• Summary of Changes to the Playbook – Page 3
• Prevention Strategies Based on COVID-19 Community Level - Page 4
• COVID-19 Symptoms, Infectious Period, Isolation, and Managing Exposure - Page 9
• Outbreak Management - Page 17
• COVID-19 Testing – Page 20
• COVID-19 Vaccination – Page 25
• Additional Resources – Page 28
Summary of Changes to the Playbook

Version 2.6 (August 25, 2022). On August 11, the Centers for Disease Control and Prevention (CDC) updated its quarantine and isolation recommendations.

New

- Quarantine is no longer recommended, except in high-risk congregate and healthcare settings, and information related to school-based quarantine protocols (e.g., Monitor to Stay and Test to Stay) have been removed
- Extra precautions to take for people who are at risk of getting very sick from COVID-19
- Test-based strategy for removing masks after COVID-19 infection
- Detailed information on managing cases and exposures, responding to outbreaks
- Types of tests recommended for child care testing programs

Updated

- Screening testing to focus on high-risk activities during high COVID-19 Community Level or in response to an outbreak
- State supported testing
Prevention Strategies by COVID-19 Community Levels
CDC’s COVID-19 Community Levels in Rhode Island

CDC’s COVID-19 Community Levels framework is a tool to help communities and individuals make decisions about COVID-19 prevention strategies. Each county level is assessed weekly as either low, medium, or high. These levels account for local COVID-19 hospitalization rates, healthcare burden, and COVID-19 cases.

- The recommendations outlined for child care according to COVID-19 Community Levels are the same as those outlined for the community.
- Programs that serve children from multiple communities should follow prevention recommendations based on the COVID-19 Community Level of the community where the program is located.
- Find the current COVID-19 Community Level for each county in Rhode Island on RIDOH’s COVID-19 Data Portal.
Overview: COVID-19 Mitigation in Child Care

In line with CDC guidance, Rhode Island recommends child care programs implement baseline infection control strategies and consider extra steps to protect against COVID-19 during outbreaks and periods of higher risk.

<table>
<thead>
<tr>
<th>At All COVID-19 Community Levels</th>
<th>High COVID-19 Community Levels or Outbreaks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Programs should take steps to manage all infectious diseases, including COVID-19, by</td>
<td>Programs should consider implementing extra steps for protection during periods of higher risk, including:</td>
</tr>
<tr>
<td>• Promoting vaccination;</td>
<td>• Screening testing for children and staff for</td>
</tr>
<tr>
<td>• Optimizing ventilation;</td>
<td>• High-risk activities, at key times in the year, and when returning from breaks/holidays;</td>
</tr>
<tr>
<td>• Promoting hand and respiratory hygiene;</td>
<td>• Recommending universal indoor masking; and</td>
</tr>
<tr>
<td>• Cleaning and disinfection;</td>
<td>• Additional strategies recommended by RIDOH during an outbreak.</td>
</tr>
<tr>
<td>• Integrating staying home when sick, isolation, and managing exposure protocols into illness policies;</td>
<td></td>
</tr>
<tr>
<td>• Offering school-supported diagnostic testing;</td>
<td></td>
</tr>
<tr>
<td>• Masking at all times in nurse offices/spaces; and</td>
<td></td>
</tr>
<tr>
<td>• Maintaining the capacity for screening testing.</td>
<td></td>
</tr>
</tbody>
</table>
Everyday Actions to Prevent COVID-19 and All Infectious Diseases

Child care programs should put in place a core set of infectious disease prevention strategies as part of their normal operations. These COVID-19 mitigation strategies can help prevent the spread of other infectious diseases and support healthy learning environments for all.

Programs should ensure they have policies, protocols, and resources in place to:

- Promote staying up to date with COVID-19 vaccine (see slide 26);
- Optimizing ventilation;
- Promoting hand and respiratory hygiene, cleaning and disinfection;
- Integrating symptom monitoring, staying home when sick, isolation, and managing exposure protocols into illness policies;
- Offering school-supported diagnostic testing for children and staff with symptoms or who have been exposed to COVID-19 at school;
- Masking at all times in nurse offices/spaces; and
- Maintaining the capacity for screening testing during outbreaks or surges.
Extra Precautions for Those at Higher Risk of Getting Sick

Child care programs should also consider the needs of people who are at risk for getting very sick with COVID-19, or who have family members at risk for getting very sick with COVID-19, in order to provide the critical protection necessary for in-person learning.

Some children and staff may need additional protections to ensure they can remain safely in the classroom. When considering the communities’ specific needs, programs may consider:

- Following isolation and quarantine guidance for high-risk congregate settings, which includes recommendations of a 10-day period for isolation;
- Mask-wearing by people who are immunocompromised or at risk for getting very sick with COVID-19 at medium and high COVID-19 Community Levels;
- Mask-wearing by people who spend time indoors with others who are at risk for getting very sick with COVID-19, even when the COVID-19 Community Level is not high; and
- Screening testing at all COVID-19 Community Levels to reduce transmission and improve health outcomes.

Students with immunocompromising conditions or other conditions or disabilities that increase risk for getting very sick with COVID-19 should not be placed into separate classrooms or otherwise segregated from other students.
COVID-19
Symptoms, Infectious Period, Isolation & Managing Exposure
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

cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html
Responding to Children and Staff with Symptoms

COVID-19 symptom protocols should be included in existing child care illness policies. Child care programs maintain the ability to choose the best COVID-19 symptom policy for their community.

Children and staff who come to child care with symptoms or develop symptoms while in care should:

- Be asked to wear a well-fitting mask while in the building (if age 2 and older); and
- Get tested for COVID-19 at child care or sent home and encouraged to get tested.
  - If the test result is positive, isolate* and send children and staff home; or
  - If the test result is negative, use clinical judgment to decide how to respond to the symptoms in line with illness policies (e.g., children and staff who have fevers or are vomiting should be sent home).
- Masks should be worn at all times in nurse offices/spaces.

*Child care programs should establish a flexible space which can be used for isolation when needed.
Isolation and Infectious Periods

- **Isolation** is for the ill or infected:
  - Isolation separates individuals who are infected with COVID-19 from other people.
  - People in isolation should stay home and separate from household members as much as possible.
  - The duration of isolation depends on whether the individual is symptomatic or asymptomatic and/or immunocompromised.

- **Symptomatic Cases are infectious:**
  - Two (2) days prior to symptom onset until up to 10 days after symptom onset.

- **Asymptomatic Cases are infectious:**
  - Two (2) days prior to testing (the date the swabbing was conducted) until up to 10 days after the date of testing.

* Use the [CDC’s Isolation and Quarantine Calculator](https://www.cdc.gov/coronavirus/2019-ncov/downloads/isolation-calculator-calculator.pdf) to help determine duration of isolation.
Isolation Guidance

People who test positive for COVID-19 should isolate at home for at least 5 full days after the date of their first positive diagnostic test (asymptomatic) or when symptoms first appeared (symptomatic).

• After day 5, they can leave isolation if:*
  • They are fever-free for at least 24 hours without use of fever-reducing medicine and COVID-19 symptoms have improved or are improving;
  • Wear a high-quality mask around others, even at home (age 2 and older), through day 10; and
  • Avoid being around people who are immunocompromised or at high risk for severe disease.

• *If a mask is unable to be worn, the individual should isolate at home for a full 10 days.

• People who are immunocompromised or experiencing moderate or severe illness should isolate:
  • At least 10 full days have passed since symptoms first appeared or the date of their first positive diagnostic test and they have consulted a healthcare provider; and
  • At least 24 hours have passed since last fever without fever-reducing medications; and
  • Symptoms have improved.

• People who have COVID-19 symptoms recur or worsen, should isolate again and consult a healthcare provider with any questions about the symptoms or when to end isolation.
Removing Masks After Isolation

People who have access to antigen tests may consider using them after 5 full days of isolation and when they feel better in order to remove their mask before 10 full days.

- People may remove their mask before day 11* if they get two negative antigen tests in a row 48 hours apart with the first test on day 6, at the earliest:
  - If the antigen test results are negative, they may remove their masks around others from day 8, at the earliest;
  - If the antigen test results are positive, they may still be infectious and should continue wearing a mask and wait at least 48 hours before taking another test.
    - People could choose to continue taking antigen tests at least 48 hours apart until they have two negative test results in a row.
    - This may mean they should continue wearing a mask and testing beyond day 10.

* This strategy may be considered by people who are unable to mask in order to return to child care before 10 full days.
Managing Exposure to COVID-19

Regardless of vaccination status or previous infection, all children and staff who were exposed to COVID-19 should follow recommendations to prevent transmission. Programs have the flexibility to decide how to manage program-based exposures.

• All children and staff, regardless of vaccination status or previous infection, who were exposed to COVID-19 should:
  • Monitor COVID-19 symptoms for 10 days;
  • Wear a well-fitting mask for 10 days (age 2 and older); and
  • Get tested after 5 full days.

• Programs may consider using serial antigen testing (at least 2 rapid antigen tests 48 hours apart during a 7-day period) or a Test to Stay approach to help keep children in person safely. Find more information on the CDC’s web page for school testing.

• Accommodations may be necessary for exposed people who cannot wear a mask or have difficulty wearing a well-fitting mask.

• Programs should decide how to manage exposures based on the protocols which work best for their communities while also considering the benefits of access to in-person care.

• Find more information about understanding exposure risks on the CDC’s web page.
State Support for Testing Supplies

Rhode Island will support child care programs with **free tests** through the Fall of 2022 while supplies last.

- Test supplies can be requested via the portal [here](#).
  - Tests may be used for symptomatic, post exposure, or screening testing.
  - RIDOH no longer recommends quarantine, which includes Test to Stay/Monitor to Stay. However, serial testing and symptom screening can be used as a proactive strategy to mitigate transmission after exposure.
  - Antigen self-tests may be used off-label for children younger than age 2. Please refer to slide 26 regarding off-label use.
- Rhode Island Association for the Education of Young Children (RIAEYC) will be in contact about getting the tests out to programs. Please call 401-739-6100 for support.
Outbreak Management
Extra Steps to Take During Outbreaks

Programs may consider additional strategies to reduce transmission during an outbreak.

- Programs should contact RIDOH for clinical support in managing an outbreak.

- Strategies that can help reduce transmission during an outbreak include:
  - Wearing well-fitting masks or respirators (age 2 and older);
  - Improving ventilation (for example moving group activities outdoors, opening windows and doors, using portable air filters);
  - Screening testing; and
  - Case investigation and contact tracing.
    - Although quarantine is no longer recommended by the CDC or RIDOH, serial testing and symptom screening can be used as a proactive strategy to mitigate transmission after exposure.

- Programs may also consider suspending high-risk activities during outbreaks.
Reporting Cases to the Child Care Team

- In order to help us follow up, when you’re reporting a positive case*, please send the following information to RIDOH.covidchildcare@health.ri.gov in a [send secure] email or report by phone to 401-222-8022.
  - Name and Date of Birth (DOB) of the positive case;
  - Testing date and test type (rapid, PCR, self-test);
  - Symptom onset date, if symptomatic, or note “asymptomatic”;
  - Positive case’s last date on site;
  - Name(s) of classroom impacted;
  - Number of students/staff exposed;
  - If you require more urgent follow up, please note in your email and leave the best phone number to reach you.

*Please continue to report all cases of COVID-19 in child care to RIDOH.
COVID-19 Testing
Types of Tests

RIDOH recommends program policies prioritize use of antigen tests, including self-test kits, because they are highly accessible. Pooled PCR testing remains a good option for large-scale screening testing.

- **Antigen tests** are rapid tests which produce accurate results in 15-30 minutes.
  - To detect infection, a negative antigen test should be repeated at least 48 hours apart.

- **Self-tests** are usually antigen tests that can be taken anywhere without being administered by a healthcare professional.
  - Multiple negative test results increase the confidence that you are not infected with the virus that causes COVID-19.
  - Self-tests may be used off-label for children younger than age 2. Please refer to slide 23 regarding off-label use.

- **Laboratory-processed tests**, such as PCR tests, are not recommended for regular infection control due to access challenges and longer processing times.
  - NAAT shouldn’t be used if the someone tested positive in the last 90 days.
How to Get Tested for COVID-19 in Your Community

There are many ways to get tested for COVID-19 in Rhode Island. Find the location most convenient for you at covid.ri.gov/testing.

Child care participants are encouraged to get tested as needed through:

- Testing at their child care program;
- Health Care Provider, Primary Care Provider, and Pediatrician;
- Respiratory Clinics or Urgent Care Centers;
- Retail Pharmacies (e.g., CVS, Walgreens, etc.);
- There are places in Rhode Island that offer free testing for people who don’t have insurance. Federal programs, like the Increased Community Access to Testing (ICATT) Program or the Test to Treat Program offer free testing for everyone.
How to Test for COVID-19 at Home

- Self-tests are available at local pharmacies and online retailers.

- The US Food and Drug Administration (FDA) has not approved/authorized over-the-counter rapid antigen test for use in children younger than age 2. However, off-label use of antigen self-test kits may be used for children younger than age 2 for post-exposure, surveillance, and symptomatic testing. Parents or guardians can administer self-tests themselves per the manufacturer instructions and check in with their pediatricians for more information.

- Find more information about what to do when using a self-test at home at portal.ri.gov/s/self-test.

- Videos on how to accurately and safely perform a self-test swab kit is available here.

- Positive self-test results should be reported to RIDOH at portal.ri.gov/covidtestresults.
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 and the 401Health app.

• What you need to access your test results:
  • Name;
  • Date of Birth; and
  • Date of Testing Appointment.

• Note: You need to include a valid cell phone number or email address when you schedule the appointment in order to access results in the portal.

• COVID-19 Test Result Portal User Guide is available if you need assistance.

• If you were tested at a medical office, retail pharmacy, your workplace, or in school, contact the location where you were tested for a copy of your result if you cannot access your results through the portal.
COVID-19 Vaccination
COVID-19 Vaccine

Stay healthy and learning in person by staying up to date with your COVID-19 vaccine.

• Everyone (6 months and older) should stay up to date with their COVID-19 vaccines. This means getting all recommended COVID-19 vaccines, including a booster dose when eligible:
  • Find COVID-19 vaccine recommendations by age in this chart and more specific clinical guidance in the CDC’s Interim Immunization Schedule.
  • A new bivalent COVID-19 vaccine is expected to be authorized as a booster for Fall 2022.
  • Please find information on hosting a COVID-19 vaccination clinic at your program here.
• Please visit RIDOH’s website for other COVID-19 Vaccine Frequently Asked Questions.
COVID Vaccines Authorized for Children 6 Months and Older

- Find important information about COVID-19 vaccine for children 6 months to 4 years old in this one-pager.
- Most healthcare providers including federally qualified health centers offer COVID-19 vaccinations to children 6 mos. to 18 years as of June 2022.
  - Most pharmacies will vaccinate children as young as 3.
  - CVS Minute Clinics will vaccinate children as young as 18 mos.
  - East Bay Health Center (East Providence) will accept non-patients 6 months and older. Thundermist (Wakefield, West Warwick, Woonsocket) will accept non-patients 12 months and older.
  - People who want to get vaccinated or boosted should call their healthcare providers or use other options available at C19VaccineRI.org, such as retail pharmacies, and Vaccines.gov.
Additional Resources for Administrators, Teachers, Parents/Guardians, and Children
Dear Parents and Guardians of [name of program],

On [date], our program was notified that a person in the [name of classroom] classroom tested positive for COVID-19. Your child was exposed to the person who tested positive. The last day of exposure was [date].

- According to our sick policy, children and staff that were exposed to someone with COVID-19 should [insert COVID-19 sick policy] (*insert specifics to policy decision (i.e., must mask, must test on day 5, must pass symptom screening, etc.).

We reserve the right to implement protocols that are stricter than the RIDOH recommendations. These policies are communicated in our program's sick policy.

Your child should be tested on [insert test date], which is five full days from last exposure. Options for testing can be found at covid.ri.gov/testing or on page 21-23 of the Playbook.

Per RIDOH recommendations, anyone with symptoms of COVID-19 should stay home, notify the childcare program of their symptoms, contact their healthcare provider, and get tested for COVID-19. Symptoms of COVID-19 include cough, fever and chills, muscle and body aches, headache runny nose, sore throat, nausea or vomiting, diarrhea, fatigue, and recent loss of taste or smell. For information about COVID-19, visit: https://health.ri.gov/covid/.

Sincerely,

[name of program]
## RIDOH and DHS Resources

<table>
<thead>
<tr>
<th>Resource</th>
<th>Source</th>
<th>Overview of contents</th>
<th>Link to access</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child care guidance from the CDC</td>
<td>CDC</td>
<td>Operational guidance for child care programs</td>
<td>Operational Guidance from CDC</td>
</tr>
<tr>
<td>DHS COVID-19 Information</td>
<td>Rhode Island Department of Human Services</td>
<td>Professional Development: Re-Opening Child Care/Reapertura de Cuidado Infantil</td>
<td>dhs.ri.gov/programs-and-services/child-care/child-care-providers</td>
</tr>
<tr>
<td>RIDOH COVID-19 Information for Parents, Schools, and Child Care</td>
<td>State of Rhode Island</td>
<td>Resources and links to materials for parents of children in school or child care</td>
<td>covid.ri.gov/public/parents-schools-and-child-care</td>
</tr>
<tr>
<td>Behavioral Health Emergency Plan for Youth &amp; Families</td>
<td>State of Rhode Island</td>
<td>Resources to support families in the event of a behavioral health emergency</td>
<td>Link to Behavioral Health Crisis Plan</td>
</tr>
</tbody>
</table>
Questions? Contact Us!

- **Email** the COVID-19 Child Care Team at [RIDOH.COVIDChildcare@health.ri.gov](mailto:RIDOH.COVIDChildcare@health.ri.gov):
  
  - Please leave a call-back number in your email.
  
  - The inbox is monitored during business hours only (Monday – Friday 8:30 a.m. – 4:30 p.m.) If you send a message after business hours, your message will be received the next business day.

- **Call** the COVID-19 info line at **401-222-8022**.