

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

Pre-Recorded Webinar
Thursday, May 14, 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: 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 questions sent to this address: hssco@pakeys.org

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



Centers for Disease Control (CDC) and Prevention: Supplemental Guidance (Version April 21, 2020)

Guidance for Child Care Programs that Remain Open:

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 May 2, 2020)

Today's Webinar Topics (May 14, 2020)

- More Cleaning and Disinfecting Practices
- Exclusion and Return To Care Criteria
- Screening staff and children upon arrival
 - COVID-19 Symptoms and Risk Factors
 - Drop-off strategies
- Frequently Asked Questions
 - CDC Guidance on Masks and Cloth Face Coverings

Communication is Key

Communicate with families frequently:

- Update emergency contact information
- Inform them about your new policies and procedures
- Offer ways to communicate virtually

Check-in with families about their wellbeing:

- Share community resources
- Encourage to keep child's well-visits on schedule
- Children need routine well-visits, screenings and immunizations -- healthy and ready to learn

Clean & Disinfect More Often Than Usual

- 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.
- See *Caring for Our Children*: Appendix K: Routine Schedule for Cleaning, Sanitizing and Disinfecting: nrckids.org/files/appendix/AppendixK.pdf

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)

What Surfaces Should Be Cleaned?

Always **clean** before applying a disinfectant

- Toys
- Floors
- Clothing (including hats)
- Cribs, cots, and mats
- Play equipment
- Refrigerators

What Surfaces Should Be Disinfected?

- Drinking fountains
- Door and cabinet handles (high-touch)
- Surfaces that have been soiled with body fluids
- Mouthed objects (collect mouthed toys in a tub)
- Toileting and diapering areas:
 - Diaper-changing tables and diaper pails
 - Counter tops in bathrooms
 - Potty chairs
 - Handwashing sinks and faucets
 - Toilets
 - Bathroom floors

Bleach as a Disinfectant

- Low cost, effective (if used correctly), readily available
- Use an EPA-registered disinfectant
- Mix daily, follow directions on the label for disinfecting
- Label the bottle with the date and the product
- Wear gloves and protective eyewear when diluting
- Mix in well ventilated areas
- Use a funnel when mixing to decrease the amount of bleach inhaled
- Mix bleach into cool water to reduce fumes (rather than adding water to bleach)

Search EPA-Approved *List N*

- List of EPA-registered cleaning products
- EPA-registered products effective against the virus:

www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2

Follow product information on concentration, application method, and contact times

Always Use Caution with Disinfectants

- Provide ventilation
- Hold the bottle at a safe distance away from the nose and mouth when spraying
- Label spray bottle dilutions with product and date
- Keep products out of children's reach, in a locked cabinet

Always Use Caution with Disinfectants (continued...)

- Wear personal protective equipment such as gloves and eyewear
- Disinfect while children are not in the area
- The surface should be dry by the time the children return to the area
- Do not mix products or reuse bottles for different products

Reduce Clutter and Shared Toys

- Keep most surfaces clear of clutter
- Easier to clean and disinfect un-cluttered surfaces
- Store items away that you don't use
- Provide as much open space as possible
- Limit sharing toys
- Be strict about putting mouthed or handled toys into a special bin with disinfectant after a child touches toys
- Always keep disinfectants locked away and out of the reach of children

Limiting Items from Home

- Limit personal items brought into the facility, i.e. backpacks, toys, stuffed animals
- Ok to bring child's bedding, special blankets to provider
- Ideally, if possible and laundry capabilities are available, wash the child's bedding, nap items and soiled clothing at the facility
- Avoid moving items in and out of rooms
- Limit transferring items back and forth to home

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.

Exclusion Criteria and Return to Care Guidance

Symptoms of COVID-19

- **Fever (≥ 100.4 degrees Fahrenheit, 38 degrees Celsius)**
- **Cough**
- **Shortness of breath or difficulty breathing**
- Diarrhea
- Chills and/or repeated shaking with chills
- Muscle pain
- Headache
- Sore throat
- New loss of taste or smell

Before Staff or Children Enter the Facility

- Exclude with one or more symptoms:
 - A fever (≥ 100.4 degrees Fahrenheit)
 - Cough
 - Trouble breathing (shortness of breath, rapid breathing or difficulty breathing)
 - Chills or repeated shaking with chills
 - New loss of taste or smell
- 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 About a Fever?

For a child or staff not tested for COVID-19

- Refer to the PA Code for the existing licensing regulations on exclusion and return to care criteria
- PA Code suggests exclusion for fever:
pacodeandbulletin.gov/Display/pacode?file=/secure/pacode/data/028/chapter27/s27.76.html
- PA Code is non-specific as to when to return to care, except for infants under four months (when fever is resolved or judged to be noninfective)

Best Practices

- Given that PA Code is non-specific about return to care for fever, see *Caring for Our Children (4th edition)*: nrckids.org/cfoc
- *Caring for Our Children* has guidance for fever under influenza management here: nrckids.org/CFOC/Database/7.3.3.2
- Allow children and staff who have been excluded for fever, or respiratory symptoms AND fever to return once fever has resolved for 24 hours with no fever reducing medications.

What About a Cough?

- Very commonly, a child might arrive with a cough and/or runny nose (mild respiratory symptoms)
- The child is behaving normally and has no fever
- Testing or exclusion is not recommended
 - This is consistent with PA Code and *Caring for Our Children*

If a child or staff has been tested for COVID-19

The CDC does provide guidance for returning:

www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/steps-when-sick.html

CDC Guidance for those who are tested

If you have had a test to determine if you are still contagious, you can leave home after these three things have happened:

1. You no longer have a fever (**without** the use of medicine that reduces fevers)
AND
2. other symptoms have improved (for example, when your cough or shortness of breath have improved)
AND
3. You received **two negative tests in a row, at least 24 hours apart**. Doctor will follow [CDC guidelines](#)

www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/steps-when-sick.html

How to Discontinue Home Isolation

If you have not had a test to determine if you are still contagious, you can leave home after these three things have happened:

1. You have had no fever for **at least 72 hours** (that is three full days of no fever **without** the use of medicine that reduces fevers)
AND
2. Other **symptoms have improved** (for example, when your cough or shortness of breath have improved)
AND
3. At least **10 days** have passed since your symptoms first appeared

www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/steps-when-sick.html

Testing for COVID-19

- In general, decisions about testing will depend on local testing capacity, coronavirus incidence in the local area, testing supplies and other factors
- Many people who want testing will not be tested
- Check with the person's healthcare provider
- We know many/most people with coronavirus actually have no symptoms
- Some people will go undiagnosed, so this is why the CDC Guidance recommends physical distancing, hygiene, and masks/cloth face coverings

Who is at Risk for Severe Illness?

People of all ages with underlying medical conditions

- Chronic lung disease or moderate to severe asthma
- Serious heart conditions
- Immunocompromised
- Severe obesity (BMI \geq 40 or higher)
- Diabetes
- Chronic kidney disease undergoing dialysis
- Liver disease

COVID-19 Basics

There are only three places the Coronavirus enters the body:

1. Eyes
2. Nose
3. Mouth

COVID-19 Basics

You cannot get COVID-19 if you protect your:

1. Eyes
2. Nose
3. Mouth

Don't touch your eyes, nose, or mouth!



Person-to-person spread of COVID-19 appears to be mainly by respiratory droplets generated when an infected person coughs or sneezes.

Cloth Face Coverings or Masks

- ***Adults and children over two 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 two 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
- 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*
- www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/diy-cloth-face-coverings.html

Drop Off Protocol – CDC Guidance

- **Plan arrival/drop off outside the facility, even curbside**
- 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 six 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)

What's NEW: CDC's Three Screening Methods

Method #1

Social/Physical Distancing (must stay six 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 six 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 two 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 Three 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 Three Screening Methods

Method #3

Personal Protective Equipment (PPE)

- Use PPE if within six 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)

Ratios and Group Sizes

- Although the CDC Guidance suggests a lower ratio for infants, ratios required by Pennsylvania Regulations 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 six 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 **Pennsylvania 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:
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