Appendix

FAQs (Page 1 of 3)

1. What will happen if a child becomes ill at child care?

- Staff accompanies the child to a separate area to reduce likelihood of spread, and waits with them until the child is picked up from child care.
- Any items or toys used/touched by the ill child will be removed and disinfected per CDC protocol.
 As soon as possible, common surfaces or items which can't be moved should be disinfected, and if
- feasible, ventilation of space should be increased.
- Once children leave, the area should be thoroughly cleaned per CDC protocol.
- Children within same consistent group should be administered two temperature checks daily and increased vigilance for symptoms.

2. When should children within a consistent group be sent home?

• Each scenario is unique. Determination of whether a consistent group will be sent home will be determined in consultation with RIDOH.

3. When can a symptomatic child or staff member return to their child care?

Symptomatic: Parent/guardian may attest (staff may self-attest) that return to child care criteria have been met.

Symptomatic individual who is not a probable case or probable case and test negative may return to child care when:

- 24 hours fever free (without use of fever medication) and Symptoms improved (back to usual health)
- Test-positive
- Must meet the CDC guidelines for ending isolation before returning to child care https://www.cdc.gov/coronavirus/2019-ncov/hcp/disposition-in-home-patients.html





Glossary	
Term Close contact	Definition Contact between two people of r 6R for more than 15 minutes. Data are insufficient to precisely define the duration of time that constitutes a prolonged exposure. But 15 minutes of dooe exposure can be used as an operational definition. Bief interactions are less likel to result in transmission; however, symptoms and the type of interaction (e.g., did the infected person cough directly into the face of the exposed individual) remain important.
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 CDVID-19
COVID-19	Abbreviation for the disease caused by the novel coronavirus SARS CoV-2
DHS	Rhode Island Department of Human Services
Isolation	Process of separating individuals who are infected with COVID-19 from others
Protocol	Recommended actions to follow in the event that an outbreak of COVID-19 occurs
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. Separation/restriction of movement 14 days from the last exposure to the person who tested positive for 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
Testing	Two types of tests are available for COVID-19: viral tests and antibody tests. Viral tests indicate if you have a current infection (most common) while antibody tests indicate a previous infection. Throughout this document, 'testing' refers to the viral test to diagnose a person with COVID-19.