

Open, Healthy Family Child Care Programs

**A FAMILY CHILD CARE
PROVIDER GUIDE
TO REOPENING
AND STAYING OPEN
DURING THE
COVID-19 PANDEMIC**



ALL OUR KIN

Introduction

All Our Kin has developed this document to help you, family child care providers, navigate the many difficult decisions you face running a child care program during the COVID-19 pandemic. Your family child care programs play an essential role in caring for the children and families in your communities, and with coronavirus affecting our communities, your work is more essential than ever.

This document is meant to help you strategize and plan. Having clear guidance will help alleviate concerns and fears and will allow all FCC programs to be proactive should coronavirus cases arise. The details provided are consistent with our four-part webinar series “Open, Healthy FCC Programs”, guidance from the Centers for Disease Control and Prevention (CDC) and Caring for Our Children, 4th Edition. We encourage you to print a copy of this document, if possible, because there are several places where you can take notes, write down questions, and even make lists of supplies you may need.

You are welcome to share this document with the families in your program to help illustrate the plans you have made and the precautions you are taking in your program. We also encourage you to view this disease in concert with all childhood illnesses and diseases and incorporate this guide into your existing policy and procedures on illness and exclusion criteria. Our ultimate goal is to help you make thoughtful decisions that keep everyone in your program, and in your own family, healthy and safe. We plan to create updated versions as the virus situation shifts, so as always, we welcome your feedback. Adapting to these guidelines may seem like a heavy task, but you’ve got this! All Our Kin is here to support you every step of the way.

Thank you for all you do for the children and families in our communities.

Acknowledgements

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Disclaimer

All Our Kin created this document for general information purposes only. This document should not be considered advice regarding how to operate a childcare program during COVID-19. You should always consult with local and state health offices as well as applicable federal guidance, including from the CDC, for the most complete and up-to-date guidance about running a child care program during the COVID-19 pandemic. All Our Kin is not responsible for the decisions you make about how to run your child care program. As the owner of your program, the decisions are yours and yours alone. All Our Kin hereby disclaims any and all liability for the accuracy and efficacy of the content of this document to the full extent permitted by law.

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Open vs. Wait?

INITIAL ASSESSMENT OF FCC PROGRAM NEEDS PRIOR TO OPENING

Environment/Physical Plant/Supply Review

Is there a place near the entry of my home to conduct the initial and daily risk assessment and health check?	One point of entry is recommended.
Will I need to make any modifications?	
Will I need help during those busy times?	
What group size can I accommodate?	Check with your state.
If applicable, is a waiver required to care for more children?	
Do I meet the licensure requirements for my state?	
Will I be adjusting children's hours or providing staggered drop off and pick up times to accommodate screening needs and maintain social distancing?	<ul style="list-style-type: none">■ Using red and green stop and go circles works well here so families know when to enter.■ Using weekly schedules for drop-off and pick-up can help stagger parent arrivals and make check-in easier.

SUGGESTIONS FROM PROVIDERS

For drop-off and pick-up routines, educators have had to make several changes to ensure the safety of their children and themselves.

- These changes included an initial risk assessment, including monitoring for symptoms, asking parents about recent exposure, and temperature-taking.
- Some suggestions for temperature-taking were to take temperatures of not only the children, but also of the parents upon arrival, use no-contact or temporal thermometers, and take temperatures another time during the day.
- Several educators noted that in Connecticut, temperature taking is no longer a requirement but it is still considered best practice and therefore the educators on our panel are still taking temperatures. Many also noted that children can display clear symptoms or remain asymptomatic.
- Shoe areas were suggested for shoe removal upon arrival, as well as a hand sanitizer station at the entrance in addition to other places in the house.
- Parents do not enter the educators' homes, and are asked to wear masks while dropping their children off and picking them up.

<p>Do I have enough space to allow cots & cribs to be spaced six feet apart?</p> <hr/> <p>Am I eliminating nap times for older children?</p>	<p>Children can be placed to sleep—head, toe, toe, head to ensure adequate spacing.</p>
<p>Do I have any portable or no-touch sinks?</p> <hr/> <p>How many bathrooms?</p> <hr/> <p>Will I have designated child and provider bathrooms?</p> <hr/> <p>Is there a sink close to the entry?</p> <hr/> <p>Is there a food preparation sink that can be converted to another hand wash sink (only if there are no infants/toddlers where food preparation is required)?</p>	
<p>Are waste baskets covered with a touch free foot pedal or electric eye?</p>	
<p>Do I have enough cleaning and disinfecting supplies and PPE (personal protective equipment) such as: facial coverings for providers, adults, and older children when developmentally appropriate (disposable or three-ply cloth), alcohol-based hand sanitizer (60-80%), liquid soap, disinfecting solution, paper towels, disposable gloves, shoe covers or indoor shoes, smocks or large shirts for direct contact (removed and laundered after each potential contamination).</p>	<p>Check with local hospitals, clinics, Red Cross, local universities, town services, etc. Some medical facilities received extra supplies and with admissions down, may have some to donate.</p>
<p>Do I make a list of possible community resources for donations?</p>	

<p>Will I be providing sheets and blankets?</p> <hr/> <p>If not, how will I handle this?</p>	<ul style="list-style-type: none"> ■ If yes, make sure you have the capability to launder under high heat wash and hot dryer cycle. ■ Check water temperature in advance as it may need to be turned up, but should not be too hot for handwashing purposes (must be below 120°F or 48.9°C). ■ Check water first before children arrive.
<p>What type of thermometer will I use?</p>	<ul style="list-style-type: none"> ■ Otic (ear), temporal touch (forehead) and/or thermal scan (non-touch). ■ An additional thermometer is recommended if you are receiving inconsistent or low readings. ■ Have extra batteries available. ■ Post step-by-step instructions at the door so that everyone is using the same method. ■ Use the same thermometer, if possible, on all children and families each day for accuracy.
<p>When a child gets sick, do I have an identified space where they can be isolated from the other children and monitored until pickup?</p>	
<p>Will I provide an enhanced cleaning and disinfecting schedule when children are not onsite when stronger bleach or other EPA-approved chemicals can be used?</p>	<ul style="list-style-type: none"> ■ Allow for proper ventilation with use. ■ Check the EPA for approved disinfecting chemicals. ■ There have been warnings about knock-offs that may be diluted and not effective. ■ Cleaning and disinfecting three times a day is recommended.
<p>Do I have any water coolers?</p> <hr/> <p>Are the coolers high touch with a chance for illness transmission?</p>	<p>You may consider not using water coolers for now.</p>

Do I use indoor sand and water tables?	Provide individual basins for water and sand play.
Do I have enough supplies for individual bins for crayons, markers, playdough, clay, books, LEGO® and other high-touch manipulatives?	<ul style="list-style-type: none"> ■ Consider using a designated bucket to remove dirty or soiled toys from play areas. ■ Avoid allowing children to share toys.
Do I have creative ideas around social distancing?	<ul style="list-style-type: none"> ■ Consider using dividers, individual six-foot blankets for children for indoor or outdoor group time so they understand social distance. ■ Tape lines outside to indicate where parents/children should stand when waiting to enter. ■ In small spaces, using screens or similar barriers to divide spaces could help socially distance groups of children.

SUGGESTIONS FROM PROVIDERS

Social distance is hard to maintain during play, naps, and day-to-day activities at your site.

- For play time, you can mark special areas for children with hula hoops, painters' tape, or other shapes on the floor.
- Toys shouldn't be shared between children, so consider reserving a few of a child's favorite toys for them only.
- Have a "dirty toy" bucket for used toys/materials that children have put in their mouths.
- Space chairs apart for story times, and the same for cots or mats during nap times.
- Place cushions for circle time as far apart on the floor as possible, this way the children know to go directly to their spots when circle time starts.
- To help the children understand what six feet of distance actually looks like, use visual aids like floor markings or six feet of blocks as an interactive learning tool.
- Try encouraging children to get used to mask-wearing as much as possible, and encourage parents to wear masks during drop-off and pick-up too.

Check with your state: in some states masks are optional but in others they are required.

Family Considerations Prior to Opening/Reopening

Have I surveyed families to see who would be returning?

Do I have, in writing, communication to parents with our policy on self-quarantining when visiting 'hot spots' and traveling by airplanes, and other guidelines and requirements for parent safety?

Do I have it in a binder for an inspector to see?

Did I survey families about their fears, needs, and whether they have enough/adequate PPE?

Consider providing families with an updated list of all states and countries that, if traveled to, require a 14-day self-quarantine period upon return.

SUGGESTIONS FROM PROVIDERS

Social and emotional support: Taking care of your children's and your own emotions during a time of such high stress is so important. Know that you are not alone in feeling overwhelmed! Some ideas for how to *take care of yourself and your children*:

- To best care for our children, it is important to also take care of yourself. Yoga for stress release, therapy or counseling, and getting outdoors; as well as finding ways outside of physical contact to express gratitude and love.
- It is important to process your emotions, and speaking with other educators about their experiences may help you to do this.
- For the children, it is important to look for signs of stress. Consider keeping the news off around them, and talking about positive topics. For additional information on signs of stress in children, visit: <https://www.stress.org/signs-of-childhood-stress-from-covid-19-and-what-to-do>

Have I been keeping families updated on a regular basis on our steps taken toward opening/ reopening?

Informative family letters work well here.

Did I share screening tools, risk assessment protocols and any waiver forms with families?

Would weekly check-ins be beneficial to discuss expectations, exposure risks, and other updates in the lives of their children?

SUGGESTIONS FROM PROVIDERS

Other important things to consider when reopening your site are waivers, parent communication, and monitoring of children’s symptoms.

- AOK has templates for liability waivers, which are helpful for communication with parents. If these documents would be useful to your child care program, reach out to AOK for copies of templates.
- It is important to communicate with parents your expectations for their social distancing practices at home, how exactly you plan to change your site to accommodate for COVID-19 restrictions, and what flexibility you require of them (for drop off, meals, and other similar activities).
- Keep open lines of communication so you know about any out of state travel, or anyone in the child’s family who may have been exposed to the virus.

Do I have “stop the spread” signs and information posted on the door about screening?

This will state the risks involved in any group setting such as Family Child Care Programs.

Will I be requiring a special work condition acknowledgment and disclosure and special program attendance disclosure stating the risks of returning to our program and/or working in our program?

Did I ask families if their children were current on physical examinations, immunizations and if there were any new medications or health concerns for their children?

Stress continuing with well visits when due as much as possible.

If not, does our state require State of Emergency Waivers?

City Health Departments may be helpful here.

If not, do I have a list of mobile clinics and PCPs that have well child days or a list of those offering telemedicine?

Have I provided families with a list of items needed and considerations with the opening/reopening?

HOW TO SAFELY OPEN WITH HEALTH AND SAFETY IN MIND

Congratulations on your choice to open or reopen your program. If you are currently open, thank you for providing such a needed service to the children and families of your community. Several tools have been created to streamline the initial risk assessment and the daily health check incorporating existing best practices and following the American Academy of Pediatrics Standards of Care. Screenings should be implemented safely, respectfully, as well as in accordance with any applicable privacy laws or regulations. Confidentiality should be maintained.

Initial Risk Assessment of Children & Families *(includes four relevant questions)*

The initial assessment of risk will give you an overall picture of what risk factors/exposures have occurred in the family unit. Some families may choose to wait to return based on age or chronic conditions.

- **Have you or any household members been diagnosed with COVID-19?**

Are you or any household member being evaluated for COVID-19?

- **Do you or does anyone in your household have any symptoms of COVID-19?**

These are: temperature above 100°F (objective) or subjective symptoms such as flushed cheeks, rapid breathing or complaints of feeling cold or hot, cough, sore throat or shortness of breath.

Be aware also of secondary symptoms including loss of taste and/or smell, nausea, vomiting, diarrhea, extreme fatigue. Also note that Kawasaki symptoms are similar but include a beefy, red tongue and enlarged lymph nodes.

Also note another syndrome associated with positive-testing pediatric patients in Pediatric Multisystem Inflammatory Syndrome (PMIS). This syndrome in COVID-19 positive children also includes a fine body rash, bluing around the mouth and fingertips and toes and chest pain. Parents should contact their PCP for further follow-up.

- **Are you or is anyone in your household over the age of 60?**

This is a higher risk population and the incidence of COVID-19 is even higher if there are underlying health conditions.

- **Do you or does anyone in your household have any of the following chronic conditions:** lung disease, heart disease, cancer, Rheumatoid Arthritis, Systemic Lupus Erythematosus (SLE) or any other autoimmune disease, Asthma (requiring a rescue inhaler at least once a week), HIV, other chronic conditions? Individuals with chronic conditions are at a higher risk of COVID-19 complications.

Initial Risk Assessment of Provider *(Staff if applicable)*

The initial assessment of risk for the Child Care Provider and family will give you an overall picture of what risk factors/exposures have occurred in your home. Some programs have used it to decide to wait before reopening. It utilizes the same four questions identified above, however, if you or a member of your family is over 60 and/or has chronic conditions listed above and the children/families in your program have risk factors also and/or recent exposure to or test positive for Covid-19, you can use that information to decide if you will open or wait to open.

Daily Risk Assessment and Daily Health Check

The daily risk assessment is a daily health screening tool that should be used when children and family members arrive at your program. It asks the same four questions above but inquires whether anyone with a chronic condition has recently joined your household and is where the temperature of the child and parent/guardian is recorded.

In addition, the following questions shall be reviewed:

- Has your child received any medication in the last 24 hours?
- Has your child received any fever reducing medication in the last 24 hours such as Motrin, Acetaminophen etc.?
- Did your child sleep well last night, any health concerns and has your child been eating and drinking well over the last 24 hours?

Screening at drop off should include the following:

- Child's temperature taken by staff or parent using a disinfected thermometer, wearing gloves and a face covering (three-ply if made of cloth). Hand sanitizer should be used between children/parents.
- Verify with the parent daily risk assessment screening tool.
- Stagger drop off times, so the Provider can dedicate their full attention to each child and family member.
- Perform a daily health check including questions on medications, health and illness, sleep, diet etc.

Daily Environmental Health & Safety Rounds

A daily health and safety environmental check including the following:

- Cleaning and disinfecting all high-touch surfaces using a three to five minute "set time" (time necessary for disinfectant to remain on the surface in order to be effective). This includes doorknobs, sink handles, tables, countertops, cots, cribs, changing areas and bathroom areas.

SUPPORTING OPEN PROGRAMS

Programs that have remained open can be a source of support to programs that are opening or reopening. Good record keeping on your response to illness and COVID-19 exposure is essential. Maintain the initial and daily assessment of risk in each child's permanent file.

Social Distancing and Children

It is best practice to have the same group of children and the same Provider(s) each day. Restrict all families and visitors from entering your program. Follow your state guidance on reopening in terms of group activities such as field trips, group events and extracurricular activities.

- With buggy rides, leave a seat between each child.
- Space out tables and seats during mealtimes and cots and cribs at naptime.
- The use of smocks, oversized shirts, safety glasses and a mask are advised.
- And remember, children still need to be held and comforted throughout the day.

Preparing for When a Child Gets Sick

Encourage parents to keep children home if children have any signs or symptoms of illness. If a child exhibits signs and symptoms of a fever or other symptoms during the day such as coughing, sneezing, irritability, fatigue, shortness of breath, nausea, vomiting, diarrhea, etc., take the child's temperature and contact the parent for pickup. The child should be isolated in a dedicated space where s/he may be closely monitored and picked up within 30 minutes. After the child leaves, the area should be well ventilated and if it is a separate room, close the door, leave empty for 24 hours and clean and disinfect the following day to decrease the risk of exposure. Inform the parent to contact their PCP (Primary Care Physician) for further instructions and to update you as soon as possible. If the child is seen (can be virtual), the child should have a note from the PCP before s/he may return.

Steps to Take with a Positive COVID Case (*Family/Child, Provider*)

1. Identify if the confirmed case is a child, FCC Provider or family member.
2. Identify how long the child, program staff or family was in the program and the degree, length of time of exposure to others. For example, was it a ten-minute, one-time exposure or a ten-minute exposure each day over the course of a week? Was the person wearing a mask? Did the person exhibit signs of illness?
3. Notify all exposed individuals as soon as possible by phone and in writing.

4. Contact the State and City Department of Health and assist with contact tracing as needed.
5. Follow all recommendations of State and City officials in terms of closure, exclusion, tracking and contact tracing.
6. Maintain the confidentiality of the confirmed case.
 - Post COVID-19 fact sheet or email all families and staff in the program.
 - Continue to monitor your program for any secondary cases.

Steps to Take with a Known Exposure to a Positive COVID Test

All contacts are encouraged to stay home, maintain social distance from others until 14 days after their last exposure, monitor themselves for signs of infection, take their temperature twice daily and monitor themselves for cough and shortness of breath. If contacts develop symptoms, they are to call their PCP immediately.

What is a contact? There are four factors to consider when determining if a contact was made:

1. Proximity-how close were you to the person?
2. The duration of the exposure (for example longer exposure time — usually 15 minutes or more — likely increases exposure risk)
3. Did the individual you were exposed to have symptoms such as a cough, congestion, or fever, which will increase the risk?
4. Were you and the other person wearing a mask?

Policies and Procedures Around Illness Exclusion and Emergency Preparedness

Every program should have an ill child exclusion policy including a section on COVID-19 and Pediatric Multisystem Inflammatory Syndrome. As there are multiple childhood illnesses and exclusion criteria, in addition to COVID-19, continue to follow the American Academy of Pediatrics recommendations on exclusion. Visit: <https://www.healthychildren.org/English/family-life/work-play/Pages/When-to-Keep-Your-Child-Home-from-Child-Care.aspx>. The CDC recommendation for exclusion for all children is for fever over 100°F, exclude for 72 hours to monitor for more serious illness.

Travel

The CDC is still recommending self-quarantine for 14 days when returning from travel to any level one state or country. Visit <https://www.cdc.gov/coronavirus/2019-ncov/travelers/travel-during-covid19.html> for CDC's updated travel recommendations.

✓ EXAMPLE CHECKLIST FOR FAMILIES

- Start time for my child:_____. Pick up time for my child: _____.
- Do I have my face covering for drop off and pick up?
Check with your state: in some states masks are optional, but in others they are required.
- Did I clean my hands with hand sanitizer prior to drop off/pick up?
- Does my child have clean indoor shoes at the program?
- Does my child have an extra change of clothes or an oversized shirt they can wear?
- Do I need a clean blanket or sheets?
- If providing a lunch, is it in a clean, disposable paper bag?
- Is there an ice pack?
- If reusable lunch bags are allowed, is it cleaned every day?
- Did my child have any symptoms of congestion, cough, fatigue, feeling hot and cold, fever of 100°F or greater, nausea, vomiting, diarrhea, blue around mouth, eyes or fingertips or toes?
If yes to any of these, call your PCP to discuss and follow their recommendations. Notify the program as soon as possible and provide updates.
- Notify the program if your child or anyone in your family had a positive COVID-19 exposure or tested positive for COVID-19.
- Notify the program about any travel or other activities that could have increased our family's exposure to COVID-19.
- Do I have any updated physical exams, immunization, medication forms or medications?
All medications are still required to be stored in a closed, sealed, unopened container with the original pharmacy label.

PLANNING NOTES

You can use the spaces to write down any reminders, ideas, purchases needed, changes or adaptations you want to make, and anything else that will help you with your planning.

All Our Kin encourages you to follow the Centers for Disease Control and Prevention (CDC) research-based guidelines, along with your state's child care COVID guidelines. We realize that some of these guidelines are very difficult to implement in a family child care program, and know that you will need to use lots of creativity and problem solving, as you always do, to make them work. The more consistent you are in implementing these guidelines, the safer you, your children and your families will be. This planning sheet can make it easier for you to see all the layers and identify for yourself which ones you can follow immediately and which ones you can work toward following.

Consider printing a blank version of this sheet, as you may need to do a new round of planning if the guidelines change or if your situation changes.

Space/physical environment:

Indoor materials/toys/manipulatives/books:

Outdoor materials/toys/equipment:

My drop-off/pick-up protocols:

Communications with my families (*parent handbook/contract, ill child exclusion policy, etc.*):

All Our Kin's offices

are currently operating remotely, and can be reached using the following contact information. For general inquiries, please write to us at info@allourkin.org.



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