

COVID-19 in Child Care or Early Learning Programs: Requirements and Recommendations

Adapted with permission from Public Health Seattle King County

What is Required in Washington State?



COVID-19 VACCINATION for Staff

Why? Vaccination is the best way to protect children and adults from hospitalization and death caused by COVID-19. All employees in child care are required to be fully vaccinated or have a medical or religious exemption per [Governor’s proclamation 21-14.3](#) (document in English only).



REPORT positive cases of COVID-19

Why? [Washington Administrative Code \(WAC\)](#) requires child care and early learning programs to report to their Local Health Jurisdiction (LHJ) and DCYF licensor each time there is a positive case in the program.

How? To report to Snohomish Health District, please call (425) 252-5415 or by email at childcarehealth@snohd.org.



EXCLUDE children and staff with COVID-19 Symptoms

Why? Per [WAC](#), staff need to look for signs of illness in children when they first get to the program and throughout the day. Children should be sent home if they have any signs of illness.

Also, Department of Health ([DOH](#)) [child care requirements and guidance](#) requires **anyone who has any of the COVID-19 symptoms below, even if mild, to stay home from child care.**

<ul style="list-style-type: none"> • fever (a temperature of 100.4°F or higher) • cough • shortness of breath or difficulty breathing • chills • muscle pain • headache • runny or stuffy nose 	<ul style="list-style-type: none"> • sore throat • diarrhea • vomiting • new loss of taste or smell • other signs of new illness unrelated to a preexisting diagnosed condition (such as seasonal allergies)
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When? When children arrive, and throughout the day, look for signs of illness, which could include flushed cheeks, rapid or difficulty breathing (without recent physical activity), fatigue, or extreme fussiness. Children should be sent home immediately if symptoms develop during the day.



ISOLATE

Isolation: means staying separate from all people who don't have COVID-19, even within your home.

Why? Per [DOH child care requirements and guidance](#), any person who tests positive for COVID-19 needs to isolate at home.

How long?

- A person who is fever-free and whose symptoms have improved can return to child care or work **after 5 days of their isolation if they:**
 - wear a well-fitting mask days 6-10 **OR**
 - test negative for COVID-19 **after** day 5 of their isolation.
- Even if a person is fever-free and their symptoms have improved, they still need to **isolate at home for 10 days if they:**
 - are unable or too young (under 2 years) to wear a mask **AND**
 - cannot provide a negative test result for COVID-19 **after** day 5 of their isolation



NOTIFY PARENTS OR GUARDIANS

Why? [WAC](#) requires child care and early learning programs tell parents or guardians that there is a positive COVID-19 case in their child's classroom.

How? Notify parents or guardians within 24 hours of learning about a case.

What Else Can Child Care and Early Learning Programs Do?

Public Health recommends the following to help prevent the spread of COVID-19 in child care and early learning programs.



MASK WEARING

Why? Masking helps prevent the spread of COVID-19.

When? If you have made masking optional in your program, consider having everyone mask again when COVID-19 cases in the community are increasing. After an exposure, masking can be especially helpful in preventing the spread of COVID-19.

All **exposed** children (over 2 years) and teachers/staff should wear well-fitting, high-quality masks for 10 days after their last known exposure to a person with COVID-19:

- Well-fitting means a snug-fitting mask that covers your nose and chin
- High quality mask examples, in order of quality are:
 1. Certified N95, KN95, or KF94 masks; or
 2. Surgical masks; or
 3. Cloth masks with multiple layers of breathable, tightly woven fabric.

[Project N95](#) is one source for child masks.



VENTILATE program spaces

Why? COVID-19 is an airborne virus and can spread easily indoors. Increasing air flow and cleaning indoor air help reduce spread of COVID-19 indoors.

When? As often as possible!

How?

- Open windows and doors, if safe to do so.
- Use portable HEPA air cleaners.
- Leave door(s) open during outside play time.
- Move activities, such as circle time, meals, and art projects outside, if possible.
- Use fans to pull indoor air to the outside (face the fans toward the doors, away from people).
- For more information please see the following:
 - See [3 Ways to Improve Indoor Air and Reduce the Risk of Spreading COVID-19](#). This flyer is available in PDF format in multiple languages here:
<https://kingcounty.gov/depts/health/covid-19/ventilation.aspx>.
 - <https://www.lni.wa.gov/agency/outreach/coronavirus/ventilation-in-the-workplace>
 - <https://doh.wa.gov/sites/default/files/legacy/Documents/1600/coronavirus/VentilationGuidance.pdf>



Stay Up-to-Date on COVID-19 VACCINATIONS

Why? Vaccination is the best way to protect children and adults from hospitalization and death caused by COVID-19.

A person is considered up-to-date when they have completed their initial series of vaccinations and all recommended booster shots that they are eligible for. When a person is up-to-date, they get the maximum protection available.



QUARANTINE

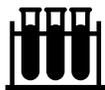
Quarantine: means staying at home with no visitors, away from people outside your home. Do not go to work, school, or public areas. If possible, stay away from people in your household who are at high risk for COVID-19 (unvaccinated, older people, or those with medical conditions).

In March 2022, DOH removed the quarantine requirement after a COVID-19 exposure in child cares to balance keeping children in care while preventing severe disease. Although it is no longer required, programs can still choose to have close contacts quarantine when there is a known exposure of COVID-19 in a classroom.

When can Quarantine be useful?

- When COVID-19 is spreading in the program.
- When the exposure happens in classrooms where children cannot wear a mask throughout the day (for example, under 2 years) or are not vaccinated against COVID-19.

While DOH does not offer a specific recommended quarantine timeframe for child cares, programs can refer to the DOH [Isolation and Quarantine Guidance webpage](#) to create their own policy for children and staff. The CDC says, “For children not yet eligible for COVID-19 vaccination who cannot wear a mask, or may have difficulty consistently wearing a well-fitting mask, it is safest to quarantine for a full 10 days.”



TESTING

Why? Testing identifies people who have COVID-19 and allows healthy children to stay in child care and early learning programs.

What Type of Test? There are two types of COVID-19 tests that are FDA-approved: over-the-counter tests done at home (labeled as “rapid antigen tests”) and tests done at a testing site or by a healthcare provider (commonly called “PCR”).

- **People who have recently recovered from COVID-19 (within 90 days) should use a rapid antigen (at-home) test, not a PCR test.** PCR tests can pick up small amounts of viral

material for up to 90 days after someone has had COVID-19, so if a person uses a PCR test during that time it could come back positive even if they do not have a current COVID-19 infection.

What testing strategies can be used?

No matter the strategy, people can self-test at home or get tested in the community (for example, at a testing site or healthcare provider office).

- 1. Diagnostic Testing** – This strategy is used to identify current COVID-19 infections in people who have symptoms or have been exposed to COVID-19.
 - **If a person has one or more symptoms of COVID-19**, they should get tested immediately either by PCR or rapid antigen test.
 - **A note about using rapid antigen tests when symptomatic:** Even when a person has symptoms, it can take a few days for the level of virus to be high enough for a rapid antigen test to show a positive result.
 - If a person with symptoms tests negative using a rapid (at-home) antigen test, they should wait at least 24 hours and test again. Follow the directions on the test kit for when to do a second test.
 - **If a person had close contact** with someone with COVID-19, they should get tested immediately, even if they don't have symptoms, and repeat testing every 5-7 days after exposure.
- 2. Test to Stay** – This strategy is used as an alternative to at-home quarantine for close contacts who have been exposed to someone with COVID-19. Test to Stay can be useful if:
 - an unmasked group of children (e.g., an infant or toddler classroom with children under two years) has an exposure;
 - a staff or child has a household exposure, which provide opportunities for prolonged and repeated exposures;
 - a person who is exposed is not up to date on COVID-19 vaccinations;
 - an exposure occurs during an outbreak.

How does Test to Stay work? Children and staff may continue to attend child care or work after an exposure while completing a Test to Stay protocol, if they are:

- asymptomatic **AND**
- tested repeatedly over the 10 day period after their last exposure (e.g., twice per week).

- 3. Screening Testing** – This strategy helps identify unknown cases of COVID-19 who may be contagious by testing people who do not have symptoms or a known exposure. Testing can be done on a regular basis (e.g., once a week), or after a person travels or returns from a long break or absence. For more information, see [DOH child care requirements and guidance \(page 8\)](#).

Families can request free rapid test kits from the following places:

- Department of Health – www.sayyescovidhometest.org or [1-800-525-0127](tel:1-800-525-0127)
- Federal government – www.covidtests.gov or [1-800-232-0233](tel:1-800-232-0233)

PLEASE NOTE: Any child care or early learning program may *provide* self-tests to individuals, parents, or guardians if the self-testing is done by the individual, parent, or guardian. These tests can be taken at home or at the school or child care. A child care or early program administrator can **only administer a test on children if the program has a Medical Test Site/ CLIA license.** (See DOH Interim Self-Testing Guidance for K-12 Schools and Child Care: <https://doh.wa.gov/sites/default/files/2022-03/821-171-COVID19SelfTestingSchoolsChildCare.pdf>)