

CHILD CARE FACILITIES

Child Care Facilities

This applies to Licensed Child Care Facilities for community with high community transmission.

GENERAL INFORMATION

The Municipality emphasizes the following mitigation strategies for Child Care Facilities: Decrease exposure of children and teachers by creating smaller classes/groups when possible; staff must always wear a mask when around others; practice hand washing hygiene for staff, children, and anyone in contact with the facility; provide screening of staff and children to prevent symptomatic people from coming in.

Additionally, as is specified in the full EO-19, all staff, families, and children must follow the requirements for individuals likely to be contagious with COVID-19.

The Municipality is still requiring certain mitigation strategies to protect the health and safety of children, staff, and families. *Required items are in bold and italics*. Recommended implementation guidance is in regular text.

Physical Distancing

- Keep groups static to avoid mixing of children. A facility may oversee multiple
 groups, as long as the groups are kept apart at all times and no mixing between groups
 occurs. Each group should consider separate eating areas, recreation space, and
 restroom facilities when possible. If not possible, complete a sanitization process
 between each group using a shared space.
- Group size must be limited to no more than 20 children. A group includes the
 number of children in a distinct area or classroom, provided adequate spacing for
 distancing exists. It does not include staff.
- Limit staff movement between groups to minimize multiple contacts. Everyone must wash hands following CDC quidance before entering a group.
- Activities which require projection of voice or physical exertion should only take place outdoors, with a goal of ten feet between each person when age appropriate, with an understanding on limitations in physical distancing in young children.

STAFFING/OPERATIONS

• Cloth face coverings must be worn by all individuals six years of age and older when indoors in public and/or communal spaces in addition to when outside at a

gathering or when not at a gathering, but cannot maintain 6 foot distancing and are recommended for children ages 2-5, with supervision.

- Children 6 years of age and older are required to wear masks.
- Any individual over the age of 6 years, including all staff, caregivers, and parents in child care settings, are required to wear masks.
- Remind staff and children not to touch their face.
- Provide information to all staff on the proper use, removal, and washing of cloth coverings. The CDC has information regarding cloth face coverings which may be useful (Click here to view).
- Children under two should not wear masks.
- Children who are napping should not wear masks.
- Facility staff <u>must</u> screen every child daily upon arrival and conduct a temperature check on site. If a touchless thermometer is not available, please follow CDC guidance for taking temperatures safely with non-touchless thermometer at site (Click here to view).
- *HIGHLY RECOMMENDED* Assign a staff member the responsibility of continually checking CDC, state, and municipal websites for the most up-to-date guidance and mandates.

COVID-19 MITIGATION PLAN

All facilities must write, share with parents, train staff on, and maintain hard copies at site of COVID-19 mitigation plans. If you have multiple licensed sites, hard copies are required at each location.

Plans *must* include the following areas written in *bold and italics*. Recommended topic areas are in regular text.

GENERAL

- Admittance criteria, if any:
 - Medical conditions that children or family members may have that disqualifies their attendance at the facility until after the emergency orders have been lifted.
 - Older adults and those with serious underlying medical conditions such as heart disease, diabetes, or lung disease are at greater risk of getting very sick from this virus (<u>click here to view</u>).
 - Employment status and/or parent's employer.
 - Child's at-risk status.
- Communication measures:
 - Signage at the door.
 - Expectations of:
 - Staff and families reporting known exposures to COVID-19 positive individuals to facility.

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- Facility reporting to families known exposures to COVID-19 positive individuals, while respecting privacy of individual.
- Limits to visitors, deliveries, and/or others not registered in program.
- Meal prep, service, and clean-up procedures.

OPERATIONS

- Sign-In and Sign-Out procedures.
- Screening protocol for staff and children:
 - o Timeline/indicators to return if screened out.
 - Make sure to include your requirements around travel.
- Handwashing / Hand Sanitizing processes, with oversight procedures for staff, families, and children throughout the day.
- How children are grouped, kept in age groups, and maintain group size of 20 or fewer.
- Daily Schedule & Physical Distancing procedures in each time block of the day, at a minimum including:
 - Activities (inside/outside & high energy/low energy).
 - Free and rest times.
 - Meal times.
 - Safety on walking field trips.
- Extra mitigation strategies if it is necessary to share staff and/or spaces between groups.
- Cleaning/Sanitizing/Disinfecting procedures, including ventilation safety:
 - o Hourly, daily, weekly processes.
 - Extra mitigation strategies for shared spaces, including program areas, eating spaces, restrooms, hand-washing stations.
- Face covering expectations (who and in what conditions must wear cloth masks).
 Follow the current masking mandates.

OCCURRENCE OF COVID-19 IN THE WORKPLACE

- Communication to staff and family, including timelines from notice to announcement.
- Plan for staff and children likely to be contagious with COVID-19 or who have been a close contact to a positive case (click to view here).
 - Plan for isolation requirements according to CDC guidelines and return to program for staff and children after testing positive.
 - Plan for quarantine requirements for staff and children who have been a close contact to a positive case. Note that CDC guidelines may not require quarantine depending on the vaccination status or previous infection history of the close contact.
 - Public Health Nurses also may require facilities to collect documentation of negative test results if there was a known exposure.

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- Closure plans and on what timeframe (as anticipated, though may end up on a case-bycase basis).
- CDC protocols, for *Cleaning and Disinfecting* (click to view here).

OTHER RECOMMENDED SAFETY MEASURES

- Educate staff on the effects of off hours activities and the impact those activities can have on the workplace.
- Educate staff, families, and children about signs and symptoms of COVID-19 (click to view here) as well as behaviors that encourage (1) risk reduction behaviors and (2) reducing the stigma surrounding this disease (click to view here).
- Your parents and your staff should know that they should report any positive cases and/or exposure to other positive cases to you immediately.
 - You should then have a plan to share that information with other parents and the Health Department, namely Child Care Licensing.
- Encourage staff and parents to adopt a regular asymptomatic testing plan (where staff and/or staff and parents test for COVID-19 on a regular basis) to catch exposure among the population before cases spread.
- Increase handwashing procedures throughout the day, bookending most activities (i.e.
 washing hands before and after all activities). Only use hand sanitizer if soap and water
 is not available, and if using hand sanitizer, increase supervision while this product is in
 use.
 - Hand hygiene stations should be set up at the entrance of the facility and within each room so that children can regularly clean their hands in general in addition to before they enter and exit the room/facility.

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