

ILLNESS AND COMMUNICABLE DISEASES ADDENDUM FOR COVID-19

For the protection of everyone, children with contagious conditions may not be present at the center. **If your child is present and exhibits any combination of COVID-19 symptoms that cannot be explained by another reason, you will be asked to pick up your child immediately.** During this time, your child will be safely isolated from well children. The following list of excludable symptoms was developed with guidelines from the Santa Clara County Public Health Department. It is also noted when your child may return to the center following an illness. To ensure the best health for your child and others, please cooperate with this policy at the same level you would expect from other parents.

Children will be excluded if they have had close contact with someone diagnosed with COVID-19 or if they exhibit any combination of the following symptoms that cannot be explained by another reason:

- Fever at or above 100° F by any method
- Cough
- Shortness of breath or difficulty breathing
- Repeated shaking and/or chills
- New loss of taste or smell
- Fatigue
- Sore throat
- Muscle or body aches
- Headache
- Nausea, vomiting or diarrhea

If a child has any of the above symptoms that cannot be explained by another reason, they must stay home and seek medical care. If they had close contact with someone diagnosed with COVID-19, they can return to the center 10 days after exposure.

HEALTH SCREENINGS

- Programs shall encourage personnel to be tested at least once every four weeks.
- Programs shall require daily COVID-19 symptom screening for all personnel and Program participants, on-site and/or prior to arrival.
- Programs shall also post signs at all entrances instructing children/youth, personnel, and all others not to enter the facility if they have any COVID-19 symptoms. COVID-19 symptoms include fever, chills, cough, shortness of breath, difficulty breathing, fatigue, muscle or body aches, headache, recent loss of taste or smell, sore throat, nausea, vomiting, or diarrhea.
- Identify an isolation room or area to separate anyone who exhibits COVID-19 symptoms.
- All children/youth or personnel exhibiting symptoms should wait in an isolation area until they can be transported home or to a healthcare facility, as soon as practicable. For serious illness, call 9-1-1 without delay.

COVID-19 TESTING AND REPORTING

Programs shall require children/youth and personnel to get tested as soon as possible after they develop one or more COVID-19 symptoms or if one of their household members or non-household close contacts tested positive for COVID19.

- In lieu of a negative test result, Programs may allow symptomatic children/youth and personnel to return to work/school with a medical note by a physician that provides alternative explanation for symptoms and reason for not ordering COVID-19 testing.

Programs shall require parents/guardians and personnel to immediately report to Program administration if Program participants or personnel test positive for COVID-19 or if one of their household members or non-household close contacts test positive for COVID-19.

Confirmed COVID-19 Case(s):

- Any child/youth or personnel who learns they have tested positive for COVID-19 while at the Program should immediately be required to wait in an isolation area until they can be transported home or to a healthcare facility, as soon as practicable.
- Program administrators must immediately notify the Santa Clara County Public Health Department of any positive COVID-19 case by emailing coronavirus@phd.sccgov.org and calling (408) 885-4214.
- Program administrators must notify all families and personnel in the school community of any positive COVID-19 case while maintaining confidentiality as required by state and federal laws.
- Areas used by any COVID-19 positive person must be immediately closed off. Such areas may not be reopened until they have been cleaned and disinfected. To reduce risk of exposure, wait 24 hours before you clean and disinfect. If it is not possible to wait 24 hours, wait as long as practicable. Ensure a safe and correct application of disinfectants using personal protective equipment and ventilation.

Return to Program:

- Symptomatic individuals may return 10 days after symptom onset OR 24 hours after resolution of fever and improvement in other symptoms, whichever is longer.
- Asymptomatic individuals who test positive for COVID-19 may return 10 days after their positive test result.

Close contacts to confirmed COVID-19 case(s):

- All children/youth or personnel who had close contact with a COVID-19 positive person (including all members of a stable group with the COVID-19 positive person) must be sent home and instructed to get COVID-19 testing and remain quarantined at home for 10 days. A close contact is defined as someone who was within six feet from the person who tested positive for at least 15 minutes. They should stay home even if they test negative, remain in quarantine for a full 10 days after (1) date of last exposure to the COVID-19 positive person or (2) if the COVID-19 positive person resides in their household, the date that the COVID-19 positive household member completes their isolation.
- No actions need to be taken for persons who have not had direct contact with a confirmed COVID-19 case, and instead have had close contact with persons who were in direct contact.

WHEN TO SEEK MEDICAL ATTENTION**Get medical attention immediately if you or your child has any of these emergency warning signs* for COVID-19:**

- Trouble breathing
- Persistent pain or pressure in the chest
- New confusion or inability to arouse / stay awake
- Bluish lips or face

*This list is not all inclusive. Please consult your medical provider for any other symptoms that are severe or concerning to you.

Call 911 if you have a medical emergency. Notify the operator that you or your child has, or you think you or your child might have, COVID-19.



**FAMILY HANDBOOK ADDENDUM ACKNOWLEDGEMENT
ILLNESS AND COMMUNICABLE DISEASES**

Please read the Illness and Communicable Diseases Addendum to the Family Handbook regarding COVID-19, then sign and return this form to your center director/site supervisor along with your other enrollment forms.

I have read and understand the Illness and Communicable Diseases Addendum to the Family Handbook and agree to follow the outlined guidelines.

I understand that failure to follow this policy may lead to termination of child care services.

Child's Full Name (PRINT CLEARLY)

Parent/Guardian's Full Name (PRINT CLEARLY)

Parent/Guardian's Signature

Date