Guidance for Child Care Providers

Now, as always, child care providers play a critical role in their communities, particularly for parents who work in the health care industry or other essential roles. Each child care provider must make the decision whether to be open or closed, based on their unique situation and the needs in their community.

For child care providers who are currently open or are seeking to reopen, the Tennessee Departments of Human Services and Education are recommending that programs <u>follow CDC guidance for child care programs that remain open</u>. The Departments are also providing additional guidance to child care facilities throughout the state on proactive measures, including screening recommendations for staff and visitors. These proactive measures are intended to help limit the spread of COVID-19 and safeguard children, families, and child care provider staff.

- **Limiting Persons in the Facility**: Providers should prohibit persons from the facility with the exceptions of:
 - Facility staff
 - Persons with a legal authority to enter, including law enforcement officers, child care licensing staff, and Child Protective Services staff
 - o Professionals providing services to children
 - Children enrolled at the facility
 - Parents or legal guardians who have children enrolled and present at the facility
- Pick-up and Drop-Off Protocols: Pick-up and drop-off should occur outside the
 facility, unless it is determined that there is a legitimate need for the parent to enter
 a facility. Hand hygiene stations should be set up at the entrance of the facility, with
 supervised use. Consider staggering arrival and drop off times and/or have staff
 come outside the facility to pick up the children as they arrive.
- **Screening:** Persons who have a fever of 100.4° (38.0°C) or above or other signs of illness should not be admitted to the facility. Encourage parents to be on the alert for signs of illness in their children and to keep them home when they are sick. Screen staff and children upon arrival, if possible. Require staff to report any illness to their supervisor and require notification of COVID-19 positive case in employee's household. Examples of screening methods are available in the <u>CDC Guidance</u>.
- **Limiting Class Sizes and Mixing:** All efforts should be made to limit congregation of children and class sizes to 10 or less.
 - Groupings should include, to the extent possible, the same children each day to minimize exposure





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- Limit the mixing of children, such as staggering playground times and keeping groups separate for special activities such as art, music, and exercising. Clean or disinfect equipment between groups, when possible.
- **Face Masks:** When feasible, staff members and older children should <u>wear face</u> <u>coverings</u> within the facility as recommended by the CDC. Cloth face coverings should NOT be put on babies and children under age two because of the danger of suffocation. Consider explanations to assist children with understanding why staff are wearing face coverings, as appropriate.
- **Do not allow sick children to be cared for in the facility:** If a child becomes sick while at the facility, contact the parent or guardian immediately and separate the child from other children at the facility. Make sure emergency contact information is current.
- Have a plan if someone is or becomes sick.
 - Plan to have an isolation room or area (such as a cot in a corner of the classroom) that can be used to isolate a sick child. Additional information about isolation in related settings can be found here: <u>isolation at home</u> and <u>isolation in healthcare settings</u>.
 - Be ready to follow CDC guidance on how to <u>disinfect your building or facility</u> if someone is sick.
 - If a sick child has been isolated in your facility, clean and disinfect surfaces in your isolation room or area after the sick child has gone home.
 - Send staff home if they become sick with COVID-19-like symptoms. Evaluate leave policies to accommodate the provisions of these guidelines. Covered employers and employees should be aware of the provisions of the federal Families First Coronavirus Response Act, which allows for paid sick leave or expanded family and medical leave for specified reasons, such as for self-quarantining or seeking a medical diagnosis for COVID-19 symptoms.
 - o If COVID-19 is confirmed in a child or staff member:
 - Close off areas used by the person who is sick.
 - Open outside doors and windows to increase air circulation in the areas.
 - Wait up to 24 hours or as long as possible before you clean or disinfect to allow respiratory droplets to settle before cleaning and disinfecting.
 - Clean and disinfect all areas used by the person who is sick, such as offices, bathrooms, and common areas.
 - If more than 7 days have passed since the person who is sick visited or used the facility, additional cleaning and disinfection is not necessary.





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- Continue routine cleaning and disinfection.
- Do not permit the child or staff member to return to the facility except as recommended by the child or staff member's medical provider.

For more details and recommendations, please refer to the <u>Centers for Disease Control</u> <u>and Prevention's Guidance for Child Care Programs that Remain Open</u>, which covers topics such as:

- Social Distancing
- Child pick up and drop off procedures
- Cleaning and disinfecting toys and bedding
- Safely caring for infants and toddlers
- Food preparation and meal service
- Talking with children about COVID-19

Contact your Program Evaluator

As providers begin to reopen pursuant to federal, state and local regulations, the departments request the provider **contact their Program Evaluator** to keep them informed of the agency's status. Program Evaluators will be able to explain how monitoring and compliance will be determined for the immediate future, and can discuss any continuing challenges and impacts the provider may face to better inform the department on the needs of the child care community going forward.

During these extraordinary times, Program Evaluators are supporting providers during weekly calls to provide guidance and clarification on continued best practices to ensure safe, healthy and educationally rich environments for the children in Tennessee. These frequent touchpoints are also a continued source of information for providers in better understanding department programs which offer assistance to providers suffering financially as a result of tornados or COVID-19 pandemic.



