

Implementing The CDC Guidance for Child Care Programs that Remain Open (CDC version 4.21.2020)

Pre-Recorded Webinar
Thursday, May 7th, 2020

Welcome!

- Offered by The Office of Child Development and Early Learning (OCDEL), Bureau of Certification, in collaboration with the Pennsylvania Key
- Today's Webinar recording will be posted on PA Keys Coronavirus page: <https://www.pakeys.org/coronavirus/>
 - Slides are posted with the recording
- Pre-recorded Webinars will be posted by Friday on PA Keys website for **ON DEMAND** access
- Weekly pre-recorded Webinars will be different in response to your questions sent to this address: hssco@pakeys.org

Facilitated by

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 - In support of Pennsylvania's Office of Child Development & Early Learning



Centers for Disease Control (CDC) and Prevention: Supplemental Guidance Updated 4/21/2020

Guidance for Child Care Programs that Remain Open:

- <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/guidance-for-childcare.html>

Purpose of Pre-recorded Webinars:

1. Clarify practices described in current CDC Guidance
2. Describe how CDC Guidance may be implemented to keep children, staff, and parents safe and healthy
3. Address questions submitted by providers

Position of the Bureau of Certification

- The Bureau of Certification is recommending child care providers follow the CDC guidance to the best of their ability.
- CDC Guidance describes what programs “should” do.
- Child care operators considering reopening must familiarize themselves with this guidance.
 - See “Phased-In Approach to Reopen Business: What it means for child care programs” (OCDEL announcement on 5/2/2020)

Today's Webinar Topics

- More on masks or cloth face coverings
- Screening of children and staff before entering the facility or home
 - Drop-off strategies; temperature-taking
 - 6 feet physical distancing and use of Personal Protective Equipment (PPE)
 - Excluding children/staff with COVID-19 symptoms
- Visitors to the Facility
- Cleaning and Disinfecting Practices
- Ratios and Group Sizes

General Preparedness Tips

- Communicate with families frequently:
 - Update emergency contact information
 - Inform them regularly about your policies during the COVID-19 pandemic emergency
 - Provide information virtually or over phone
- Check-in with families about their wellbeing:
 - Share community resources, i.e. for food insecurity, housing, health coverage

Cloth Face Coverings or Masks

- *Adults and children over 2 years should wear a cloth face covering or mask that covers nose and mouth*
- *When feasible, staff and older children should wear face coverings within the facility*
- Children over age 2 may not be able to feasibly keep a mask on without frequently touching or removing it, which defeats its purpose
 - Provider and parent decide if mask is feasible for child
 - For children with a developmental disability, the parents decide if wearing a mask is feasible for their child

Cloth Face Coverings or Masks

- Cloth face coverings are hand made
- Ideally, cloth face coverings are washed daily; best to use facility's washer/dryer
- Leave the cloth face coverings at the facility to prevent spread of the virus
- Paper masks may be re-used (*new information*)
- No masks or cloth face coverings should be worn when napping, eating, or exercising
- Avoid using a mask on anyone who has trouble breathing, or is unable to remove the mask without assistance

Cloth Face Coverings or Masks

- Adults can assist children to remove masks; avoid touching the eyes, nose, and mouth
- Safe ways to handle cloth face coverings or masks:
 - Adults assist children to remove masks
 - At meals/naps, place mask on a name-labeled square of paper towel on the table or nap mat next to the child
 - Place the mask surfaces which touch nose/mouth face-down
 - Masks can be stored in a labeled paper bag (out of reach)
 - Overnight, paper masks can be aired out and re-used
- Immediately after handling a mask, adults and children should hand wash or use hand-sanitizer(> 60% alcohol) with adult supervision

How to Make Cloth Face Coverings

Go to the CDC Resource:

- “Use of Cloth Face Coverings to Help Slow the Spread of COVID-19”
- <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/diy-cloth-face-coverings.html>

Use of Hand-Sanitizers

- Must be at least 60% alcohol
- Must be kept out of the reach of children at all times
- May be used with adult supervision on very young children
- Adult applies the hand-sanitizer on the child's palm and fingers and rubs it on the skin until it is completely absorbed or dries (usually less than 10 seconds)

Drop Off Protocol – CDC Guidance

- **Plan arrival/drop off outside the facility, even curb-side**
- Stagger arrival and drop off times
- Use hand sanitizer for sign-in/out by each parents; wipe down the pen with alcohol each time
- Maintain 6 feet physical distancing
- Do not hug or shake hands at drop off (or pick up)
- Designated person to drop off a child or the provider managing drop off should not be:
 - A “vulnerable” person (older person such as a grandparent or person with serious underlying medical condition)

Daily Health Check – Do This Before Child Enters the Facility

- Greet children to make them feel comfortable
- **Do not admit a child with one or more of these symptoms (CDC Guidance):**
 - **A fever (≥ 100.4 degrees Fahrenheit or 38 degrees Celsius)**
 - **Cough**
 - **Trouble breathing (rapid breathing or difficulty breathing)**
- In addition, use routine daily health check tools for excluding children with signs/symptoms of illness (regardless of whether or not child shows signs or symptoms of COVID-19)

What's NEW: CDC's 3 Screening Methods

Method #1

Social/Physical Distancing (must stay 6 feet apart)

- Child's temperature is taken at home
- Parent/Guardian confirms child does not have any fever, cough, shortness of breath, or trouble breathing
- Visual inspection of child for signs of illness, including flushed cheeks, rapid breathing, fatigue, or fussiness

Family Child Care Homes

Method #1

Social/Physical Distancing (must stay 6 feet apart)

- Child's temperature is taken at home
- Parent/Guardian confirms before bringing the child to your home that child does not have any fever, cough, shortness of breath, or trouble breathing
- Quick visual inspection by operator of child upon arrival at the door for signs of illness, including flushed cheeks, rapid breathing, fatigue, or fussiness

Strategies for Family Child Care Homes

Screen children while they are still at home.

Use FaceTime (iPhone) or Google Duo (Android):

- Observe thermometer and measurement of the child's temperature
- Observe how parents take the child's temperature and offer guidance
- Do an audio-visual health check of the child prior to them leaving home

Family Child Care Homes

- Stagger drop off/pick up times with families, if possible
- If 2 parents arrive at the same time, one should remain in the car until the other is finished dropping off
- Do not hug or shake hands at drop off or pick up
- Designated person to drop off or pick up a child should not be a “vulnerable person” such as a grandparent or person with serious underlying medical condition

What's New: CDC's 3 Screening Methods

Method #2

Barrier/Partition Controls

- Stand behind a physical barrier/partition
- Make visual inspection of the child for signs of illness
- Conduct temperature screening with thermometer
- Use clean pair of gloves for each child unless using a non-contact (no touch) thermometer
- Clean and disinfect thermometer between each use
- Use of hand-sanitizers (>60% alcohol)

What's New: CDC's 3 Screening Methods

Method #3

Personal Protective Equipment (PPE)

- Use PPE if within 6 feet of a child
- Wash hands, put on face mask or cloth face covering
 - Use eye protection (i.e. sports goggles, regular glasses are not enough; need coverage on sides and top/bottom)
 - Use disposable gloves, possibly gown, or smock, long sleeves
- Take the child's temperature and visually inspect the child.
- Use of hand-sanitizers (>60% alcohol)

Guidance on Visitors

- Explain to parents and others that your facility must not allow visitors
- If a parent insists to enter the facility, they may have access per the regulations
- No Early Intervention (EI) staff should go into child care when in the yellow phase:
 - If child care teacher agrees, EI staff can do a tele-intervention with the teacher to support the child who is receiving EI through coaching and helping the teacher embed the child's IFSP/IEP goals into the regular routines of the classroom.

Cleaning and Disinfecting

Definitions

- **Clean:** To physically remove dirt, debris, and sticky film by washing, wiping and rinsing
- **Disinfect:** To kill nearly all of the germs on a hard non-porous surface

Cleaning and Disinfecting

- Clean, sanitize, and disinfect surfaces more often than usual (See *Caring for Our Children*: Appendix K: Routine Schedule for Cleaning, Sanitizing and Disinfecting: <https://nrckids.org/files/appendix/AppendixK.pdf>)
- Upon entry into the facility, all adults and children must hand wash or use hand-sanitizer (> 60% alcohol)
- Practice meticulous hand washing with children
- Follow strict respiratory etiquette, avoid touching of your eyes, nose, mouth, or face.

Reduce Clutter and Shared Toys

- Keep surfaces clear so you can clean and disinfect them easily
- Store items you don't use
- Provide as much open space as possible
- Limit sharing toys to items that can be cleaned and disinfected easily
- Be strict about putting mouthed or handled toys into a sealed bin with disinfectant after a child touches the toys

Cloth Bedding

- If possible and laundry capabilities are available, consider washing bedding, nap items and soiled clothing at the facility
- Avoid taking items back and forth to home
 - Transferring items in and out increases the chances for spread of the virus
- Limit personal items coming into the facility, i.e. backpacks, toys, stuffed animals

Ratios and Group Sizes

- Although the CDC Guidance suggests a lower ratio for infants, ratios required by PA regulation are still applicable (i.e. 1:4 for infants)
- A lower ratio is better than a higher ratio in limiting the risk of exposure to the virus
- CDC Guidance:
 - Keep group sizes small, if possible
 - Children and staff should not change groups or mix groups
 - Assign groups their own room

Potential Exposures

- "A potential exposure means being a household contact or having close contact within 6 feet of an individual with confirmed or suspected COVID-19 for at least 10 minutes.
- The timeframe for having contact with an individual includes the period of time of 48 hours before the individual became symptomatic. "

Reporting Requirements

IMPORTANT

If there is a positive case of COVID-19 in a child or adult who has been present in the child care facility:

- Call **PA Department of Health** at 1-877-724-3258
- Inform OCDEL by contacting the appropriate Regional Office of Certification

Please Email Your Questions

- Recordings and slides posted on the PA Keys Coronavirus webpage:
<https://www.pakeys.org/coronavirus/>
- Webinar topics are new each week to address questions, changes, and new guidance
- OCDEL is committed to reviewing and addressing all questions to the best of its ability
- Email your questions/comments so we know what your needs are! Use this email:
hssco@pakeys.org