



Phase Two Guidance Coronavirus 2019 (COVID-19): Guidance for Childcare Facilities

During Phase Two, childcare facilities should implement the following measures in order to help reduce the risk of COVID-19 transmission among participants and staff. This guidance applies to childcare facilities only. Separate guidance is provided for schools and summer camps. For additional information, visit <u>https://coronavirus.dc.gov/phasetwo</u>.

Support Safety of Employees and Children

Daily Health Screening

- Childcare providers should perform a daily health screen for all children and staff entering the childcare facility. An individual with any of the following symptoms should not enter the facility, and instead should call their healthcare provider:
 - Fever or chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, nasal congestion, nausea or vomiting, diarrhea, or otherwise feeling unwell.
- If an individual develops any of the symptoms above during the course of activities, there should be a plan in place for that individual to immediately isolate and coordinate a way to leave the facility. The recommendation should be made to seek medical attention.

Encourage Healthy Practices

- Ensure adequate supplies (e.g., soap, paper towels, hand sanitizer, tissue) to support healthy hygiene practices.
- Ensure handwashing strategies include washing with soap and water for at least 20 seconds. If soap and water are not available and hands are not visibly dirty, use an alcohol-based hand sanitizer that contains at least 60% alcohol.
- Perform frequent hand hygiene (with soap and water or alcohol-based hand sanitizer).
 - Key times to perform hand hygiene include
 - Before eating food,
 - After using the toilet,
 - Before and after putting on, touching, or removing cloth face coverings or touching your face,
 - After blowing your nose, coughing, or sneezing,
 - After playing on outdoor or shared equipment.

High-Risk Individuals

Childcare providers should ensure that children and staff at high-risk for experiencing severe illness due to COVID-19 consult with their medical provider **before** participating in child care activities. This includes people with the following diagnoses or in the categories listed below:

- Chronic Lung Disease
- Moderate to severe Asthma
- Serious heart conditions
- Immunocompromised conditions
- Severe obesity (>40 Body Mass Index)
- Diabetes





- Chronic Kidney Disease
- Liver Disease
- People 65 years and older
- Any child or staff member who has a medical condition not on this list, but is still concerned about their safety.

Preventing a Vaccine-Preventable Disease Outbreak

According to the Centers for Disease Control and Prevention (CDC) and DC Health data, the COVID-19 pandemic has resulted in a significant reduction in childhood vaccine administrations across the country including the District of Columbia and Maryland.

In order to prevent a vaccine preventable disease outbreak in a childcare setting, it is imperative for all children who attend childcare be **fully vaccinated** according to CDC and DC Health standards.

- A review of immunization schedules can be found <u>here</u>.
- CDC has other resources regarding Vaccine-Preventable Diseases.

Implement Controls to Limit Contact

Non-Medical Face Coverings and Face Masks

All adults should wear non-medical face coverings or face masks at all times while participating in childcare activities. If an adult has a contraindication to wearing a face covering, either medical or otherwise, then it is recommended that the individual should not participate in child care activities.

- No children 2 years of age or younger should wear face masks.
- Children above the age of two years have the option of wearing a face mask based on a joint decision between the parent and the child's healthcare provider, considering medical and developmental factors. If the face mask results in the child touching their face more, it may lead to increased exposure to the virus.

For more information about non-medical face coverings or face masks, please refer to the guidance "Guidance about Masks and Other Face Coverings for the General Public" on https://coronavirus.dc.gov/phasetwo.

Social Distancing

Childcare facilities should ensure appropriate physical distancing by having:

- No more than 10 individuals (staff and children) clustered in one group,
 - For indoor activities, this means 10 people in one room.
 - For outdoor activities, each group of 10 should interact with their own group and not mix between other groups. Each group of 10 should have extra social distance (>6 ft) between them and the next group of 10.
- Six feet of distance between each individual,
- Grouping the same children and staff together each day (as opposed to rotating teachers or children),
- Limiting non-essential visitors,
- No mixing between groups to include entry and exit of the building, at meal time, in the rest room, on the playground, in the hallway, and other shared spaces,





- No large group activities and activities requiring children to sit or stand in close proximity, e.g., circle time,
- Stagger drop-off and pick-up times or implement another protocol that avoids large groups congregating and limits direct contact with parents,
- Curb- or door-side drop-off and pick-up of children, and
- No field trips.

Partitions

Keeping only 10 individuals limited to one room is the safest recommendation in terms of group size. However, in order for some childcare facilities to operate and families in the District to readily access childcare, a larger number of children may need to be served in one room. Therefore, the below are public health recommendations for the use of partitions in the childcare setting in order to accommodate a larger group size:

- Childcare providers may use partitions to separate groups of 10 individuals,
- Partitions must be at least 6 feet tall and of solid material with no holes or gaps,
- Individuals must be at least 6 feet away from the partition on each side,
- The horizontal length of the partition should cover the plane of the space where the individuals are, and
- Partitions must align with regulatory safety protocols to ensure it is not a fall hazard, allows for proper ventilation, meets fire safety regulations, and any other safety regulations.

Potential Exposures and Positive COVID-19 Cases

- If any child or staff member has been in close contact with a person who is positive for COVID-19, then the child or staff member should not enter the childcare facility until evaluated by their healthcare provider, or until they have completed their quarantine period without becoming symptomatic or diagnosed with COVID-19.
- If any student or staff member has been in close contact with a person who is awaiting a COVID-19 test result, then the student or staff member should not enter the childcare facility until the close contact tests negative. If the close contact tests positive, then they should seek guidance from their healthcare provider or DC Health.

In the event that a childcare provider identifies a child or staff member who has tested COVID-19 positive, it is important for the childcare provider to establish a plan for COVID-19 exposures.

- Identify a point of contact at the childcare facility that an employee can notify if they test positive for COVID-19 and choose to disclose this information.
- Staff or students diagnosed with COVID-19 should not enter the childcare facility until they have been cleared from isolation.
- Childcare facilities should notify DC Health by emailing <u>coronavirus@dc.gov</u> with the following information:
 - "COVID-19 Consult" in the email subject line
 - Name and direct phone number of the best point of contact for DC Health to return the call
 - Short summary of incident/situation
- An investigator from DC Health will follow-up within 24 hours to all appropriately submitted email notifications.
- In consultation with DC Health, childcare facilities should have a notification process in





place to share the following with staff and parents:

- Education about COVID-19, including the signs and symptoms of COVID-19
- Referral to the Guidance for Contacts of a Person Confirmed to have COVID-19, available at <u>https://coronavirus.dc.gov</u>
- Information on options for COVID-19 testing in the District of Columbia, available at <u>https://coronavirus.dc.gov/testing</u>
- DC Health will instruct childcares on dismissals and other safety precautions in the event a known COVID-19 individual came in close contact with others at the facility.

Cleaning and Disinfecting

All childcare providers should regularly clean surfaces, toys and materials per <u>District guidance on</u> <u>cleaning and disinfecting</u> and the CDC's <u>updated guidance for childcare providers</u>.

- Emphasis must be placed on regular cleaning and disinfection of high-touch surfaces, including but not limited to door handles, chairs, light switches, elevator buttons, toilets, and faucets.
- Toys, including those used indoors and outdoors, must be frequently cleaned and sanitized throughout the day.
 - Toys that have been in children's mouths or soiled by bodily secretions must be immediately set aside. These toys must be cleaned and sanitized by a staff member wearing gloves, before being used by another child.
- For all cleaning, sanitizing, and disinfecting products, follow the manufacturer's instructions for concentration, application method, contact time, and drying time prior to use by a child. See <u>CDC's guidance for safe and correct application of disinfectants</u>.
- Providers must place signage in every classroom reminding staff of cleaning protocols.

Building Considerations

Child care providers who are reopening after a prolonged facility shutdown should ensure all ventilation and water systems and features (e.g. sink faucets, drinking fountains, decorative fountains) are safe to use as follows:

- Ensure ventilation systems operate properly and increase circulation of outdoor air as much as possible, for example by opening windows and doors. Increase in air circulation should be continued after reopening where safe and possible. Do not open windows and doors if doing so poses a safety or health risk (e.g., risk of falling, triggering asthma symptoms) to children using the facility.
- Flush water systems to clear out stagnant water and replace it with fresh water. This will remove any metals (e.g. lead) that may have leached in to the water and minimize the risk of <u>Legionnaires' disease</u> and other diseases associated with water.
 - Further details on steps for this process can be found on the CDC website at <u>https://www.cdc.gov/coronavirus/2019-ncov/php/building-water-system.html</u>.

The guidelines above will continue to be updated as the outbreak evolves. Please visit <u>https://coronavirus.dc.gov/</u> regularly for the most current information.