cannot return to the program until:
  - 10 days have passed since the first symptom; AND
  - The individual has been fever-free for 24 hours without the use of fever-reducing medication; AND
  - Their overall illness has improved.
- You are not required to notify families when someone in the program has symptoms of COVID-19 (as long as the case is not confirmed). If you want to communicate something to families about a symptomatic staff member or child, you may let them know that:
  - The person has symptoms, does not currently have a confirmed case of COVID-19, and is not attending the program for at least 10 days (unless they receive a negative lab-based test).
  - All other children may continue to attend the child care program.
  - If they are concerned, they should talk to their health care provider.
  - The symptoms of COVID-19 are very nonspecific, and are often similar to other respiratory viral diseases, including influenza.

### **Network Staff**

Networks must adhere to their organizations policies related to COVID-19. However, the DECE encourages Networks to follow similar protocols as outlined above.

### **Confirmed Cases in an FCC Program**

- A Network affiliated FCC program may hear about a positive COVID-19 case in one of the following ways:

- The DOHMH alerts the program about a positive diagnostic test. (Note: The program should notify the DOE after receiving this information using [this intake form](#). The DOHMH will also notify the DOE about any confirmed cases at Network affiliated programs).
- Staff member or parent/guardian self-reports to the affiliated provider and the affiliated provider notifies their Network and the DOE, which works with the DOHMH to confirm the positive test result.
- Programs **do not** need to report positive COVID-19 cases for family members or close contacts of students/staff members. Similarly, programs **do not** need to report cases where an individual may be symptomatic, but has not tested positive. In either of these scenarios, the student or teacher should remain home per our published [COVID-19 Case Reporting and Tracing guidance](#), and are strongly encouraged to get tested for COVID-19.
  - A close contact is now defined as someone who was within 6 feet of someone who tested positive for COVID-19 for a cumulative total of at least 10 minutes over a 24-hour period, starting from two days before symptoms begin (or, for individuals without symptoms, two days prior to the positive test result) until the time the patient is isolated.
  - This definition of close contact in a community setting is being used by the NYC Test & Trace Corps, in keeping with NYS guidance. The change specifies that the 10 minutes of contact within 6 feet is now to be calculated cumulatively.
  - More information can be found in this [FAQ About COVID-19 for Health Care Providers](#).
- **If a staff member or parent/guardian reports a positive COVID-19 case to the program, the affiliated provider must immediately contact their Network.**
- **The Network must immediately notify the DOE by completing [this intake form](#) on behalf of the affiliated provider.**
  - **Networks must use this form for affiliated providers and their family members living in the home, program staff, and children.**
  - Each affiliated provider must identify two contacts who are authorized to notify the DOE of self-reported cases and receive information back about confirmed cases. This information must be treated as confidential and identifying information on cases should not be shared with the program community or others.
- The DOHMH will investigate whether the person is a confirmed case of COVID-19, and share the results back with the DOE. The DOHMH will also follow up with the program and any confirmed cases directly.
  - Affiliated providers can expect to hear back from the DOE whether the case is confirmed by DOHMH within approximately three hours.
- In the event that there is one or more confirmed positive COVID-19 case(s) in a program, the program must adhere to the protocols outlined in the table below, titled **Summary of Confirmed COVID-19 Case Outcomes For Network affiliated programs**.
- The person who has a confirmed case of COVID-19 cannot attend the program, or any other child care program, until all the following are true:
  - It has been at least 10 days since their symptoms started; AND

- They have not had fever for the last 24 hours without the use of fever-reducing medication; AND
- Their overall illness has improved.
- If the person never had symptoms, they cannot attend the program for 10 days from the date that the specimen was obtained for their positive COVID-19 test.
- Immediately after confirming the case with the DOHMH, the DOE will reach out to the program with templates for letters to provide to all staff and families enrolled in their program. The DOE will share two different letter templates with affiliated providers:
  - **Letter 1 (for presumed close contacts):** This letter is for staff and families of children who are presumed to be close contacts of the positive case because they are from the same program as the individual who tested positive; this program will be closed for 14 days. Letter 1 will state that they or their child has likely been in close contact with a COVID-19 positive individual, and will give directions to quarantine for 14 days from the date they were last exposed (if they develop symptoms during this time, they will need to isolate).
- If any children or staff who are presumed close contacts are currently on site when the case is confirmed, affiliated providers should follow their existing isolation protocol, contact the parents/guardians of any children who are presumed close contacts for immediate pick-up, and send home any staff members who are presumed close contacts immediately.
- After a case is confirmed, DOHMH will determine the person's likely "infectious period," which is the time period when they can spread the virus, to determine whether the child or staff attended the program facility during the infectious period.
  - If the DOHMH determines that the person was not in the program during their infectious period, unless DOHMH or DOE direct the program otherwise, there is nothing else to do.
  - If the DOHMH determines that the person was in the program during their infectious period, they will work with the program to create a confirmed list of everyone who would have been a close contact (within six feet for at least 10 minutes) of the person in the program during their infectious period.
  - This list of confirmed close contacts will likely include all of the presumed close contacts (staff and children from the same home care setting as the individual who tested positive). Depending on the program's schedule, there may be other close contacts identified. For example, if children or staff move between groups, there may be close contacts in these other groups.
    - The DOHMH may provide additional letter templates with further information to confirmed close contacts (including anyone not included in the initial group of presumed close contacts).
    - All close contacts must quarantine and cannot attend the program, or any other child care program, for 14 days after their last contact with the infectious person.
      - This is true even if the close contact receives a negative COVID-19 test result themselves during the quarantine period.

- The DOHMH will provide the list of close contacts to NYC Test and Trace Corps for contact intake and ongoing monitoring during the 14-day quarantine.
- Learning must continue remotely for all children from Network affiliated program who are in quarantine.
  - Affiliated providers must keep the DOE updated on all developments from the DOHMH investigation.
- You must never reveal the identity of the person with COVID-19 with families in your program, or share information about the person with COVID-19. That information is confidential. Maintaining confidentiality will help encourage other people to disclose when they have COVID-19.
- Whenever a case of COVID-19 is confirmed by the DOHMH, affiliated providers must close off any areas used by the person confirmed to have COVID-19, and follow the Centers for Disease Control and Prevention guidelines on ["Cleaning and Disinfecting Your Facility"](#) when cleaning and disinfecting those spaces.