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.

Recent Updates: (Changes highlighted in yellow)
5/18/2022
• Clarified that children under 2 years of age who have been exposed (close contacts) and are asymptomatic can remain on site if they are monitored for symptoms and test 3-5 days after their last exposure.
5/16/2022
• Updated actions for staff close contacts to align with the new Cal/OSHA Emergency Temporary Standards (ETS)
**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 1 COVID-19 Case 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.

- 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 both these criteria are met: 1. No fever for at least 24 hours without the use of fever-reducing medicine, 2. Other symptoms are not present or are improving. *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:** ECE Center COVID-19 Liaison must notify DPH of persons with confirmed COVID-19 who were on site at any point within the 14 days prior to the illness onset date. The illness onset date is the first date of COVID-19 symptoms or the COVID-19 test date, whichever is earlier.

- 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.

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COVID-19 Exposure Management Plan in ECE Sites

Revised 5/18/2022
• Close Contact: The preferred method for determining which persons are considered to have been exposed to a case (close contact) during the infectious period if they shared the same indoor airspace at the center with the infected person for 15 minutes or more over a 24-hour period. In large indoor airspaces, those considered exposed may be limited to 1) those in a pre-defined or identifiable group (e.g., teammates, club members, cohort, etc.) or 2) those within 6 feet of the infected person for 15 minutes or more over a 24-hour period. This is the preferred approach for identifying close contacts.

- Alternatively, ECE facilities may limit designation of close contacts to individuals 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.

NOTE: Persons with an outdoor exposure at the ECE facility are not considered close contacts.

• Secure online reporting for notifying DPH of COVID-19 cases can be done on a computer or mobile device via the secure web application the Shared Portal for Outbreak Tracking (SPOT): 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 case notifications should be submitted within 1 business day of being notified of the case.

Required: Persons who are identified to have had an exposure at the site are notified by the ECE Provider of the exposure and provided with actions to take. Refer to COVID-19 Template Notification Letters for Early Care and Education Sites (which can also be found here) for a template that can be adapted for notification where individuals are notified of their exposure and actions take.

• If applying the within 6 feet of an infected person for 15 minutes or more over a 24-hour period definition for identifying close contacts in a classroom or similar size settings, all other individuals who shared the same indoor airspace with the infected person for 15 minutes or more over a 24-hour period must also be notified and provided with the recommended actions to take.

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.*

o Children less than 24 months 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.*

*NOTE: Asymptomatic student and staff close contacts who were previously infected with SARS-CoV-2 within the last 90 days are exempt from testing but must mask around others indoors for 10 days after the last date of exposure, for those aged 2 years and older.

• If applying the within 6 feet of an infected person for 15 minutes or more over a 24-hour period definition to identify close contacts in classrooms or similar size settings, or within a well-defined cohort, all other individuals in the indoor space or members of the well-defined cohort who shared in the same indoor airspace with the infected person for 15 minutes or more over a 24-hour period but were not within 6 feet of a confirmed case shall be notified of potential exposure despite not being close contacts and shall be strongly recommended 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.*

- 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).
- 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 Table 2 in Cal/OSHA’s COVID-19 Emergency Temporary Standards Frequently Asked Questions for CDPH guidance after close contact.
- 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. 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.

- **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 Employee Health Services or Occupational Health Services, Personal Healthcare Providers, LA City and County Testing Sites: 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 211, which is available 24/7.

- **Recommended**: ECE Provider will determine whether additional notification is needed to inform the wider ECE center community about the site exposure and precautions being taken to prevent spread of COVID-19. A general notification letter template is available at: COVID-19 Template Notification Letters for Early Care and Education Sites.

### Exposure Management for 2 COVID-19 Cases at ECE Site within a 14-day Period

- **Required**: After identifying 2 confirmed cases within a 14-day period, ECE Provider follows the required steps for 1 confirmed case.

- **Required**: ECE Provider consults with Public Health to determine whether the 2 confirmed cases are epidemiologically linked, meaning that the two affected individuals were both present at some point in the same setting during the same time period while infectious.* ECE Providers should contact DPH for assistance in determining whether cases are epidemiologically linked by emailing ACDC-Education@ph.lacounty.gov.

*A case is considered to be infectious from 2 days before symptoms first appeared until they are no longer required to be isolated (i.e., no fever for at least 24 hours without the use of medicine that reduces fever AND symptoms have improved AND at least 10 days have passed since symptoms first appeared). A person with a positive COVID-19 test but no symptoms is considered infectious from 2 days before their test was taken until 10 days after that first positive test.
• Determination of epidemiological links between cases may require further investigation to assess exposure history and identify all possible locations and persons that may have been exposed to the case while infectious at the site. NOTE: Epidemiologically linked cases include persons with identifiable connections to each other such as sharing a physical space (e.g., in a classroom, office, or gathering), indicating a higher likelihood of linked spread of disease in that setting rather than sporadic transmission from the broader community. If epidemiological links exist, DPH will advise the ECE Provider on important steps to take and communications to children, parents/caregivers/guardians, and employees on precautions to take to prevent further spread at the setting, including implementation of site-specific interventions for infection control.

### Exposure Management for ≥ 3 COVID-19 Cases at the ECE Site within a 14-day period

**Required:** If the ECE Provider identifies a cluster of 3 or more confirmed cases within a 14-day period, the ECE Provider should proceed with the following steps:

- Report the cluster immediately to DPH. Secure online reporting for notifying DPH can be done on a computer or mobile device with access to the secure web application: [https://spot.cdph.ca.gov/s/?language=en_US](https://spot.cdph.ca.gov/s/?language=en_US).
- DPH will review the submitted information to determine whether the outbreak criteria described below have been met and will contact the ECE Provider within 1 business day to advise on next steps.
- Outbreak Criteria: At least 3 confirmed cases of COVID-19 within a 14-day period in a specified group* at the ECE site with members who are epidemiologically linked, do not share a household, and are not a close contact of each other outside the campus.

*Specified groups include persons that share common membership (e.g., same classroom, ECE event, or ECE extracurricular activity).

- 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 is activated and a public health investigator will communicate directly with the provider to coordinate the response.
Appendix A: Steps for Managing Exposures to COVID-19 Cases at an ECE Site

<table>
<thead>
<tr>
<th>Cases</th>
<th>Required/Recommended</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Case</td>
<td>1) Required: ECE Provider instructs the case to follow Home Isolation Instructions.</td>
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<td></td>
<td>2) Required: ECE Provider works with DPH to identify ECE center close contacts.</td>
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<td>3) Required: ECE Provider notifies ECE contacts of exposure.</td>
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<td>4) Required: ECE Provider submits a report to DPH within 1 business day with information on the confirmed case.</td>
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<td>5) Recommended: ECE Provider sends a general notification to inform the ECE center of the site exposure and precautions being taken to prevent spread.</td>
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<tr>
<td>2 Cases</td>
<td>1) Required: Follow required steps for 1 confirmed case.</td>
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<td></td>
<td>2) Recommended: If the 2 cases occurred within 14 days of each other, ECE Provider works with DPH to determine whether the cases have epidemiological (epi) links. If epi links exist: ECE site implements additional infection control measures.</td>
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<tr>
<td>3+ Cases</td>
<td>1) Required: If a cluster of 3 or more cases occurred within 14 days of each other, 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>.</td>
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<tr>
<td></td>
<td>2) Required: 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.</td>
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