

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

Programs should ask all staff to be tested for COVID-19 at least seven days prior to the start of in-person services, including staff members working in any classrooms not contracted by the DOE. 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](#).

Isolation Space

Your program 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.

- Programs 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.

Symptomatic Children and Staff

- All program staff 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.
 - Nurse should assess if the child is in acute respiratory distress for 911 activation:
 - If the program does not have an on-site nurse, the identified site safety monitor should do this assessment. Programs 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. Advise the family to visit a doctor and get the child [tested for COVID-19](#).
 - 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. Advise the staff member to visit a doctor and get [tested for COVID-19](#).
- 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 classroom or program building.
- 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, programs 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.

One Confirmed Case in a Program

- A DOE-contracted 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 DOE-contracted programs).

- Staff member or parent/guardian self-reports to the program, and the program notifies the DOE, which works with the DOHMH to confirm the positive test result.
- **If a staff member or parent/guardian reports a positive COVID-19 case to the program, the program must immediately contact the DOE by completing [this intake form](#).**
 - DOE-contracted programs must use this form for staff or child cases in both DOE-contracted AND non-DOE contracted classrooms.
 - Each program 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.
 - Programs 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 DOE-Contracted 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, including families and staff in any classrooms not contracted by the DOE. The DOE will share two different letter templates with programs:
 - **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 classroom as the individual who tested positive; this classroom 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).
 - **Letter 2 (not everyone not presumed close contacts):** This letter is for staff and families of children who are not presumed to be close contacts of the individual who tested positive. Letter 2 will state that there was a confirmed case of COVID-19 at the program, but that they or their child is not considered a close contact at this time and therefore there is currently no need to quarantine.
- If any children or staff who are presumed close contacts are currently on site when the case is confirmed, programs 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 classroom or 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 DOE-contracted classrooms who are in quarantine.
- Programs must keep the DOE updated on all developments from the DOHMH investigation.
- You should 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, programs 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.

Two or More Confirmed Cases in a Program

- If there are two or more confirmed COVID-19 cases in a program:
 - *If the cases are in the same classroom:* The program stays open for in-person services, but the affected classroom must remain closed for 14 days; all students and staff in close contact with the positive cases must quarantine for 14 days.
 - *If the cases are in different classrooms:* The program must close all in-person DOE services for a minimum of 24 hours while the DOHMH and NYC Test + Trace Corps conduct their investigation.
- The DOE will provide the program with the letter template for presumed close contacts described above, as well as a letter template for all other staff and families (not presumed close contacts), notifying them of the closure.
- The DOHMH and NYC Test + Trace Corps will determine if the program needs to remain closed beyond the minimum 24 hours in order to reach the conclusion of the investigation.
- If at its conclusion, the investigation is unable to determine a link between the cases, or if exposure outside the program setting is not confirmed for each case, the program must close all in-person DOE services for 14 days.
 - This closure must include all DOE-contracted classrooms in the program (and any staff who work in any capacity with these contracted classrooms, including program administrators). The DOE strongly encourages closing any non-contracted classrooms as well.
- All DOE-contracted classrooms are required to transition to remote learning services for the duration of any classroom or program closure.

Summary of Confirmed COVID-19 Case Outcomes for DOE-Contracted Programs

Conclusion of Investigation	During Investigation (for at least 24 hours)	Post Investigation
A. One confirmed case	Close classroom, transition to remote learning.	Classroom remains closed for 14 days; all children and staff in close contact with positive case quarantine for 14 days.
B. At least two cases in same classroom	Close classroom, transition to remote learning.	Classroom remains closed for 14 days; all children and staff in close contact with positive case quarantine for 14 days.
C. At least two cases in different classrooms, linked together in program	Close all contracted classrooms in program (strongly encouraged to close non-contracted classrooms) for investigation period of at least 24 hours. Transition DOE-contracted classrooms to remote learning.	All contracted classrooms not under quarantine open post investigation period (at least 24 hours). Classrooms of each case remain closed for 14 days; all children and staff in close contact with positive cases quarantine for 14 days.
D. At least two cases in different classrooms, linked together by circumstances outside of program	Close all contracted classrooms in program (strongly encouraged to close non-contracted classrooms) for investigation period of at least 24 hours. Transition DOE-contracted classrooms to remote learning.	All contracted classrooms not under quarantine open post investigation period (at least 24 hours). Classrooms of each case remain closed for 14 days; all children and staff in close contact with positive cases quarantine for 14 days.
E. At least two cases in different classrooms, not linked, but exposure confirmed for each case outside of program setting	Close all contracted classrooms in program (strongly encouraged to close non-contracted classrooms) for investigation period of at least 24 hours. Transition DOE-contracted classrooms to remote learning.	All contracted classrooms not under quarantine open post investigation period (at least 24 hours). Classrooms of each case remain closed for 14 days; all children and staff in close contact with positive cases quarantine for 14 days.
F. At least two cases in different classrooms, link unable to be determined	Close all contracted classrooms in program (strongly encouraged to close non-contracted classrooms) for investigation period of at least 24 hours. Transition DOE-contracted classrooms to remote learning.	Close all contracted classrooms in program for 14 days (strongly encouraged to close non-contracted classrooms).