

## Return to Child Care After COVID-19 Illness or Exposure

August 23, 2021

Guidance on preventing the spread of COVID-19 in early care and education settings is available from the [Georgia Department of Public Health](#), [Centers for Disease Control and Prevention \(CDC\)](#), and the [American Academy of Pediatrics](#).

The following guidance should be used by child care facilities to make decisions for children, teachers, and staff:

- With laboratory-confirmed COVID-19;
- Who have probable COVID-19 (e.g., developed symptoms of respiratory infection [e.g., cough, shortness of breath, fever] but did not get tested for COVID-19 **and** have been exposed to a person with COVID-19 or live in an area with local or widespread transmission;
- Who have been exposed to COVID-19<sup>i</sup>

### Return to Child Care Strategy

DPH recommends a time-based return to child care strategy that is determined based on a person's health status. Decisions about "return to child care" for close contacts of individuals with confirmed or suspected COVID-19 should be made in the context of local circumstances (community transmission, resource needs, etc.).

### Isolation of Cases

**Symptomatic** persons with confirmed COVID-19 or suspected COVID-19, **regardless of vaccination status**, can return to child care after:

- At least 10 days<sup>ii</sup> have passed since symptoms first appeared **AND**
- At least 24 hours have passed since last fever without the use of fever-reducing medications **AND**
- Symptoms (e.g., cough, shortness of breath) have improved

**Asymptomatic** persons with confirmed COVID-19 can return to child care after at least 10 days<sup>ii</sup> have passed since the positive laboratory test, **AND** the person remains asymptomatic.

- Note, asymptomatic persons who test positive and later develop symptoms should follow the guidance for symptomatic persons above.

### Quarantine of Unvaccinated Close Contacts

All unvaccinated close contacts in child care facilities must be quarantined and excluded from the child care setting, regardless of children, teachers, or staff wearing masks or the use of physical barriers (e.g., plexiglass). Refer to the [Public Health Administrative Order](#).<sup>iii</sup>

Close contact generally includes:

- Being within 6 feet of someone with COVID-19 (laboratory-confirmed or a clinically compatible illness) for a cumulative total of 15 minutes or more over a 24-hour period (for example, three individual 5-minute exposures for a total of 15 minutes);
- Living in the same household as a person with COVID-19 and being unable to maintain 6 feet separation at all times;
- Caring for a person with COVID-19;
- Being in direct contact with secretions from a person with COVID-19 (e.g., being coughed or sneezed on, kissing, sharing utensils, etc.) for any amount of time.

### Quarantine Exemptions:

- Asymptomatic individuals who are fully vaccinated against COVID-19, with an exposure to someone with suspected or confirmed COVID-19, are NOT required to quarantine if it has been at least 14 days (2 weeks) since the completion of the COVID-19 vaccination series (two doses in a two-dose series OR one dose in a one-dose series).
  - Fully vaccinated individuals should **get tested 3-5 days after exposure and must continue to wear a mask for 14 days when indoors or until they receive a negative test result.**
- Individuals with a confirmed or probable case of COVID-19 within the previous three months are not required to quarantine. They should wear a mask for 14 days when indoors.

### Quarantine Requirements

During quarantine, all close contacts in must be quarantined and excluded from the child care setting and all extracurricular activities (see Quarantine Exemptions), according to the Public Health Administrative Order.

A **14-day quarantine period is still recommended as the safest option**; however, individuals may opt for a shorter quarantine period by meeting the below criteria. NOTE: The day of exposure is day 0.

Close contacts who are asymptomatic can return to child care after one of the three following options:

1. **Completion of at-home quarantine for 14 days after the most recent exposure and do not experience any COVID-19 symptoms<sup>iv</sup> during the quarantine period**

OR

2. **Completion of at-home quarantine for 7 full days after the most recent exposure and fulfillment of all THREE of the following criteria:**
  - a. **Test<sup>v</sup> for COVID-19 (PCR/molecular or antigen test) on or after day 5 of quarantine AND**
  - b. **Receive a negative result AND**
  - c. **Do not experience any COVID-19 symptoms<sup>iv</sup> during the quarantine period.**

If these three criteria (a, b, and c) are met, the close contact may return to child care after 7 full days of at-home quarantine but must correctly and consistently wear a mask if able (except while eating and drinking) and physical distance when able for the remainder of the 14-day period. Ideally, the

close contact should not participate in any activities that cannot be performed while masked or distanced until completion of the 14-day period.

OR

**3. Completion of at-home quarantine for 10 full days after the most recent exposure without a test for COVID-19 AND do not experience any COVID-19 symptoms<sup>iv</sup> during the quarantine period.**

The close contact may return to child care after 10 full days of at-home quarantine if they remain asymptomatic but must correctly and consistently wear a mask if able (except while eating and drinking) and physical distance when able for the remainder of the 14-day period. Ideally, the close contact should not participate in any activities that cannot be performed while masked or distanced until completion of the 14-day period.

**Fully vaccinated individuals who are asymptomatic for the entire 14-day period following an exposure to someone with confirmed or probable COVID-19:**

- Do not need to quarantine but must correctly and consistently wear a mask indoors and physical distance for the 14-day period or until they receive a negative test result.
- Should be tested<sup>vi</sup> on day 3-5 after exposure. If negative and asymptomatic may return to normal activities.

**Individuals not fully vaccinated (e.g. it has been less than 14 days since completing the COVID-19 vaccination series OR all vaccinations in the series have not been received), who are exposed to someone with suspected or confirmed COVID-19, should follow the guidance in the section of this document titled "Quarantine of Unvaccinated Contacts".**

Regardless of vaccination status, individuals should still monitor themselves for symptoms of COVID-19 for 14 days following a suspect or confirmed exposure. If they develop symptoms<sup>iv</sup> of COVID-19, they should be sent home immediately, follow the guidelines for symptomatic individuals, and seek COVID-19 testing. Additional guidance can be found at <https://dph.georgia.gov/contact> in the section titled "What should I do if I am a close contact to someone with COVID-19 and get sick?".

Vaccinated individuals should continue to follow all other DPH guidance to protect themselves and others, including wearing a mask, social distancing, avoiding crowds, avoiding poorly ventilated spaces, covering coughs and sneezes, and washing hands often. Complete guidance for fully vaccinated people and scenarios where precautions may be changed can be found here: <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/fully-vaccinated.html>.

For questions about the COVID-19 vaccine, please visit <https://dph.georgia.gov/covid-vaccine> or call our COVID-19 vaccination hotline at (888) 357-0169.

Additional quarantine guidance can be found at <https://dph.georgia.gov/contact>.

Both CDC and DPH **DO NOT** recommend using a test-based strategy for children or adults returning to school or childcare (2 negative tests at least 24 hours apart) after COVID-19 infection.<sup>vii</sup> CDC has

reported prolonged PCR positive test results without evidence of infectiousness. In one study, individuals were reported to have positive COVID-19 tests for up to 12 weeks post initial positive.

More information about the science behind the symptom-based discontinuation of isolation and return to child care can be found at <https://www.cdc.gov/coronavirus/2019-ncov/community/strategy-discontinue-isolation.html>.

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i Please find criteria for being a close contact at <https://dph.georgia.gov/contact>.

ii A limited number of persons with severe illness (those admitted to a hospital and needed oxygen) or persons with a weakened immune system (immunocompromised) due to a health condition or medication may produce replication-competent virus beyond 10 days that may warrant extending the duration of isolation for up to 20 days after symptom onset. Consider consultation with a medical provider and/or infection control experts for these patients.

iii Please find the updated DPH administrative orders at <https://dph.georgia.gov/administrative-orders>. Note: "school" in the 15th amended administrative order refers to the K-12 setting.

iv If a close contact experiences any of the following COVID-19 symptoms: fever or chills, shortness of breath or difficulty breathing, new cough, new loss of taste or smell, sore throat, nausea or vomiting, diarrhea, muscle or body aches, extreme fatigue/feeling very tired, new severe/very bad headache, or new nasal congestion/stuffy or runny nose they must follow the DPH isolation guidance.

v The test must be a PCR/molecular or antigen test performed no earlier than day 5 of quarantine. If an individual is tested earlier than day 5, they must be retested on day 5 or later OR follow the 10-day guidance.

vi The test must be a PCR/molecular or antigen test.

vii Completing a test-based strategy is contingent upon the availability of ample testing supplies, laboratory capacity, and convenient access to testing and requires two samples taken at least 24 hours apart. If a facility requires the test-based strategy for return (**which is discouraged by DPH**), this should be done by a private physician through a commercial lab. The test-based strategy is not fulfilled by a single test, nor should it be used for screening of all persons returning to school.