



Outbreak Response Protocols: Child Care

Guidance for COVID-19 outbreak response in child care settings

Version 1.8: MARCH 24, 2021

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Summary of Changes to the Playbook

Version 1.4 (December 15, 2020)

- Clarifying the infectious period for a person with COVID-19
- Clarifying the definition of a close contact
- New RI state guidance on quarantine for close contacts
- Reporting probable cases
- K-12 and child care test scheduling service Information
- Answers to frequently asked questions

Summary of Changes to the Playbook

Version 1.5 (January 20, 2021)

- COVID-19 Close Contact Calculator
- Testing of all close contacts
- Clarification of quarantine for household members given new guidance
- Testing at a K-12 Site for Symptomatic Individuals
- Frequently asked questions about rapid and PCR tests
- Clarification that individuals who test positive do not need a negative test to return to child care –
- Answers to common questions about classmates & siblings of children on quarantine

Version 1.6 (February 3, 2021)

Updated state quarantine guidance for domestic and international travel

Summary of Changes to the Playbook

- Version 1.7 (March 11, 2021)
 - Clarification of Isolation and Quarantine for Household Members – Pages 23-26
 - New Quarantine Guidance for Individuals Who Have Been Fully Vaccinated Against COVID-19 – Pages 30-35
 - New Exemption from Quarantine After Domestic Travel – Page 47
 - New Exemption from Quarantine After International Travel – Page 49
- Version 1.8 (March 24, 2021)
 - Update to guidance on quarantine exemptions for fully vaccinated individuals: Removal of the 90-day limit – Page 32

Letter to Child Care Providers

We know reopening in the era of COVID-19 has not been easy and we hope this Child Care COVID-19 Outbreak Response Playbook will help you navigate the new normal when a child or staff member gets sick. While reviewing this Playbook, please keep in mind the following:

- The Playbook begins with quick tips followed by more detailed protocols for specific scenarios. It ends with FAQs and additional resources.
- As the COVID-19 pandemic continues, new science will emerge, and guidance may change. The Department of Human Services (DHS) and the Rhode Island Department of Health (RIDOH) will convene on an ongoing basis to review the Playbook, its protocols, and the implementation challenges and successes. Updates to the Playbook will be communicated by email to all licensed child care providers with clear notation on edits/additions/redactions.
- Because each case is unique, once a child or staff member becomes symptomatic or tests positive, reach out to RIDOH for guidance. RIDOH will assess each situation and provide recommendations on a case-by-case basis.
- Recommendations from RIDOH will clearly indicate whether the follow-up is required or recommended. Child care providers are also business owners and can institute more stringent requirements in an effort to prevent COVID-19 transmission, as long as it's reflected in the program's Parent/Family Agreement and adheres with CCAP Rules and Regulations (if serving families in the CCAP.)
- RIDOH and DHS are here to answer questions and provide guidance to help you through this historic pandemic.

RIDOH COVID-19 Health Information Line: 401-222-8022

DHS: 401- 462-3009 (8:30AM-4PM, Monday-Friday) DHS.ChildCareLicensing@dhs.ri.gov

Purpose of Playbook

- This Playbook provides guidance on how to respond if a child or staff member is exhibiting symptoms of COVID-19 or tests positive for COVID-19.
- The goal of this Playbook is to provide visibility into the process child care providers will engage in with RIDOH in different scenarios. The protocols included in this playbook are in line with RIDOH's overarching approach with child care providers to date.
- The Playbook does not replace direct engagement with RIDOH, but rather gives an overview of what will occur throughout that engagement process.
- The information shared in this document assumes that child care providers and parents/guardians are **complying** with current [RIDOH guidelines](#), [DHS COVID-19 Child Care Regulations](#) and [CDC guidance](#).

Please note that the material in this document may evolve as new guidance is released.

Use of Playbook

- Please keep this Playbook in an area which is **easily accessible** for reference.
- This Playbook is intended **to share general best practices** which can be used by **all**; it does not address unique, situation-specific questions that you may have.
- This Playbook is a reference guide to complement, but not replace, conversations with RIDOH.
- In the event of an outbreak, in addition to this resource, **RIDOH and DHS Child Care Licensing Unit will support you throughout the process.**

Please note that the material in this document may evolve as new guidance is released.

Quick Tips



Child Care Settings

Glossary

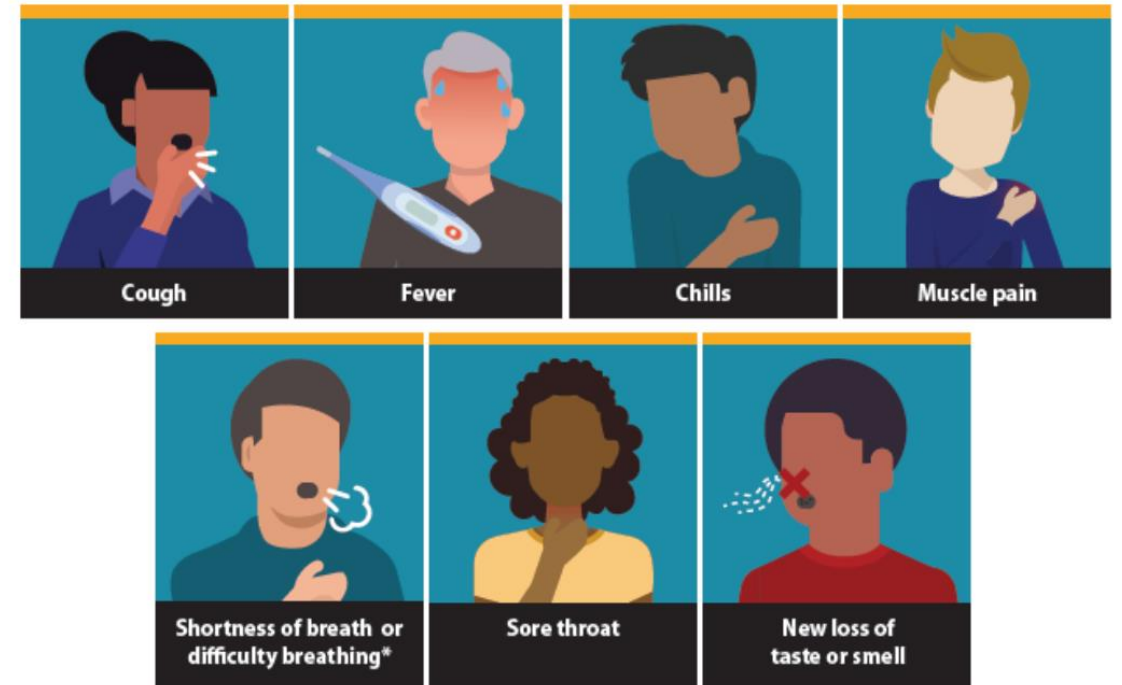
Term	Definition
Asymptomatic	Refers to a person who does not have any symptoms
Close contact	Refers to a person who has been within six feet of an infected person (with or without a face mask) for a cumulative 15 minutes over a 24-hour period OR has had unprotected direct contact with secretions or excretions of a person with confirmed COVID-19 during the infectious period
Community transmission	Occurs when individuals acquire COVID-19 through contact with someone in their local community, rather than through travel to an affected location
Confirmed case	A person who has tested positive for SARS-CoV-2 infection (the virus that causes COVID-19)
Consistent/stable group	Each staff/child will be placed into “consistent/stable groups” of no more than 20 people and each group must physically distance themselves from other consistent groups. Child care centers may have multiple consistent/stable groups, while family child care homes only have one consistent/stable group
Contact tracing	Process of identifying individuals who may have had close contact (see definition above) with someone who tested positive for COVID-19
COVID-19	Abbreviation for the disease caused by the novel coronavirus SARS CoV-2

Glossary

Term	Definition
Incubation Period	The time between exposure to an infection and the appearance of first symptoms. The virus that causes COVID-19 has an incubation period of 2-14 days
Isolation	Process of separating individuals who are infected with COVID-19 from others
Probable case	Individual who has at least two of the following symptoms: fever, chills, rigors, myalgia, headache, sore throat, new olfactory and taste disorder(s), OR at least one of the following symptoms: cough, shortness of breath, or difficulty breathing
Quarantine	Process of separating and restricting the movement of individuals who were in close contact with someone who tested positive or had symptoms of COVID-19
RIDOH	Rhode Island Department of Health
Screening	Checking individuals for symptoms of COVID-19 verbally and by using temperature checks
Symptomatic individual	Individual who is showing the symptoms or signs of COVID-19 according to CDC guidelines

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



Probable Case of COVID-19

CDC defines a probable case as an individual who meets the following criteria:

One of the following symptoms:

- Cough
- Shortness of breath
- Difficulty breathing
- New loss of taste
- New loss of smell

or

Two of the following symptoms:

- Fever
- Chills (rigors)
- Muscle aches (myalgias)
- Headache
- Sore throat
- Nausea or vomiting
- Diarrhea
- Fatigue
- Congestion or runny nose

When to Call for Emergency Care

A person with the following symptoms needs emergency medical attention. Call 911 and notify the operator that you are seeking care for someone who may have COVID-19:

- Difficulty breathing
- Persistent pain or pressure in chest
- New confusion
- Inability to wake or stay awake
- Bluish lips or face

*This list does not reflect all possible symptoms requiring emergency care.

What Is the Infectious Period for COVID-19?

Symptomatic Cases

- Two (2) days prior to symptom onset until 10 days after symptom onset.

Asymptomatic Cases

- Two (2) days prior to testing (the date the swabbing was conducted) until 10 days after the date of testing.
- In some cases where the case's exposure to COVID-19 is known, RIDOH may consider the infectious period to be more than two days prior to the test date.

How Is a Close Contact Defined?

Close Contact

- Individual who has been within six feet of a person with COVID-19 (with or without a face covering) for 15 minutes over a 24-hour period during the infectious period,
 - i.e., Three, five-minute interactions during the day.
- Individual who has had unprotected direct contact with secretions or excretions of a person with confirmed COVID-19 during the infectious period,
 - i.e., Infected person coughed directly into someone's face.

Quarantine Guidance for Close Contacts

RIDOH Quarantine Guidance for Close Contacts

On December 2, the CDC released updated quarantine guidance for close contacts.

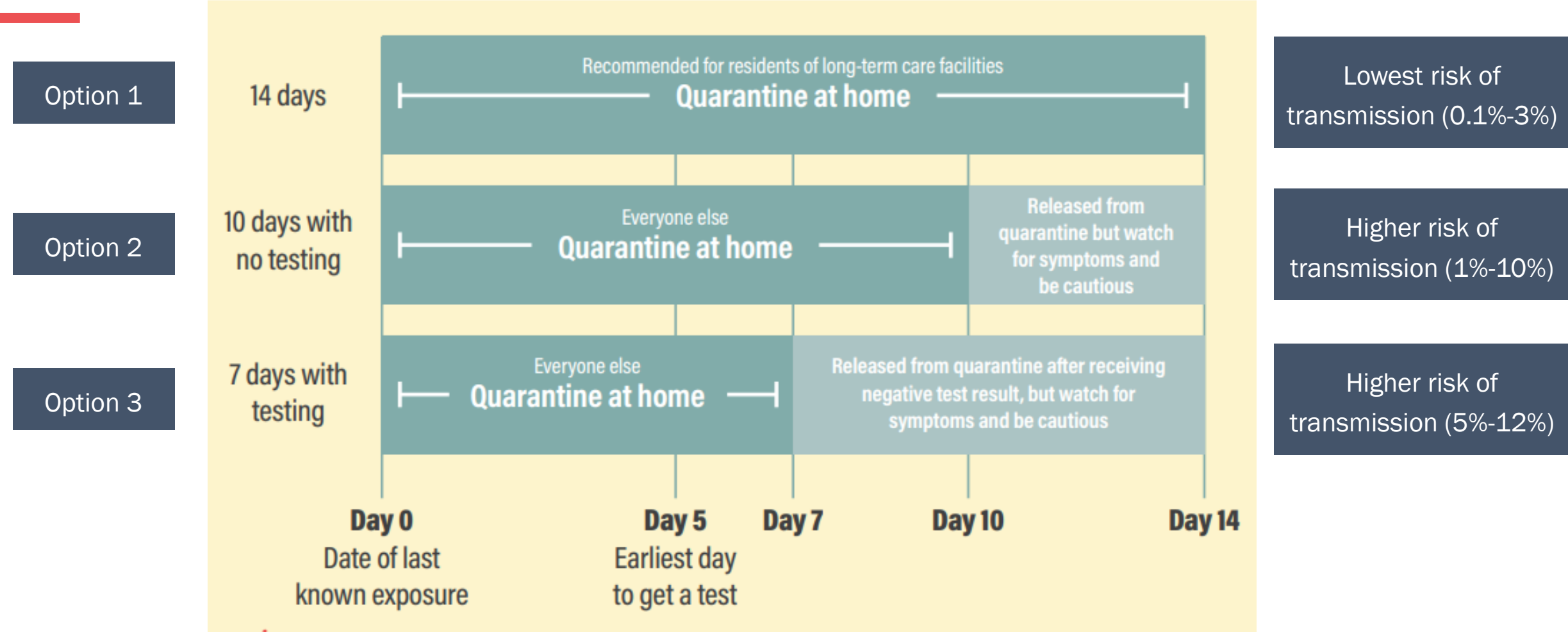
As of December 10, there are now three quarantine options for close contacts in Rhode Island:

1. Quarantine for 14 days since the last date of exposure (0.1%-3% risk of spreading the virus to others).
2. Quarantine for 10 days since the last date of exposure and if no symptoms have developed. May return to child care on day 11 after exposure (1%-10% risk of spreading the virus to others).
3. Quarantine for seven days since the last date of exposure, have a negative test result from a test (rapid or PCR) taken at least five days after the exposure, and if no symptoms have developed. May return to child care on day 8 after exposure (5%-12% risk of spreading the virus to others).

If you have been directed to quarantine, **watch for symptoms for the full 14 days**. If you develop symptoms of COVID-19, isolate at home, call your healthcare provider, and get a COVID-19 test.

Please see Page 19 for guidance on how child care providers should operationalize the new guidance

Illustration of New Quarantine Guidance



Please note that residents of long-term care facilities who have been in close contact with a positive case must quarantine for 14 days. Child care is not considered a long-term care facility.

Child Care Implementation and Guidance

- Prior to December 10, the CDC and RIDOH only offered one quarantine option for close contacts: a 14-day quarantine. **This 14-day quarantine is still the gold standard for ensuring effective control of COVID-19 spread.**
- Recognizing local circumstances and resources where a full 14-day quarantine may be challenging, the CDC provided options for quarantine based on the current data.
- RIDOH and DHS recognize the importance of developing consistent guidance and support to child care providers during this pandemic. Consistency across settings is critical to ensuring RI families understand and appropriately implement quarantine guidelines to prevent the spread of COVID-19.
- **Recommendation One (for children):** RIDOH and DHS recommend child care providers adopt Option Two, a 10-day quarantine for close contacts for all families in their care. Testing is encouraged for all close contacts on or after day 5 of quarantine.
- **Recommendation Two (for staff):** Programs that have struggled with staffing may elect to accept a seven-day quarantine from teachers who can provide a negative test on day 5 or later.

Calculating Options for End of Quarantine

- Need help determining quarantine dates for the three different options?
- RIDOH has created a [COVID-19 Close Contact Quarantine Calculator](#):
 - Click link above, and scroll down to the middle of the page to download the calculator

What to do if you or a close contact has COVID-19

- Learn about Rhode Island's close contact quarantine requirements.

[Requirements](#) [FAQ](#)

- To calculate the length of quarantine for close contacts, use this [COVID-19 Close Contact Quarantine Calculator](#).

Testing of ALL Close Contacts

RIDOH recommends ALL close contacts of people with COVID-19 get tested (with an antigen or PCR test) on day 5 of quarantine or later.

- The purpose of testing close contacts is to identify those who are infected and asymptomatic.
- If opting for the seven-day quarantine option, a test on day 5 of quarantine or later is required.
- If opting for the 14-day or 10-day quarantine option, a test on day 5 of quarantine or later is not required but recommended.

Clarification of Quarantine and Isolation Within the Household

Isolation Within the Household

- A person in isolation is considered separated from others while in isolation within the household if
 - The isolated person remains in the household but stays in their own bedroom at all times and uses their own bathroom without sharing any common areas with others in the household;
 - The isolated person remains in the household but on a completely separate floor or living area at all times; or
 - Either the isolated person or the other household members temporarily move out of the household while the case is in isolation.

Quarantine for Household Members Who Cannot Separate from a Person in Isolation Within the Household

- Household contacts need to quarantine while the individual with COVID-19 (infected person) is infectious (at least 10 days after symptom onset) and then start their quarantine.
 - The last day of isolation for the person with COVID-19 is Day 0 for household members.
- Household members have three options for quarantine starting on Day 0:
 - **Option 1:** 14 days (total of 24 days in quarantine—released on day 25);
 - **Option 2:** 10 days (total of 20 days in quarantine—released on day 21); or
 - **Option 3:** Seven days with a negative test result on day 5 or later (total of 17 days in quarantine — released on day 18).

Quarantine for Household Members Who Can Separate from a Person in Isolation Within the Household

- Household members would start their quarantine from the date of last exposure to the infected household member (Day 0).
- Day 0 is the last day that household members and the infected household member shared a living space:
 - Spent time in the same rooms; or
 - Were in close contact (within six feet for at least 15 minutes during 24 hours).
- Household members have three options for quarantine starting on Day 0:
 - **Option 1:** 14 days (released on day 15);
 - **Option 2:** 10 days (released on day 11);
 - **Option 3:** seven days with a negative test result on day 5 or later (released on day 8).

Guidance for Individuals Positive for COVID-19 in the Last 90 Days

If a Person Had COVID-19 Infection in the Last 90 Days



- A person with a COVID-19 infection is thought to have a 90-day immunity to the virus.
- 90-day calculation
 - If **symptomatic** (had COVID-19 with symptoms), then start the 90-day count from the date of symptom onset (Day 0); or
 - If **asymptomatic** (had COVID-19 without symptoms), then start the 90-day count from the date of specimen collection (Day 0).
- A person with a positive COVID-19 test result in the last 90 days does not need to
 - Quarantine if identified as a close contact (even if the close contact is a household member of the infected individual); or
 - Quarantine after domestic or international travel.

Quarantine Exemption After **Infection** with COVID-19

After a COVID-19 **infection**, a person has presumed immunity if a new exposure is

- Within 90 days of date of symptom onset; or
- Within 90 days of date of positive test if asymptomatic.

Quarantine for close contacts	Exempt. Not required if close contact is asymptomatic; and Always monitor for symptoms for 14 days after exposure.
Quarantine for domestic or international travel	Exempt/Not required if close contact is asymptomatic; and Always monitor for symptoms for 14 days after exposure.
Asymptomatic testing	Not recommended within 90 days of infection. Exempt from work, school, or other asymptomatic surveillance testing.
Eligible populations	Applies to all people, including those whose <ul style="list-style-type: none">• Past infection was symptomatic or asymptomatic; and• Past infection diagnosed by either rapid test or PCR.



New Guidance

Quarantine Exemption After Vaccination for COVID-19

Updated March 24, 2021

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New: COVID-19 Vaccine and Immunity

When does a person have immunity after vaccination?

- It takes 14 days after the final recommended COVID-19 vaccination dose to have immunity from the virus.

How long does immunity last after COVID-19 vaccination? :

- We won't know how long immunity lasts after vaccination until we have more data on how well COVID-19 vaccines work in real-world conditions.
- The protection someone gains from having an infection (called “natural immunity”) varies depending on the disease, and it varies from person to person. Because this virus is new, we don't know how long natural immunity might last. Current evidence suggests that getting the virus again (reinfection) is uncommon in the 90 days after the first infection with the virus that causes COVID-19.

New: Quarantine Exemption for Fully Vaccinated Persons

Vaccinated persons with an exposure to someone with suspected or confirmed COVID-19 are not required to quarantine if they meet all of the following criteria:

1. Are fully vaccinated and it's been more than 14 days since getting the last recommended COVID-19 vaccination shot.
2. Have remained asymptomatic since the current COVID-19 exposure.

Note: On March 19, 2021, a [Rhode Island Executive Order](#) was released removing the 90-day limit on exemption for quarantine after vaccination.

Quarantine Exemption After **Vaccination** for COVID-19

After a person has completed **vaccination** for COVID-19, they are exempt from quarantine, if they

- Have received all recommended doses of a COVID-19 vaccine; and
- Are **>14 days** after receiving the last recommended dose of COVID-19 vaccine.

Quarantine for close contacts	Exempt, quarantine is not required if asymptomatic. Testing five to 10 days after exposure is highly encouraged; and Always monitor for symptoms for 14 days after exposure.
Quarantine for domestic or international travel	Exempt, quarantine is not required if asymptomatic. Testing five to 10 days after return from travel is highly encouraged; and Always monitor for symptoms for 14 days after exposure.
Asymptomatic testing	Asymptomatic testing is encouraged. The vaccine does not affect test results.
Eligible populations	Exemption applies to all individuals <u>except</u> vaccinated hospitalized patients and vaccinated residents in long-term care settings like nursing homes and assisted living facilities. Vaccinated hospitalized patients and long-term care facility residents must still quarantine for 14 days after close contact.

Summary of Exemptions from Quarantine

Quarantine Exemption Summary

	After COVID-19 infection: Presumed immunity for 90 days after infection	After COVID-19 vaccination: Presumed immunity >14 days after last vaccine dose
Quarantine for close contacts	Exempt, not required if asymptomatic. Monitor for symptoms for 14 days after exposure.	Exempt, not required if asymptomatic. Testing on Day 5-10 after exposure is encouraged. Always monitor for symptoms for 14 days after exposure.
Quarantine for travel domestic or international	Exempt. Not required if asymptomatic. Monitor for symptoms for 14 days after last exposure.	Exempt. Not required if asymptomatic. Testing on Day 5-10 after exposure is encouraged. Always monitor for symptoms for 14 days after exposure.
Asymptomatic Testing	Not recommended within 90 days of infection.	Allowed and encouraged.

Child Care Response Protocols

Return to Child Care

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Clearance Protocols for Children & Staff Members to Return to Child Care

Symptom	Is a Test Required to Return?
Cough (new)	Yes
Shortness of breath or difficulty breathing	Yes
New loss of taste or smell	Yes
Fever (temperature higher than 100.4° or feels feverish to the touch)	<p>Yes, if two or more of these symptoms.</p> <p>No, if only one of these symptoms.</p>
Chills	
Muscle or body aches	
Headache	
Sore throat	
Fatigue	
Congestion or runny nose (new)	
Nausea or vomiting	
Diarrhea	

If the PCR test is negative, a person can return when fever-free for 24 hours and symptoms improved (back to usual health). If the rapid or PCR test is positive, a person must isolate and can return when CDC guidance for release from isolation is met.

Protocol - Symptomatic Individual, Not a Probable Case

Situation	Isolation and quarantine protocol	Recommended testing protocol	Return to child care criteria
<p>Staff or child has symptom(s) of COVID-19 but <u>does not meet the CDC definition of a probable case</u></p>	<p>Symptomatic individual is isolated and sent home.</p> <p>No closure recommended for exposed classroom(s).</p> <p>No quarantine recommended for close contacts.</p>	<p>Advise symptomatic individual to seek medical advice and test if recommended by healthcare provider.*</p> <p>Some patients with COVID-19 have presented with only one mild symptom or atypical symptoms and patients or providers may prefer to test even when probable case definition is not met.</p> <p><i>*RIDOH may recommend testing for others in certain situations.</i></p>	<p>Attestation that documents one of the following (parent/guardian attests for a minor):</p> <ol style="list-style-type: none"> 1. Not tested, has been fever free for 24 hours and symptoms improved (back to usual health); 2. Tested negative for COVID-19, has been fever free for 24 hours and symptoms improved (back to usual health); 3. Tested positive for COVID-19 and has since met RIDOH guidelines for ending isolation.

Protocol - Probable Case

Situation	Isolation and quarantine protocol	Recommended testing protocol	Return to child care criteria
<p>Staff or child is a probable case (See Page 13)</p>	<p>Symptomatic individual is isolated and sent home.</p> <p>Household contacts and roommates must quarantine pending the probable case COVID-19 test result.</p> <p><i>Quarantine of additional close contacts pending probable case test results may be advised by RIDOH when:</i></p> <ul style="list-style-type: none"> • <i>One or more confirmed cases have occurred in the same stable group in the last 14 days; or</i> • <i>The probable case reports loss of taste or smell; or</i> • <i>The probable case had a known exposure to a positive case in the last 14 days.</i> 	<p>Advise symptomatic individual to seek medical advice and obtain a COVID test.</p> <p><i>RIDOH may recommend testing for others in certain situations.</i></p>	<p>Attestation from a parent or guardian that documents one of the following:</p> <ul style="list-style-type: none"> • Tested negative for COVID-19 (with a PCR test), has been fever free for 24 hours hours without use of fever-reducing medications, and symptoms improved (back to usual health); or • Tested positive for COVID-19 (with a rapid test or PCR test) and has since met CDC/RIDOH guidelines for ending isolation.

Reporting Probable Cases

Probable cases are individuals who meet the **symptom criteria** on Page 13.

- If a child or staff member in your program is a probable case, please follow the **probable case protocol**:
 - The person should be tested and isolate at home until COVID-19 test results have been received. Household members must quarantine pending test results.
- Effective November 19, 2020, child care providers no longer need to report all probable cases to RIDOH. Instead, you should report a **probable case** (a person who meets the symptom criteria on Page 13) who also meets one or more of the following criteria:
 - The probable case has loss of taste or smell.
 - The probable case has had contact with a person who tested positive for COVID-19 in the last 14 days.*
 - The probable case is in the same stable group as a person who tested positive.*
- RIDOH may advise quarantine for child care contacts for these special probable cases while awaiting test results. **Close contacts who have no symptoms are not probable cases. These do not need to be reported.**
- To report a probable case, you can send a secure message to RIDOH.COVIDChildCare@health.ri.gov.

Protocol – Positive Case

Situation	Isolation and quarantine protocol	Recommended testing protocol	Return to child care criteria
<p>Staff or student tests positive</p>	<p>Person testing positive is isolated per CDC/RIDOH guidelines.</p> <p>Close contacts are quarantined per CDC/RIDOH guidelines.</p>	<p>Close contacts in quarantine should self-monitor for symptoms for 14 days and seek medical advice as needed. RIDOH recommends all close contacts get tested on day 5 of quarantine or later.</p> <p>Close contacts who have tested positive in the past 90 days are not required to quarantine.</p>	<p>Individuals who test positive must meet the CDC/RIDOH guidelines for ending isolation: RIDOH recommends the <u>symptom-based strategy</u> for ending isolation. Isolate until</p> <ul style="list-style-type: none"> • Fever free for 24 hours without use of fever-reducing medications; <u>and</u> • Symptoms have improved; <u>and</u> • 10 days since symptoms first appeared (20 days if severely immunocompromised). <p>OR Time-based approach if asymptomatic when tested positive. Isolate until</p> <ul style="list-style-type: none"> • 10 days since date of specimen collection (20 days if severely immunocompromised). <p>A negative test is <u>not required</u> to return; use the symptom-based strategy above.</p>

Protocol - Close Contact of a Case

Situation	Isolation and quarantine protocol	Recommended testing protocol	Requirement to return
<p>Staff or student is a close contact of a confirmed case</p> <p>Close contacts who have tested positive in the past 90 days do not have to quarantine</p>	<p>A close contact is quarantined per the CDC/RIDOH guidelines (See Page 18).</p> <p>See page 35 for guidance on when a close contact may be exempt from quarantine.</p>	<p>Close contacts in quarantine should self-monitor for symptoms for 14 days and seek medical advice as needed.</p> <p>RIDOH recommends all close contacts get tested on day 5 of quarantine or later.</p>	<p>Child or staff member must meet the CDC/RIDOH guidelines for ending quarantine before returning to child care:</p> <ul style="list-style-type: none"> • Remain asymptomatic; • Complete one of the quarantine options <ul style="list-style-type: none"> • 14 days; • 10 days; • Seven days with a negative test (antigen or PCR) on day 5 or later. • If choosing a 10-day or 7-day quarantine, continue to monitor for symptoms for 14 days from last exposure.

Child Care Protocol Summary

	Any symptom (not probable case)	Probable case	Positive test result with rapid or PCR test	Negative test result with a PCR test
Symptomatic Person	<p>Isolate. Medical advice. Test encouraged. If not tested/tested negative</p> <ul style="list-style-type: none"> Fever free for 24 hours; and Symptoms improved (back to usual health). 	<p>Isolate. Medical advice. Test required.</p>	<p>Isolate for 10+ days. Symptom-based strategy</p> <ul style="list-style-type: none"> Fever free for 24 hours without use of fever-reducing medications; and Symptoms have improved; and 10 days since symptoms first appeared. 	<ul style="list-style-type: none"> Fever free 24 hours without use of fever-reducing medications; and Symptoms improved (back to usual health).
Return to child care	<p>Attestation form is signed stating that return to child care criteria have been met (parent/guardian signs for a minor).</p>	<p>Attestation form is signed stating that return to child care criteria have been met (parent/guardian signs for a minor) <u>with</u> a test result</p>	<p>Attestation form is signed stating that return to child care criteria have been met (parent/guardian signs for a minor).</p>	<p>Attestation form is signed stating that return to child care criteria have been met (parent/guardian signs for a minor).</p>
Close Contacts	<p>No action.</p>	<p>No action while waiting for test result.</p> <p>Quarantine may be advised by RIDOH with one or more cases in the child care within the past 14 days.</p>	<p>Quarantine from last date of exposure.</p> <p>See page 35 for guidance on when a close contact may be exempt from quarantine.</p>	<p>No action.</p>

Frequently Asked Questions

COVID-19 Vaccination

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COVID-19 Vaccine Quick Tips

- The COVID-19 vaccine is safe, highly effective against serious illness, and may prevent you from being infected with COVID-19.
- A person cannot get COVID-19 from COVID-19 vaccines.
- Because there still may be a small chance you can become infected and spread the virus to others, once you've gotten any COVID-19 vaccine, please continue to wear your mask, wash your hands, and watch your distance after being vaccinated.
- Please visit the Rhode Island Department of Health website for other Frequently Asked Questions about the Vaccine [COVID-19 Vaccine FAQs | RI COVID-19 Information Portal](#)

I Got Vaccinated for COVID-19 and Now I Have Symptoms. What Do I Do?

- People are likely to experience symptoms after receiving a COVID-19 vaccine. This means the immune system is working. This is healthy, normal, and expected.
- You may experience a sore arm, headache, fever, or body aches, but they should go away in a few days.
- If you have any symptoms of COVID-19 following vaccination, stay home, call a health care provider, and get tested.

Frequently Asked Questions

Travel

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Quarantine After Domestic Travel (Updated January 29, 2021)

Domestic travel from an area of high community spread (a.k.a. “hot spot”):

- Those who arrive in Rhode Island from a state where more than 5% of COVID-19 tests are positive should quarantine.
- Those who have tested positive for COVID-19 in the last 90 days are exempt from quarantine.
- **New (February 25, 2021):** Those who have received all doses of the COVID-19 vaccine, are within 14 to 90 days after the final vaccine dose, and have no symptoms, are exempt from quarantine after travel to hot spot states.
- Those who are also exempt from quarantine include
 - Public health, public safety, or healthcare workers;
 - Those traveling for medical treatment; to attend a court hearing; to attend funeral or memorial services; to obtain necessities such as groceries, gas, or medication; to drop off or pick up children from day care; or for anyone who must work on their boats.

Quarantine – Domestic Travel (Updated January 29, 2021)

What are the quarantine options for someone returning to Rhode Island after traveling to a US state where > 5% of COVID tests are positive? (click [here](#) for list of states)

- Option 1: Obtain a negative result for a COVID-19 test (rapid antigen or PCR) taken within 72 hours prior to arrival in Rhode Island;
- Option 2: Quarantine for 10 days once arriving in Rhode Island, until obtaining a negative result for a COVID-19 test (rapid antigen or PCR); or
- Option 3: Quarantine for 10 days once arriving in Rhode Island.
- Whichever option is chosen, travelers should self-monitor for symptoms for 14 days after arrival in Rhode Island.
- The CDC continues to endorse 14-day quarantine as the safest protocol, but has released new data to allow local public health officials to modify policies based on local conditions and needs.
- A child care program may decide which of the domestic travel quarantine options they will accept for children and staff after domestic travel.

Quarantine After International Travel

International travel

- Those who come to Rhode Island from a location outside the 50 states or the District of Columbia (DC) should quarantine.
- Those who have tested positive for COVID-19 in the last 90 days are exempt from quarantine.
- **New (February 25, 2021):** Those who have received all doses of the COVID-19 vaccine, are within 14 to 90 days after the final vaccine dose, and have no symptoms, are exempt from quarantine after international travel.
- No other exemptions from quarantine apply after international travel, including based on profession or reason for travel.

Quarantine - International Travel (Updated January 29, 2021)

What are the quarantine options for someone returning to Rhode Island after traveling outside the 50 states or the DC?

- Option 1: Quarantine for 14 days after arrival in the US;
- Option 2: Quarantine for 10 days after arrival in the US; or
- Option 3: Quarantine for seven days, if a traveler obtains a negative result for a COVID-19 test (rapid antigen or PCR) taken at least 5 days after arrival in the US.
- Whichever option is chosen, travelers must monitor for symptoms for 14 days after arrival in the US.
- The CDC continues to endorse a 14-day quarantine as the safest protocol but has released new data to allow local public health officials to modify policies based on local conditions and needs.
- As a business, the child care program may decide which of the travel quarantine options they will accept from children or staff after international travel.

Quarantine Calculator for Travel

The RIDOH [COVID-19 Close Contact Quarantine Calculator](#) works for determining quarantine dates after international travel, based on the different quarantine options.

- Click link above, and scroll down to the middle of the page to download the calculator

What to do if you or a close contact has COVID-19

- Learn about Rhode Island's close contact quarantine requirements.

[Requirements](#) [FAQ](#)

- To calculate the length of quarantine for close contacts, use this [COVID-19 Close Contact Quarantine Calculator](#).

Quarantine Calculator for Travel

To calculate dates for international travel quarantine options, enter date of arrival in the US in yellow box.

		Enter date below
Quarantine Options	Enter date of last close contact with infected person or date of arrival in the US from outside the 50 states or DC (mm/dd/yyyy): <small>(For a household close contact who cannot separate from the infected person, enter the date isolation ends for the infected person.)</small>	
Quarantine for 14 days <small>Lowest risk for transmission to others: 0.1% - 3%*</small>	Quarantine until midnight on:	
Quarantine for 10 days <small>Higher risk for transmission to others: 1% - 10%*</small>	Quarantine until midnight on:	
Quarantine for 7 days AND take a test on day 5 or later <small>Highest risk for transmission to others: 5% - 12%*</small>	Earliest test date:	
	Quarantine until midnight if test is negative: <small>(or until you get a negative test result after this date)</small>	

* www.cdc.gov/coronavirus/2019-ncov/more/scientific-brief-options-to-reduce-quarantine.html
Updated: 2/3/21

Quarantine Options for International Travel

- “Day 0”= day of arrival in the United States.
- The quarantine period may start in another state where the flight lands.

Example scenario - A person flies from Costa Rica, to Houston, to Providence:

- Arrives in Houston on 2/1/21 (Day 0 of quarantine);
- Arrives in Providence on 2/3/21 (Day 2 of quarantine);
- Using a calendar, mark 2/1/21 as ‘Day 0’; or
- Using the Quarantine Calculator, enter date of arrival in US 2/1/21.

Quarantine Calculator – Example Scenario

		Enter date below
Quarantine Options	Enter date of last close contact with infected person or date of arrival in the US from outside the 50 states or DC (mm/dd/yyyy): <small>(For a household close contact who cannot separate from the infected person, enter the date isolation ends for the infected person.)</small>	2/1/2021
Quarantine for 14 days <small>Lowest risk for transmission to others: 0.1% - 3%*</small>	Quarantine until midnight on:	2/15/21
Quarantine for 10 days <small>Higher risk for transmission to others: 1% - 10%*</small>	Quarantine until midnight on:	2/11/21
Quarantine for 7 days AND take a test on day 5 or later <small>Highest risk for transmission to others: 5% - 12%*</small>	Earliest test date:	2/6/21
	Quarantine until midnight if test is negative: <small>(or until you get a negative test result after this date)</small>	2/8/21

* www.cdc.gov/coronavirus/2019-ncov/more/scientific-brief-options-to-reduce-quarantine.html

Updated: 2/3/21

Frequently Asked Questions

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Testing

**RHODE
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K-12 & Child Care Test Scheduling Service

Who can schedule a test for this service?

- Anyone associated with K-12 and/or child care (staff, student, van driver, coach, etc.) who is
- Symptomatic; or
- A close contact of a person who tested positive for COVID-19; or
- A classmate of a person who tested positive for COVID-19.

How to schedule a test

1. Call **844-857-1814** on weekdays from 7:30 a.m. to 7 p.m. and weekends from 8:30 a.m. to 4:30 p.m.; or
2. Schedule through **portal.ri.gov** (children under 16 should be scheduled under their parent/guardian's account).

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.
- What you need to access your test results:
 - Name;
 - Date of Birth;
 - Date of Testing Appointment.
- [COVID-19 Test Result Portal User Guide](#) is available if you need assistance.

Testing at a K-12 Site for Symptomatic Individuals

- A person with **symptoms** who schedules a test at a K-12 site may receive one (PCR) or two (rapid antigen and PCR) tests depending on the operations at the site.
- If you have symptoms, **you must isolate at home while waiting for all of the test results.**
- If you had a rapid test, you will receive a text message when your rapid test results are available on the portal. You will receive a second text message when your PCR results are available.
- **If either test is positive (rapid or PCR) you must isolate at home.** Please see Page 41 for guidance on individuals who test positive for COVID-19.

Rapid Antigen Versus PCR Testing Questions

A person tests positive for COVID-19 by rapid antigen test. Do they need to isolate? Do their close contacts need to quarantine?

- Yes, rapid antigen tests are very accurate when the result is positive. A person who tests positive on a rapid antigen test is considered to be infected with COVID-19 and should isolate and their close contacts should quarantine per RIDOH/CDC recommendations.

A person has both a rapid antigen and PCR test on the same day. One test result is positive and one is negative. Are they considered to be infected with COVID-19? Do they need to isolate? Do their close contacts need to quarantine?

- Yes, this person is considered to be infected with COVID-19 and should isolate as required. Their close contacts must quarantine per RIDOH/CDC recommendations.

Rapid Antigen Versus PCR Testing Questions

A person tests negative for COVID-19 by rapid antigen test. Do they need to obtain a PCR test? Do they need to isolate pending PCR test results?

- It depends on the reason for testing. A **symptomatic person** with a negative rapid antigen test should obtain a PCR test, remain in isolation until the PCR test result is known, and the symptoms have resolved. An **asymptomatic person** with a negative rapid antigen test does not need to obtain a PCR test.
- An asymptomatic close contact in quarantine may obtain either a rapid antigen or PCR test on day 5 or later of quarantine to end quarantine on day 7 or later, but must continue to monitor for symptoms for 14 days after close contact exposure.

Other Testing Questions

If a symptomatic person is tested with both a rapid antigen test and a PCR test, can the person return to child care if the rapid test result is negative, but the PCR test result is still pending?

- No, a symptomatic person should not return until they receive the rapid AND the PCR test results.

If I am in quarantine and I get tested, do I need to remain in quarantine while I wait for results?

- Yes. If you have been a close contact of someone with COVID-19 and you get tested, you should remain in quarantine while awaiting test results.

If I am not in quarantine and to go for asymptomatic testing, do I need to quarantine while I wait for results?

- No. If you are asymptomatic and not a close contact and get tested, you do not need to quarantine while results are pending.

Does a Person Who Tested Positive Need a Negative Test to Return to Child Care?

No. A person with symptoms who tested positive for COVID-19 should follow the symptom-based strategy for ending isolation:

1. Must be fever-free for 24 hours without the use of fever-reducing medication; and
 2. Symptoms have improved; and
 3. It has been at least 10 days since symptoms first appeared (20 days if immunocompromised).
- A person without symptoms must remain in isolation for 10 days from the test date (20 days if immunocompromised).
 - After completing isolation, a person is no longer considered contagious with the virus.
 - It is neither required nor recommended for a person to provide proof of a negative test after meeting the criteria for ending isolation.

Frequently Asked Questions

Quarantine

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Quarantine Questions

If I get tested during quarantine and I'm negative, does my quarantine end?

- Yes. If you get tested on day 5 or later* (with a rapid test or a PCR test), you can end quarantine after day 7 (release on day 8) and continue to monitor for symptoms through day 14.

*If you get tested earlier than day 5 you cannot end quarantine on day 7.

If I get tested during quarantine and I test positive for COVID-19, how long do I need to stay home?

- If an individual on quarantine tests positive for COVID-19, they must isolate.
- The individual must isolate for 10 days from symptom onset or 10 days from the date of the specimen collection if the person is asymptomatic.
- Please see Page 24, 42-44 for guidance on isolation.

Quarantine Questions

When do close contacts of a probable case need to stay home?

- When a person with symptoms meeting probable case criteria is tested, the person's household members should stay home while tests results are pending because they may have been exposed in the home environment.
- Child care contacts and other contacts of a probable case are not required to stay home while test results are pending. In certain situations, RIDOH may advise quarantine for child care contacts while test results are pending.

Do Household Contacts Always Need to Quarantine for 17-24 Days?

- If the individual with COVID-19 can avoid close contact with household members and keep a physical distance of six feet all the time, household members would only need to quarantine from the date of last exposure to the infected household member.
- Examples
 - The isolated person remains in the household but stays in their own bedroom at all times and uses their own bathroom without sharing any common areas with others in the household;
 - The isolated person remains in the household but on a completely separate floor or living area at all times; or
 - Either the isolated person or the other household members temporarily move out of the household while the case is in isolation.

Questions about Classmates of Children & Staff on Quarantine

A child/staff member was exposed to a person with COVID-19. They are now on quarantine. Do the classmates/students of the child/staff member need to quarantine as well?

- Only **close contacts** (within six feet for at least 15 minutes cumulative within 24 hours) of a person with COVID-19 need to quarantine. If the child/staff member was in close contact with a person with COVID-19, then the child/staff member needs to quarantine.
- Anyone who was in contact with the exposed child/staff member, but not with the actual person with COVID-19, does not need to quarantine.
- The exception would be if a child or staff member in quarantine develops symptoms or tests positive and was infectious on the days they attended the program. RIDOH will work with you to determine that person's infectious period and whether anyone else from the program needs to quarantine.

Question About Siblings of Children on Quarantine

If a child was exposed to a person with COVID-19 in their classroom and the exposed child has a sibling in another classroom, does the sibling have to quarantine as well?

- No. Only the child who was in **close contact** (within six feet, at least 15 minutes cumulative, across 24 hours) with a COVID-19 case needs to quarantine.
- If the sibling was in a separate classroom and did not have close contact with the COVID-19 case, then the sibling does not need to quarantine.
- The exception would be if the child on quarantine tests positive or develops symptoms, in which case the sibling must stay quarantined.



Frequently Asked Questions

Close Contacts

Questions about Close Contacts in Child Care

If we are notified of a positive case during the school day, do we need to send the close contacts home immediately?

- It is always preferable to send close contacts home as soon as possible. However, if it is not feasible to send someone home immediately, a close contact can remain in child care, follow the normal dismissal process, and begin their quarantine when they get home.

Can Child Care Programs Direct People to Quarantine?

- **No.** Only RIDOH has the authority to officially quarantine people.
- While RIDOH completes the investigation, child care providers have the authority to close potentially impacted classroom(s) while awaiting RIDOH guidance.

Testing of Close Contacts

Is testing on Day 5 or later of quarantine required?

- No, testing on Day 5 of quarantine or later is recommended but not required; however, in some situations testing may be strongly recommended before coming back to child care.

What are situations where testing may be strongly recommended by RIDOH?

- RIDOH has evidence of transmission within a stable group (2+ positive cases detected in 14 days).
- RIDOH may recommend testing in other situations, on a case-by-case basis.

Is there an alternative to end-of-quarantine testing if it is strongly recommended?

- The alternative to end-of-quarantine testing is to remain in quarantine for an additional 10 days. This is to ensure that someone who has been infected with the virus is not still contagious to others when they are released from quarantine.

Additional Resources for Administrators, Teachers, Parents/Guardians and Children

Daily Checklist for Administrators/Supervisors, Staff, & Parents/Guardians



Administrators/Supervisors of Child Care

- Ensure that you are wearing **face coverings that cover the nose and mouth** and maintaining **at least six (6) feet** from all employees/visitors.
- Ensure that **self-attestation form** for symptom screening is posted in a visible area.
- Conduct **verbal screening** of children and staff for symptoms upon drop off. Temperature checks are recommended, but not required.
- Ensure that children/staff remain in their consistent groups, and each group is **physically distancing** (each consistent group should be separated with a wall, divider or partition) from others.
- Ensure all play areas/rooms have been **thoroughly cleaned** in adherence to CDC guidelines.
- Monitor children/staff for symptoms.
- Ensure **hand hygiene** (hand washing, hand sanitizer available).
- When not in the child care setting, follow State recommendations on physical distancing, wearing face coverings, and limiting attendance at social gatherings or large gatherings.



Staff

- Ensure that you are wearing **face coverings that cover the nose and mouth** and maintaining **at least six (6) feet** from all employees/visitors.
- Conduct **verbal screening** of children for symptoms upon drop off.
- Ensure that children/staff remain in your consistent group, and you are **physically distancing** (each consistent group should be separated with a wall, divider or partition) from other groups.
- Monitor children/staff within your consistent group for symptoms.
- Ensure **hand hygiene** (hand washing, hand sanitizer available).
- When not in the child care setting, follow State recommendations on physical distancing, wearing face coverings, and limiting attendance at social gatherings or large gatherings.



Parents/guardians

- Screen child for symptoms using self-attestation form or app prior to leaving home:
 - If child **fails** screening, communicate with child care immediately, keep child home and seek medical advice.
 - If child **passes** screening, take child to child care but continue to monitor for symptoms.
- Ensure that you are wearing **face coverings that cover the nose and mouth** and maintain **at least six (6) feet** from all employees/ other parents or guardians upon drop off.
- Ensure that you comply with **enhanced drop-off and pick-up protocols** established by the child care provider and in adherence with DHS COVID-19 Child Care Licensing Regulations.
- Ensure **hand hygiene** (hand washing, hand sanitizer available).
- When not in the child care setting, follow state recommendations on physical distancing, wearing face coverings, and limiting attendance at social gatherings or large gatherings.

Resources for Educating Teachers, Parents/Guardians, and Children

Resource	Source	Overview of contents	Link to access
Talking with children about Coronavirus Disease 2019	CDC	Recommendations to help adults have conversations with children about COVID-19	cdc.gov/coronavirus/2019-ncov/daily-life-coping/talking-with-children.html
Key Messages and Actions for COVID-19 Prevention and Control in Schools, March 2020	UNICEF, WHO	Guidance for operations of education facilities including educational checklists for school administrators, teachers/staff, parents/guardians and students/children	who.int/docs/default-source/coronaviruse/key-messages-and-actions-for-covid-19-prevention-and-control-in-schools-march-2020.pdf?sfvrsn=baf81d52_4
Toolkit for Parents and Teachers	Department of Health Promotion Science, University of Arizona	Teaching resources/information sheets for parents, teachers, administrators and CDC Health Promotion Materials	publichealth.arizona.edu/news/2020/covid-19-communication-toolkit-parents-and-teachers
Communicating with Children During the COVID-19 Outbreak	Michigan Department of Health and Human Services	Guidelines and resources catered to families to promote healthy and comforting conversations between children and parents/guardians	michigan.gov/documents/coronavirus/Talking_with_kids_about_COVID_FINAL_685791_7.pdf
Child care guidance during COVID-19 Outbreak	CDC	Guidance for child care programs that remain open	cdc.gov/coronavirus/2019-ncov/community/schools-childcare/guidance-for-childcare.html

RIDOH and DHS Resources

Resource	Source	Overview of contents	Link to access
RIDOH COVID-19 Information	Rhode Island Department of Health	General information on COVID-19 in RI	health.ri.gov/covid/
RIDOH COVID-19 Data	Rhode Island Department of Health	Numbers and trends of COVID-19 in RI	ri-department-of-health-covid-19-data-rihealth.hub.arcgis.com/
COVID-19 testing in Rhode Island	Rhode Island Department of Health	Who should get tested for COVID-19 and locations for testing throughout RI	health.ri.gov/covid/testing/
DHS COVID-19 Information	Rhode Island Department of Human Services	Professional Development: Re-Opening Child Care//Reapertura de Cuidado Infantil	center-elp.org/center-pd/dhs-mandatory-trainings-to-re-open-child-care-entrenamientos-mandatorios-de-dhs-para-la-reapertura-de-cuidado-infantil/
Re-opening Rhode Island	State of Rhode Island	Guidance for re-opening RI	www.reopeningri.com/

Questions? Contact Us!

- **Call** the COVID-19 info line at **401-222-8022**.
- **Email** the COVID-19 Child Care Team at RIDOH.COVIDChildcare@health.ri.gov:
 - Please leave a call-back number in your email.
 - The inbox is monitored during business hours only. If you send a message after business hours, your message will be received the next business day.