Decision Pathways for Symptoms and Exposures in Early Care and Education Centers and TK-12 Schools

Los Angeles County Department of Public Health
Updated: 8/31/2021
Decision Pathways for *Children* with Symptoms
Symptoms consistent with possible COVID-19 infection in children include: fever ≥ 100.4°F; new cough (different from baseline); diarrhea or vomiting. If the child’s symptoms are not consistent with possible COVID-19 but there is still concern, evaluation of the child by a medical provider is recommended.

1Symptoms consistent with possible COVID-19 infection in children include: fever ≥ 100.4°F; new cough (different from baseline); diarrhea or vomiting. If the child’s symptoms are not consistent with possible COVID-19 but there is still concern, evaluation of the child by a medical provider is recommended.

Decision Pathways for Children with Symptoms Prior to Entry into an Educational Institution, regardless of vaccination status

If child becomes unwell at the facility, place child in an isolation area (physically distant from attendant, ideally outdoors) and follow decision pathways described below.

Screening identifies child with 1 or more symptoms consistent with possible COVID-19.

- Child is sent home. Parent/guardian instructed to consult Medical Provider for further evaluation and possible COVID-19 testing.

Screening identifies unvaccinated child with symptoms not consistent with possible COVID-19.

- Institution determines if the child should be excused per illness management policy. If the child’s symptoms make it difficult to comply with the facility’s COVID-19 safety protocols, the child should be sent home.

Medical provider confirms child does not have symptoms consistent with COVID-19.

- Child has negative COVID-19 molecular test
  - Child stays home per Medical provider guidance.

- Child has positive COVID-19 diagnostic viral test
  - Child follows Home Isolation Guidance.

Medical provider confirms child has symptoms consistent with COVID-19.

- Child tested
  - Child has negative COVID-19 molecular test
    - Child stays home per Medical provider guidance.
  - Child has positive COVID-19 diagnostic viral test
    - Child follows Home Isolation Guidance.

- Child not tested
  - Parent/guardian instructed to consult Medical Provider for further evaluation and possible COVID-19 testing.

Child stays home until fever free without fever reducing medication for 24 hours and improved symptoms.

Child follows Home Isolation Guidance.

1 If child becomes unwell at the facility, place child in an isolation area (physically distant from attendant, ideally outdoors) and follow decision pathways described below.
A potentially infected child is a child with $\geq 1$ symptoms consistent with possible COVID-19. Close contacts of a potentially infected child are persons at the facility who were within 6 feet for $\geq 15$ minutes over a 24-hour period with a potentially infected child OR had direct contact with bodily fluids/secretions from a potentially infected child.

Unvaccinated contacts to a potentially infected child are notified that that they may have had an exposure. Unvaccinated contacts may remain at the facility while waiting for confirmation of exposure.

Exposure is confirmed for a close contact to a potentially infected child if the site receives notification that the potentially infected child had a positive COVID-19 diagnostic viral test OR received a COVID-19 diagnosis from a medical provider.
Decision Pathways for **Fully Vaccinated** Contacts to a Potentially Infected Child\(^1\) at an Educational Institution

\(^1\)A **potentially infected child** is a child with \(\geq 1\) symptoms consistent with possible COVID-19. Close **contacts of a potentially infected child** are persons at the facility who were within 6 feet for \(\geq 15\) minutes over a 24-hour period with a potentially infected child \(\text{OR}\) had direct contact with bodily fluids/secretions from a potentially infected child.

1. **Institution confirms that the vaccinated contact was exposed to COVID-19.**
   - Testing recommended when community transmission is high.
   - **Contact has positive COVID-19 diagnostic viral test**
     - **Contact is now a case and should follow Home Isolation Guidance.**
   - **Contact does not test or has negative COVID-19 diagnostic viral test**
     - **Contact does NOT need to quarantine.**

2. **Vaccinated contacts to a potentially infected child are notified that they may have had an exposure.**
   - Vaccinated contacts may remain at the facility while waiting for **confirmation of exposure.**\(^2\)
   - **Institution confirms vaccinated contact was not exposed OR no confirmation of exposure is provided.**
     - **No action required.**

\(^2\)**Exposure is confirmed** for a close contact to a potentially infected child if the site receives notification that the potentially infected child had a positive COVID-19 diagnostic viral test \(\text{OR}\) received a COVID-19 diagnosis from a medical provider.
Decision Pathways for *Employees* with Symptoms
Decision Pathways for Unvaccinated Employees with Symptoms Prior to Entry\(^1\) into an Educational Institution, regardless of vaccination status

\(^1\)If employee becomes unwell at the facility, place employee in an isolation area (ideally outdoors, physically distant from attendant) and follow decision pathways below.

**Screening identifies employee with 1 or more symptoms consistent with possible COVID-19.**

- Employee is sent home and instructed to consult Medical Provider for further evaluation and possible COVID-19 testing.

**Screening identifies unvaccinated employee with symptoms not consistent with possible COVID-19.**

- Institution determines if the employee should be excused per illness management policy. If the employee’s symptoms make it difficult for the to comply with the facility’s COVID-19 safety protocols, the employee should be sent home.

**Medical provider confirms employee does not have symptoms consistent with COVID-19.**

- Employee stays home per Medical provider guidance.

**Employee has positive COVID-19 diagnostic viral test.**

- Employee follows Home Isolation Guidance.

**Employee has negative COVID-19 molecular test.**

- Employee stays home until fever free without fever reducing medication for 24 hours and improved symptoms.

**Employee provider not consulted or medical provider confirms employee has symptoms consistent with COVID-19.**

- Employee is sent home and instructed to consult Medical Provider for further evaluation and possible COVID-19 testing.

**Employee provider not consulted or medical provider confirms employee has symptoms consistent with COVID-19.**

- Employee is sent home and instructed to consult Medical Provider for further evaluation and possible COVID-19 testing.

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\(^1\)Symptoms associated with possible COVID-19 in adults: fever ≥ 100.4° or feeling feverish (chills, sweating); cough; shortness of breath; new loss of taste or smell; fatigue; runny or stuffy nose; muscle or body aches; headache; sore throat; nausea or vomiting; diarrhea. If the symptoms are not listed but there is still concern, additional evaluation by a medical provider is recommended.
A potentially infected employee is an employee with ≥ 1 symptoms consistent with possible COVID-19. Close contacts of a potentially infected employee are persons at the facility who were within 6 feet for ≥ 15 minutes over a 24-hour period with a potentially infected employee OR had direct contact with bodily fluids/secretions from a potentially infected employee.

Exposure is confirmed for a close contact to a potentially infected employee if the site receives notification that the potentially infected employee had a positive COVID-19 diagnostic viral test OR received a COVID-19 diagnosis from a medical provider.
Decision Pathways for **Fully Vaccinated Contacts to a Potentially Infected Employee**\(^1\) at an Educational Institution

\(^1\)A **potentially infected employee** is an employee with \(\geq 1\) symptoms consistent with possible COVID-19. **Close contacts of a potentially infected employee** are persons at the facility who were within 6 feet for \(\geq 15\) minutes over a 24-hour period with a potentially infected employee **OR** had direct contact with bodily fluids/secretions from a potentially infected employee.

Contacts to a potentially infected employee are notified that they may have had an exposure at the facility. Contacts may remain at the facility while waiting for confirmation of exposure.\(^2\)

- **Institution confirms that contact was exposed to COVID-19.**
  - Testing recommended during times of high community transmission
  - **Contact has positive COVID-19 diagnostic viral test**
    - Contact is now a case and should follow **Home Isolation Guidance**.
  - **Contact does not test or has negative COVID-19 diagnostic viral test**
    - Contact does NOT need to quarantine.

- **Institution confirms contact was not exposed OR no confirmation of exposure is provided.**
  - **No action required.**

\(^2\)Exposure is confirmed for a close contact to a potentially infected employee if the site receives notification that the potentially infected employee had a positive COVID-19 diagnostic viral test **OR** received a COVID-19 diagnosis from a medical provider.
Quarantine Pathways for Children and Staff with *Exposures* at Early Care and Education Centers and TK-12 Schools
Identifying Exposures On Campus - Close Contacts to a Confirmed Case

A close contact is a person who has been exposed to someone diagnosed with COVID-19 during the infectious period* if at least one of the following has occurred:

- The person was within 6 feet of someone with COVID-19 for a total of 15 minutes or more over a 24-hour period;

OR

- The person had unprotected contact with body fluids and/or secretions from someone with COVID-19. For example, they were coughed or sneezed on, they shared a drinking cup or eating utensils, they kissed, or they provided care to the infected person without wearing the right protective equipment.

- A person is considered to be infectious and able to spread the virus to others from 2 days before symptoms first started until the isolation period ends (i.e. 10 days have passed since symptoms first started AND no fever for at least 24 hours AND symptoms improve); OR, if symptoms never develop, from 2 days before their positive test was taken until 10 days after that test was taken.
For Exposed Children*: How long for quarantine?

**Symptomatic**
- Regardless of vaccination status
- Consult with medical provider for further evaluation
- Follow exclusion guidance per DPH's Decision Pathways for Children with Symptoms (see page 3)

**Asymptomatic**
- Not fully vaccinated
  - Testing strongly recommended
  - If NO test, quarantine ends after Day 10
  - If a negative test collected after Day 5, then quarantine ends after Day 7
- Fully vaccinated
  - Testing recommended
  - Does NOT need to quarantine
- COVID-19 recovery in past 90 days
  - Does NOT need to test
  - Does NOT need to quarantine

*Follows Los Angeles County Department of Public Health Home Quarantine Guidance
For Exposed Employees*: How long for quarantine?

Symptomatic
- Regardless of vaccination status
- Consult with medical provider for further evaluation
- Follow exclusion guidance per DPH’s Decision Pathways for Staff with Symptoms (see page 7)

Asymptomatic
- Not fully vaccinated
- Testing strongly recommended
- Quarantine ends after Day 10
- Does NOT need to quarantine

- Fully vaccinated
- Testing recommended
- Does NOT need to quarantine

- COVID-19 recovery in past 90 days
- Does NOT need to test
- Does NOT need to quarantine

*Follows workplace guidance for employees outlined in the Cal/OSHA COVID-19 Prevention Emergency Temporary Standards