

## COVID-19 Exposure Management Plan Guidance in Early Care and Education Sites

Note: This document is frequently updated. Please check the date on the webpage for the most recent version.

**Recent Updates:** (Changes highlighted in yellow)

**12/19/2022**

- Updated recommendations on when close contacts who had a recent COVID-19 infection (i.e., within the past 90 days) and are asymptomatic should test after an exposure.

**10/27/2022**

- Reporting of individual cases of COVID-19 in the ECE setting is no longer required. Moving forward, any clusters of 3 or more linked cases within a 14-day period must be reported to Public Health immediately and no later than 1 business day.
- Clarified close contact definitions to incorporate CDPH's specifications for large indoor airspaces. In indoor airspaces greater than 400,000 cubic feet per floor, close contacts are individuals (staff and children) within 6 feet of the infected person for 15 minutes or more over a 24-hour period. In indoor airspaces that are 400,000 or fewer cubic feet (per floor), child close contacts are: 1) those who shared the same indoor airspace as the infected person for 15 minutes or more over a 24-hour period (preferred definition) or 2) those who were within 6 feet of the infected person for 15 minutes or more over a 24-hour period. For staff, identification of close contacts must use the shared airspace definition in indoor airspaces that are 400,000 cubic feet or less (per floor) as per Cal/OSHA guidelines.

A targeted public health response to contain COVID-19 exposures at a community-level can help maximize the impact of the Los Angeles County Department of Public Health (DPH) COVID-19 response.

Early Care and Education (ECE) Providers are trusted community partners that can help DPH improve the timeliness and impact of the Public Health response through rapid initiation of a COVID-19 Exposure Management Plan (EMP). Immediate implementation of an EMP after identifying a single case of COVID-19 at the ECE center can accelerate the ability to contain spread of COVID-19 and prevent that single case from becoming an outbreak at the site.

The steps for managing exposures to 1, 2, and 3 or more COVID-19 cases at ECE sites are described below and summarized in Appendix A. Because ECE Providers will vary in the level of resources available for COVID-19 exposure management, *required* steps are the minimum elements that must be included in the EMP. *Recommended* steps include optional elements for exposure management where center resources are sufficient.

Note that references to "centers", "settings" or "sites" apply to all childcare providers, including family childcare home providers. The word "case" is used to refer to the person associated with the ECE site who has COVID-19 infection. Where this document calls for actions on the part of the site towards the

case (such as providing instructions) the case should be understood to be the affected staff person or the parent (or caregiver/guardian) of the affected child. Additional resources for ECE Centers can be located in the [Early Care and Education COVID-19 Toolkit](#).

### Exposure Management Planning Prior to Identifying 1 COVID-19 Case at the ECE Site

- ❑ *Required:* A designated ECE Center COVID-19 Liaison who serves as the point of contact for COVID-19 safety protocols. The designee will ensure that staff, families, and children receive education about COVID-19 and serve as a liaison to DPH for sharing site-level information to facilitate public health action.
- ❑ *Required:* A plan for all children, employees, visitors, and household members of family child-care homes who (1) have symptoms consistent with COVID-19, (2) were exposed at the center, or (3) are at a center with an active public health investigation to have access to testing or be tested for COVID-19.
- ❑ *Required:* A plan to report all known COVID-19 hospitalizations and/or deaths among children or staff to DPH by sending a notification to [ACDC-Education@ph.lacounty.gov](mailto:ACDC-Education@ph.lacounty.gov).
- ❑ *Recommended:* ECE settings that choose to implement a symptom screening program are advised to apply DPH guidance on [Decision Pathways](#) for Symptoms and Exposures for persons who have not been tested yet for COVID-19 but screen positive for symptoms prior to entry or while at the ECE site.

### Exposure Management for COVID-19 Cases at the ECE Site

- ❑ *Required:* After identifying 1 confirmed COVID-19 case, ECE Provider instructs the case to follow Home Isolation Instructions for COVID-19 ([ph.lacounty.gov/covidisolation](http://ph.lacounty.gov/covidisolation)). NOTE: A confirmed COVID-19 case is an individual who has a positive COVID-19 test. Refer to [sample isolation instruction notification](#) (posted on [ph.lacounty.gov/EducationToolkit/ECE](http://ph.lacounty.gov/EducationToolkit/ECE)) for a model that can be adapted.
  - Children (of any age) and staff with COVID-19 can end isolation after Day 5\* and return to the facility on Days 6-10 ONLY if all of the following criteria are met: 1. A COVID-19 viral test\*\* collected on Day 5 or later is negative, 2. No fever for at least 24 hours without the use of fever-reducing medicine, and 3. Other symptoms are improving --or-- Isolation can end after Day 10 if no fever for at least 24 hours without the use of fever-reducing medicine.

\*For symptomatic children and staff, Day 0 is the first day of symptoms; Day 1 is the first full day after symptoms develop. For asymptomatic children and staff, Day 0 is the day the first positive test was collected; Day 1 is the first full day after the positive test was collected.

\*\*The test must be an FDA authorized viral test (e.g., PCR or Antigen test, including at-home tests). An antigen test is preferred for testing out of isolation.
  - NOTE: For staff, per Cal/OSHA COVID-19 Prevention [Emergency Temporary Standards](#) (ETS), employers are required to fulfill the following: inform all employees about how they can obtain testing, offer testing at no cost and during paid time, and provide testing in a manner that ensures employee confidentiality. To comply with the testing requirements of the ETS, an over-the-counter (OTC) COVID-19 test may be both self-administered and self-read if verification of the results, such as a time and date stamped photograph of the result or an OTC test that uses digital reporting with time and date stamped results, is provided. Additionally, staff may request masks and respirators from their employer at no cost to staff. See [Wear a Mask and Know your Rights](#) for more information.

- If a child meets the criteria to leave isolation after Day 5, those aged 2 years and older are **strongly recommended** to continue to wear a [highly protective mask](#) for 10 days after their positive test (or the first full day after their symptoms developed). Staff with COVID-19 are **required** to wear a highly protective mask in the workplace around others, except when eating or drinking, for 10 days after symptom onset (or, if no symptoms, 10 days after the positive test date).
  - NOTE: There are some people who should not wear a mask, such as children younger than 24 months, people with certain medical conditions or disabilities, and people instructed by their medical provider not to wear a mask. Children ages 2 to 8 should wear a mask only when under adult supervision. See [Who should not wear a mask](#) and [Special considerations for persons with communication difficulties or certain disabilities](#).
- ☐ **Required:** The ECE Center COVID-19 Liaison works to identify all persons at the center with an exposure to the confirmed positive case during the case's infectious period (close contacts).
- A case is considered to be infectious from 2 days before their symptoms first appeared until their isolation ends, as described in the Home Isolation Instructions for COVID-19 ([ph.lacounty.gov/covidisolation](http://ph.lacounty.gov/covidisolation)). A person with a positive COVID-19 test but no symptoms is considered infectious from 2 days before their test was taken until their isolation period ends.
  - Close Contact: Persons are considered to have been exposed to a case (close contact) during the case's infectious period if:
    - **In indoor airspaces that are 400,000 cubic feet or less per floor:** They shared the same indoor airspace at the center with the infected person (case) for a cumulative total of 15 minutes or more over a 24-hour period during an infected person's infectious period. This is the **preferred** definition to best mitigate additional transmission at the ECE site and is strongly recommended for identifying child close contacts in classrooms and similar sized indoor spaces. This shared indoor airspace definition must be used for identification of staff close contacts per Cal/OSHA ([COVID-19 Prevention ETS](#)).
    - Alternatively, ECE facilities may limit designation of child close contacts to children who were within 6 feet of the infected person for 15 minutes or more over a 24-hour period and may apply this definition in all settings, including classrooms.
    - **In indoor airspaces that are greater than 400,000 cubic feet per floor:** They were within 6 feet of the infected person (case) for a cumulative total of 15 minutes or more over a 24-hour period during the infected person's infectious period. This applies to both child and staff close contacts. NOTE: Spaces that are separated by floor-to-ceiling walls (e.g., offices, suites, break/eating areas separated by floor-to-ceiling walls) are considered distinct indoor airspaces.
- NOTE: Persons with an outdoor exposure at the ECE facility are not considered close contacts.
- ☐ **Required:** Persons who are identified to have had an exposure to a COVID-19 case at the site (close contacts) are notified by the ECE Provider of the exposure and provided with actions to take.
- Notifications can be done using an individual notification or a group notification method where individuals are notified of their exposure and actions to take. Refer to the COVID-19 Template Notification Letters for Early Care and Education Sites for sample templates that can be adapted for this notification (posted on [ph.lacounty.gov/EducationToolkitECE](http://ph.lacounty.gov/EducationToolkitECE)).
- If applying the within 6 feet of an infected person for 15 minutes or more over a 24-hour period definition for identifying child close contacts in indoor spaces that are 400,000 cubic feet or less

(e.g. classrooms or similar size settings), all other children who shared the same indoor airspace with the infected person for 15 minutes or more over a 24-hour period must be notified of a potential exposure and provided with the recommended actions to take. Refer to the COVID-19 Template Notification Letters for Early Care and Education Sites for sample templates that can be adapted for this notification (posted on [ph.lacounty.gov/EducationToolkitECE](http://ph.lacounty.gov/EducationToolkitECE)).

#### Actions for close contacts

- Asymptomatic close contacts are not required to quarantine; they may remain at the facility if they follow all [requirements for close contacts](#), specifically: (1) monitor for symptoms; (2) wear a [highly protective mask](#) around others indoors for those aged 2 years and older,\* except when eating, drinking, or napping for 10 days after the last date of exposure; (3) test with an FDA-authorized viral COVID-19 test (e.g., PCR or Antigen test, including at-home tests) within 3-5 days since the last date of exposure.\*\*
  - If applying the within 6 feet of an infected person for 15 minutes or more over a 24-hour period definition to identify child close contacts in indoor spaces that are 400,000 cubic feet or less (e.g. classrooms or similar size settings), all other children who shared in the same indoor space with the infected person for 15 minutes or more over a 24-hour period are also advised to: (1) monitor for symptoms; (2) wear a [highly protective mask](#) around others indoors for those aged 2 years and older,\* except when eating, drinking, or napping for 10 days after the last date of exposure; (3) test with an FDA-authorized viral COVID-19 test (e.g., PCR or Antigen test, including at-home tests) within 3-5 days since the last date of exposure.\*\*

\*NOTE: There are some people who should not wear a mask, such as children younger than 24 months, people with certain medical conditions or disabilities, and people instructed by their medical provider not to wear a mask. Children ages 2 to 8 should wear a mask only when under adult supervision. See [Who should not wear a mask](#) and [Special considerations for persons with communication difficulties or certain disabilities](#).

\*\*NOTE: Asymptomatic child/student and staff close contacts who were previously infected with SARS-CoV-2 within the last 90 days are exempt from [the post-exposure testing requirement](#) but must mask around others indoors for 10 days after the last date of exposure, for those aged 2 years and older. [Asymptomatic close contacts who recovered from recent COVID-19 infection are recommended to test 3-5 days after an exposure if their previous infection was more than 30 days ago \(i.e., date of first positive test was 31-90 days ago\). An antigen test, which includes at-home tests, should be used. If their previous infection was within the past 30 days \(i.e., first positive test was 1-30 days ago\), testing is not recommended. Refer to Instructions for Close Contacts for COVID-19 for details.](#)

- **Infants and children under 2 years of age (or less than 24 months) should not wear a mask.** Children under 2 years or age who are close contacts and asymptomatic may remain at the facility if they are monitored for symptoms and test with an FDA-authorized viral COVID-19 test within 3-5 days since the last date of exposure.
- For children aged 2 years and older who have a mask exemption\* and have been exposed, they should wear a face shield with drape at the bottom if their condition allows. For children aged 2 years and older who cannot tolerate a mask or a face shield with drape at the bottom, they may remain on site if 1) they remain asymptomatic, 2) monitor for symptoms for the 10 days after last exposure, and 3) test for COVID-19 twice during the 10 days after last exposure, once during days 3-5 and once during days 6-9. Children aged 2 years and older



who cannot mask after exposure and cannot meet these requirements must remain at home until after Day 10 after last exposure.

\*Individuals aged 2 years and older may be exempt from wearing a mask for the following reasons (refer to [Guidance for Early Childhood Education Providers Requirements and Best Practices](#) for additional information):

- Persons who are hearing impaired, or communicating with a person who is hearing impaired, where the ability to see the mouth is essential for communication.
  - Persons with a medical condition, mental health condition, or disability or whose medical provider has determined that it is unsafe for them to wear a mask, may file for an exemption with their ECE Provider. A certification from a state licensed health care provider attesting that the child has a condition or disability that precludes them from wearing a mask safely will be accepted as proof of exemption. The following licensed health care professionals may provide such attestations: Medical providers including physician (MD or DO), nurse practitioner (NP), or physician assistant (PA) practicing under the authority of a licensed physician; and licensed mental and behavioral health practitioners including Clinical Social Worker (LCSW), clinical psychologist (Psy.D.), Professional Clinical Counselor (LPCC), or Marriage and Family Therapist (LMFT).
- If symptoms develop, test using an FDA-authorized viral COVID-19 test and stay home. If the test is positive, follow Home Isolation Instructions for COVID-19 ([ph.lacounty.gov/covidisolation](http://ph.lacounty.gov/covidisolation)).
  - Staff who are close contacts exposed at work must follow the guidance outlined in Cal/OSHA COVID-19 Prevention [Emergency Temporary Standards](#). Please refer to Cal/OSHA's [COVID-19 Emergency Temporary Standards Frequently Asked Questions](#) actions after a COVID-19 exposure.
  - Staff may request masks and respirators from their employer at no cost to staff. See [Wear a Mask and Know your Rights](#) for more information.
  - For staff, per Cal/OSHA COVID-19 Prevention [Emergency Temporary Standards](#) (ETS), employers are required to fulfill the following testing requirements: inform all employees on how they can obtain testing, offer testing at no cost and during paid time, and provide testing in a manner that ensures employee confidentiality; to comply with the testing requirements of the ETS, an over-the-counter (OTC) COVID-19 test may be both self-administered and self-read if verification of the results, such as a time and date stamped photograph of the result or an OTC test that uses digital reporting with time and date stamped results, is provided.
- Required:** ECE facilities are required to have a plan to facilitate COVID-19 response testing for persons who have an exposure at the ECE facility. Staff and children who are tested must inform the ECE facility of the test results. Testing resources include ECE Testing Programs, Employee Health Services or Occupational Health Services, Personal Healthcare Providers, LA City and County Testing Sites: [covid19.lacounty.gov/testing](http://covid19.lacounty.gov/testing), and [Community-Based Testing Sites](#) (local health centers and pharmacies). Individuals who need assistance finding a medical provider can call the LA County Information line 2-1-1, which is available 24 hours 7 days a week.
- Required:** ECE Center COVID-19 Liaison must notify Public Health of all clusters of 3 or more confirmed cases of COVID-19 in a classroom, office, or other pre-defined or identifiable group (e.g., cohort), who were on site at any point within the 14 days prior to illness onset date. The illness onset date is the first date of COVID-19 symptoms or the COVID-19 test date, whichever is earlier.

- All ECE-associated COVID-19 clusters should be reported online through the secure web application the Shared Portal for Outbreak Tracking (SPOT): [https://spot.cdph.ca.gov/s/?language=en\\_US](https://spot.cdph.ca.gov/s/?language=en_US). If there are multiple cases to report, facilities can submit their reports using the “Bulk Upload Template” located within the SPOT Portal. All clusters with information for the cases should be reported to Public Health immediately, and no later than 1 business day of being notified of the third, or last, case in the cluster.
  - ECE Providers that need assistance on COVID-19 cluster reporting or other exposure management guidance can call the Education Sector COVID-19 Case Reporting Call Center, Monday through Friday from 8:00AM to 5:00PM. ECE administrators that do not have the Call Center number should contact [ACDC-Education@ph.lacounty.gov](mailto:ACDC-Education@ph.lacounty.gov).
- ☐ *Required:* ECE Provider consults with Public Health to determine whether the 3 or more cases within the reported cluster are epidemiologically linked, meaning that the affected individuals were present at some point in the same setting during the same time period while one or all of them were infectious.\* Determination of epidemiological links among cases may require further investigation to assess exposure history and identify all possible locations and persons that may have been exposed to the case(s) while they were infectious at site.
- \*A case is considered to be infectious from 2 days before symptoms first appeared until isolation ends or if no symptoms, from 2 days before their first positive test until isolation ends.
- Epidemiologically linked cases include persons with identifiable connections to each other such as sharing a physical space (e.g., in a classroom, ECE event, office, or transportation), indicating a higher likelihood of linked spread of disease in that setting rather than sporadic transmission from the broader community. If epidemiological links exist, Public Health will advise the ECE Provider on important steps to take and communications to children, their families, and employees on precautions to take to prevent further spread at the site, including implementation of site- specific interventions for infection control.
  - Public Health will determine if the outbreak criteria have been met: at least 3 confirmed cases of COVID-19 within a 14-day period of each other in a specified group\* with members who are epidemiologically linked, do not share a household, and are not a close contact of each other outside of the campus.
    - If outbreak criteria are not met, DPH will advise the ECE Provider to continue with routine exposure management.
    - If outbreak criteria are met and DPH recommends an outbreak response, DPH will notify the ECE Provider that an outbreak investigation has been activated and a public health investigator will communicate directly with the site to coordinate the response.

\*Specified group include persons that share a common membership at the site (e.g., classroom, event, transportation, and office). Epidemiological links require the infected persons to have been present at some point in the same setting during the same time period while infectious.

## APPENDIX A: Steps for Managing Exposures to COVID-19 Cases at an ECE Site

<b>1 case</b>	<ol style="list-style-type: none"><li>1) <i>Required:</i> ECE Provider instructs the case to follow Home Isolation Instructions.</li><li>2) <i>Required:</i> ECE Provider identifies close contacts at the ECE site. ECE Providers can contact Public Health for assistance with identification of close contacts by emailing <a href="mailto:ACDC-education@ph.lacounty.gov">ACDC-education@ph.lacounty.gov</a> or by calling the Education Sector COVID-19 Case Reporting Call Center.</li><li>3) <i>Required:</i> ECE Provider notifies ECE contacts of exposure.</li></ol>
<b>2 cases</b>	<ol style="list-style-type: none"><li>1) <i>Required:</i> ECE Provider notifies cases to follow isolation instructions.</li><li>2) <i>Required:</i> ECE Provider identifies and notifies ECE contacts of exposure(s).</li><li>3) <i>Recommended:</i> If the 2 cases occurred within 14 days of each other, ECE Provider can consult with DPH to determine whether the cases have epidemiological links. If epidemiological links exist, ECE site implements additional infection control measures.</li></ol> <p>ECE providers can call the Education Sector COVID-19 Case Reporting Call Center or email <a href="mailto:ACDC-Education@ph.lacounty.gov">ACDC-Education@ph.lacounty.gov</a> for assistance in determining whether cases have epidemiological links.</p>
<b>3+ Cases</b>	<ol style="list-style-type: none"><li>1) <i>Required:</i> ECE Provider notifies cases to follow isolation instructions.</li><li>2) <i>Required:</i> ECE Provider identifies and notifies ECE contacts of exposure(s).</li><li>3) <b>Required: If a cluster of 3 or more cases in a classroom, office, or in a pre-defined group (i.e., cohort) who were on campus at any point within the 14 days prior to illness onset, the ECE Provider immediately notifies DPH by reporting online at: <a href="https://spot.cdph.ca.gov/s/?language=en_US">https://spot.cdph.ca.gov/s/?language=en_US</a>.</b></li><li>4) <i>Required:</i> DPH determines if the outbreak criteria have been met. If a DPH outbreak investigation is activated, a public health investigator will contact the ECE site to coordinate the outbreak investigation</li></ol>