

# Boston Public Health Commission Respiratory Illness Guidance for Early Education and Care Programs (EECs), 11/17/2022

Early Education and Care (EEC) programs are defined as center-based childcare, family child care, Head Start, or other early learning, early intervention and preschool/pre-kindergarten programs delivered in schools, homes, or other settings. A core infectious disease prevention policy is to have staff, children, and/or visitors stay home if experiencing any cold-like or respiratory symptoms and/or if feeling ill.

## Recommendations for staff and children on-site with symptoms

All EEC program staff and children should immediately be removed from the program, masked if appropriate, and tested with COVID-19 rapid testing if identified as having cold-like or respiratory symptoms:

- If a child or staff member tests **positive for COVID-19**, the program should ensure that the child safely isolates and is masked if possible until parent/guardian arrives. Staff should go home immediately.
- If a child or staff member tests **negative for COVID-19**, individuals should still be instructed to go home pending symptom resolution and advised to seek a healthcare evaluation. This may include testing for influenza and/or RSV.
- If COVID-19 on-site rapid testing is **not available**, staff and children should be sent home and instructed to seek testing and/or a healthcare evaluation.

### **Return to EEC Recommendations for Respiratory Illnesses**

EECs should follow the below guidance if families call to report symptoms or a diagnosis of cold-like or respiratory illnesses, COVID-19 or have questions about a COVID-19 exposure. If additional support or testing resources are needed, please contact BPHC's Infectious Diseases Bureau (617-534-5611). See below for BPHC's return to program recommendations.

### COVID-19

Isolation guidance for COVID-19: EEC children and staff who have tested positive for COVID-19 should isolate at home for at least 5 days. Parents / guardians must notify the EEC. If after 5 or more days of isolation, symptoms have resolved, and the child/staff member has tested negative, they may return to EEC. The individual should mask for the remaining days until day 11 following their first positive test if possible. For all scenarios, BPHC recommends that duration of isolation be calculated from the date of the first positive COVID-19 test that was taken.

Exposure guidance for COVID-19: Children and staff who have been exposed to COVID-19, regardless of vaccination status, are no longer required to quarantine at home unless COVID-like symptoms are

present. Instead, children or staff with a suspected COVID-19 exposure may return to EEC but should wear a mask for 10 days following the exposure.

## Community exposures to COVID-19

For EEC children and/or staff who report COVID-19 exposures in the community and outside of their household, rapid tests should be offered to individuals for use on day 5 or 6 after the exposure or earlier if they develop symptoms. Parents and staff should be reminded to monitor symptoms daily and to stay home if any symptoms develop. BPHC has COVID-19 rapid testing kits available, if needed please email <a href="ResourceUnit@bphc.org">ResourceUnit@bphc.org</a>.

EEC children who cannot mask should be offered rapid tests that they can use at home before going to schools on days 2, 3, and 5 after exposure.

## Household exposures to COVID-19

Children or staff who report a household exposure (ie. someone within their home tests positive for COVID-19) should be offered rapid tests to be taken at home each day prior to entry to the EEC, for the first 6 days after the exposure. They should mask for 10 days following the exposure.

# EEC program exposures to COVID-19

If a child or EEC staff member reports testing positive for COVID-19 and attended the EEC within the 48 hours of their positive test or symptoms, children and/or staff who may have been exposed should be offered rapid tests to take at home prior to entry to the EEC on days 2 OR 3 and 5 after the last exposure.

### Exclusion Guidance for EECs for Other Respiratory Illnesses

EEC staff and children who are diagnosed and/or experiencing any cold-like or respiratory illness except COVID-19 (including influenza, RSV, and other viruses) can return to EECs when they:

- Have been afebrile without use of fever-reducing medicines for 24 hours AND
- Are feeling well and able to fully participate in EEC activities

Nevertheless, if the EEC is experiencing a cluster of cold-like or respiratory illness (defined as  $\geq 3$  cases in the past 7 days), **EECs should consider excluding sick staff and children for 5 days after illness onset to help contain disease spread**. Please notify BPHC's Infectious Diseases Bureau (617-534-5611) of any illness clusters for additional guidance.

# **Other Communicable Disease Prevention Guidance**

#### Vaccination Education

EECs should remind families of the importance of being up-to-date on all routine vaccinations, including influenza and COVID-19. For this 2022-2023 winter season, BPHC is now offering free, walk-in flu and COVID-19 vaccines for all ages at the Bruce C. Bolling Building in Nubian Square on Tuesdays through Saturdays from 12-8PM. No ID or insurance is required.

# Hand Hygiene and Respiratory Etiquette

Washing hands can prevent the spread of infectious diseases. Schools and ECE programs should teach and reinforce proper handwashing to lower the risk of spreading germs. Schools and ECE programs should monitor and reinforce these behaviors, especially during key times in the day (for example, before and after eating, after using the restroom, and after recess) and should also provide adequate handwashing supplies, including soap and water. If washing hands is not possible, schools and ECE programs should provide hand sanitizer containing at least 60% alcohol. Hand sanitizers should be stored up, away, and out of sight of younger children and should be used only with adult supervision for children ages 5 years and younger.

Schools and ECE programs should teach and reinforce covering coughs and sneezes (respiratory etiquette) to help keep individuals from getting and spreading infectious diseases, including COVID-19.

Cleaning, Sanitizing, and Disinfecting

Schools and ECE programs should clean high-touch surfaces and shared toys at least daily to reduce the risk of germs spreading by touching surfaces. Cleaning and disinfection frequency should increase to twice daily and before/after each use when experiencing a disease cluster; for additional guidance, please contact BPHC. Toys and other products that children place in their mouths should be cleaned only in a dishwasher or with soap and hot water if a dishwasher is not available to avoid any toxicity.

Please see the below guidance for additional information on cleaning, disinfection, and sanitizing safe practices:

Activity	Type of Product	Method	Comments
Clean	Soap/detergent and water, or all-purpose cleaners, to remove germs, dirt, oils, and sticky substances from surfaces or objects	Clean surfaces, preferably with a microfiber cloth/mop, rinse the surface thoroughly, and air dry. Or dry with a paper towel or microfiber cloth.	If using a cleaner other than soap and water, choose a product that has safer chemical ingredients and is certified by a third party (Safer Choice, Green Seal, or UL Ecologo).
Sanitize	Chemical product that reduces the number of most germs on non- porous surfaces or objects to a safe level	Sanitize surfaces that touch food (dishes, cutting boards, or mixed-use tables), or objects that a child might place in their mouth (toys).	Choose an Environmental Protection Agency (EPA) registered product with directions for food-contact surfaces on the label.
Disinfect	Chemical product to kill bacteria and viruses on surfaces or objects	Disinfect equipment and surfaces that are used in toileting or diapering and in cleaning body fluids (blood).	Choose a disinfectant product certified by the EPA's Design for the Environment program.
		Allow disinfectant to sit on the surface and be visibly wet for the number of minutes listed on the product label.	

From: Caring for our Children: National Health and Safety Performance Standards, <a href="https://nrckids.org/files/appendix/AppendixK.pdf">https://nrckids.org/files/appendix/AppendixK.pdf</a>