

Ned Lamont Governor Susan Bysiewicz Lt. Governor STATE OF CONNECTICUT OFFICE OF EARLY CHILDHOOD



Beth Bye Commissioner

| DATE: | March 26, 2021 REVISED June 2, 2021 REVISED January 3, 2022 | |
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- TO: Providers of Services to Young Children
- FROM: Beth Bye, Commissioner

RE: Conoravirus Memo 37 REVISED Guidance for Individuals who work in Child Care, Youth Camp, Birth To Three And Home Visiting Programs Serving Children

| REVISION June 2, 2021 | Added reference to Choosing Safer Activities; updated adult masks required for indoors only |
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| REVISION January 3, 2022 | Updated recommended guidance for isolation and quarantine period |

Covered workers in child care programs must meet the requirements of <u>Memo 45</u>, which addresses vaccination requirements, testing and exemptions, proof of meeting the requirements, and monitoring by OEC. A program may consider adopting a policy that requires all staff, including those who were hired before September 27, 2021, to receive the COVID-19 vaccine and may wish to consult their own legal counsel in doing so, as this exceeds the requirements of Memo 45. On January 2, 2022, Memo 45 was updated to temporarily allow for <u>COVID-19 self-administered tests</u> in addition to laboratory tests for the period through January 17th. This temporary allowance is made in light of high utilization of testing at this time. Staff who are unvaccinated must provide proof of a home or laboratory test result to their program each week during the first two weeks of January, 2022. Following January 17, 2022, testing that is not collected or observed by a healthcare professional listed in Memo 45 and processed and reported by a laboratory or provider listed in Memo 45 will not be acceptable for the purposes of compliance with Executive Order No. 13G.

Programs should continue to communicate and work with their local health department to report any positive cases and follow their guidance. This includes reporting the positive results of self-administered tests. COVID-19 is on the List of Reportable Diseases. Those required to

report such diseases must report cases of COVID-19 infection immediately to the CT Department of Public Health (DPH) Epidemiology and Emerging Infection Program at 860-509-7994; and the local department of health in the town of residence of the case-patient by telephone on the day of recognition or strong suspicion of the disease. For weekend and after hours reports to DPH, call 860-509-8000. Contact information for the local health department can be found at <u>https://portal.ct.gov/DPH/Local-Health-Admin/LHA/Local-Health-Administration</u>. This requirement will remain in effect permanently and is not dependent upon a declared public health emergency.

In child care, youth camp, Birth to Three and home visiting settings, all child care providers will work with their local department of health to follow the guidance provided by CT Department of Public Health in the chart below, for isolation and quarantine related to COVID-19. The following definitions should be used:

- **Isolation** means to separate sick people with a contagious disease from people who are not sick.
- **Quarantine** means to separate and restrict the movement of people who were exposed to a contagious disease to see if they become sick.

| | Individuals with any COVID-19 symptoms | | Individuals with no COVID-19 symptoms |
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| If fully vaccinated against COVID-19 | t Isolate at home. | | If notified of a close contact with a COVID-19 case: |
| (defined as two weeks after second dose of Pfizer or Moderna | Test for COVID-19 (either self-test or at a testing site). | | Continue with work. |
| vaccines or first dose of Johnson & Johnson vaccine) | If test result is negative , return to activities when fever-free for at least 24 hrs. and other symptoms are significantly improved. | | Test for COVID-19 (either self-test or at a testing site) 5 days after the exposure. |
| | If test result is positive , isolate for at least 5 days, return to activities on day 6 or later when fever-free for at least 24 hrs. and other symptoms are significantly improved. | | activities outside of work, especially if notified of an extended high-intensity exposure (e.g., household contact, unmasked social contact, contact during athletic activities). |
| | | when around others for an i.e., through day 10). | Wear a mask at all times during any activities when around others for 10 days. |
| If only partially vaccinated | If notified of a close contact with a COVID-19 | If no known close contact with a COVID-19 | If notified of a close contact with a COVID-19 case: |
| (one dose of a two dose COVID-19 vaccine or within two weeks of final dose) | <i>case:</i> Isolate at home for a minimum of 5 days since | <i>case</i> : Isolate at home. | Quarantine at home from work, and other activities for 5 days from the last exposure to the COVID-19 case. |
| or Unvaccinated or | last exposure to the COVID-19 case. | Test for COVID-19 (either self-test or at a testing site). | Test for COVID-19 (either self-test or at a testing site) 5 days after the exposure. |
| Vaccination status is unknown | Test for COVID-19 (either self-test or at a testing site). Return to activities on day 6 or later when fever-free for at least 24 | If test result is negative , return to activities when fever-free for at least 24 hrs. and other symptoms are significantly improved. | Wear a mask at all times during any activities when around others for an additional 5 days (i.e., through day 10). |
| | hrs. and other symptoms are significantly improved. | If test result is positive , isolate for at least 5 days after symptoms began, return to activities | |
| | Wear a mask at all times during any activities when around others for an additional 5 days (i.e., through day 10). | on day 6 or later when fever-free for at least 24 hrs. and other symptoms are significantly improved, and wear a mask at all times during any activities when around others for an | |

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