Delivering Care in a COVID-19 Environment

A GUIDE FOR EARLY CARE AND EDUCATION PROGRAMS

Brighter Futures INDIANA

FSSA Office of Early Childhood & Out-of-School Learning

Index

Operational Resources – Safe Operating

Introduction

As an early care and education provider, you play a critical role for families and your communities. By offering quality care and education, you create a two-generational economic ripple effect, allowing parents to go back to work with the peace of mind that their children are in a safe and engaging environment, and nurturing the next generation of leaders and thinkers. Now more than ever, the children, families and leaders in your community need you to be ready to provide a healthy and safe environment to which families feel confident returning. We're all in this together, so as part of our state's "Get Back to Work" campaign, you'll find resources and tools below to operate safely and instill confidence in the families you serve. These resources, which may be customized for your program, are intended to complement federal, state and local guidelines and are not a substitute for them. Please continue to monitor relevant government agencies for the latest guidance and requirements.

PROGRAM TOOLS AND TIPS
This icon will appear when there are tips, highlights or important information for a particular section.

Understanding the New Guidelines

As Indiana gets back to work, the Family and Social Services Administration (FSSA) – in accordance with guidance from the Centers for Disease Control (CDC) – has set forth a number of new health and safety guidelines for early care and education programs. Review these recommendations **here**. For a list of these recommendations in relation to licensing requirements, click **here**. For up-to-date information on Indiana's re-opening stages, click **here**.

**Guidelines and recommendations cover the following topic areas:**

Monitoring and Preparing: vulnerable employee populations, employee screening procedures, arrival and pick-up procedures, child screenings, visitor policies, use of personal protective equipment, social distancing guidelines, and self-reporting protocol for staff and families.

Managing Daily Activities: field trips, special events, onsite playgrounds and special activities, nap time, meal service, classroom arrangements, pool usage and social emotional learning.

Maintaining Healthy Operations: workplace cleaning and disinfecting, hygienic diapering and clean-up, toy cleaning and sanitation, clothing recommendations, cleaning and disinfecting bedding and personal hygiene.

General recommendations: monitoring trends in absenteeism, handling of positive COVID-19 cases, onsite signage, family communication and handbook updates, and other general resources.

The information, tools and resources contained in this guide are meant to help you understand and implement these recommendations in your program.
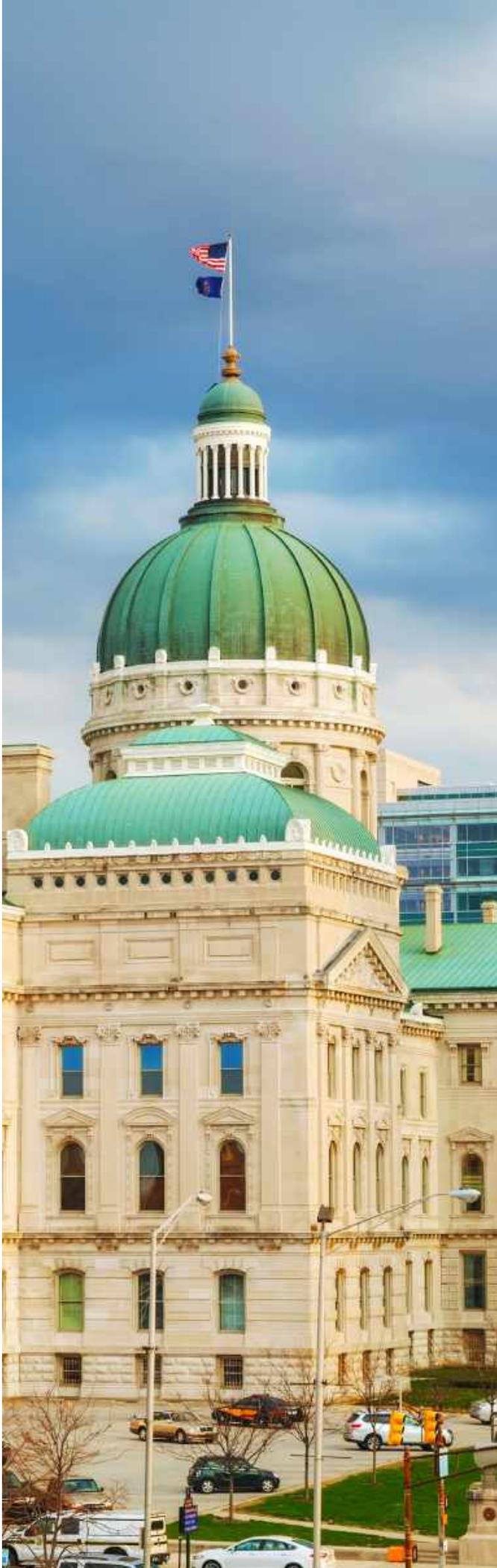
General Program Procedures

As new health and safety guidelines are implemented, programs should be mindful that any policy changes should be communicated to families in writing. Programs may want to consult with legal counsel to determine whether updates need to be made to their intake procedures (liability waivers, representation and warranties, etc.) to account for these changes.

ARRIVAL & PICK-UP PROCEDURES

Arrival and pick-up procedures should include staggering times and/or having child care staff meet families outside, or at the facility entrance, to escort the children as they arrive and depart. Plans for drop off and pick-up should limit direct contact between parents and staff.

These procedures should remain in place through stage 4 of Governor Holcomb's Back on Track plan, and be reevaluated in stage 5.

EMPLOYEE AND CHILD SCREENING PROCEDURES

All child care programs should immediately institute daily health screenings for each employee and child prior to entry.

For staff: Conduct daily health assessments by implementing **screening procedures** for COVID-19 symptoms for all employees reporting for work. Examples include self assessment of symptoms before arrival in the workplace, screening questions upon arrival, and daily temperature checks. In order to minimize missed infections, at least two procedures should be implemented every day. Child care programs should have a plan in place if an employee presents with symptoms that result in their being sent home. Resources for testing are available in Indiana through medical providers and OptumServe. These procedures should remain in place through stage 5.

For children: All child care programs should immediately institute the practice of checking the temperature of each child and conducting a brief verbal health assessment as they are dropped off, before the parent leaves. For examples, please see the CDC guidance **here** under the heading "screen upon arrival." If a child presents with a temperature of over 100.4, the child should not remain at the child care and must return home with the parent.

Children who have had COVID-19-like symptoms as described **here** or have tested positive for COVID-19 should be advised to self-isolate at home and not return to child care until they have been fever-free for at least 72 hours (3 days) without being given fever-reducing medications AND have had improvement in their symptoms AND at least 10 days have passed since their symptoms first appeared. These procedures should remain in place through stage 5. Identify an area to separate anyone who exhibits COVID-like symptoms during hours of operation, and ensure that children are not left without adult supervision.

Tips for implemeting screening procedures

- Don't know where to start with a screening procedure? Here is a **daily screening** protocol you can implement in your program.
- Create a contactless screening form that families complete daily using a free or inexpensive survey or form tool like **Survey Monkey**.
- Place physical **space markers** at the building entrance (inside and outside) to ensure families and children remain six feet apart.
- Staffing for at-door arrival and pick-up may be challenging, especially with required health screenings. Stagger staff arrival times and family drop-offs to ease operational burden. Partner with a local service provider, or consider volunteer and part-time resources to help with daily screenings, disinfection protocol, laundry and more.
- Check out the What to Expect in Returning to Care templates to help you share these new procedures and self-reporting requirements with **families** and **staff**.
- When scheduling staff, consider creating "on call" options in case an employee presents with a temperature or related symptoms.
- Not sure whether someone is okay to work? Check out virtual visit services, like **Indiana University Health's option** to be sure.
- Designate a space within your facility to separate a child who is sick until such time that the child can be picked up. **Learn more** about what employees should know about caring for patients with confirmed or possible cases of COVID-19.
- Information for COVID-19 testing sites can be found **here**.
- Implement plans for handling positive COVID-19 cases. Be in touch with your local health department and follow OECOSL guidelines regarding positive COVID-19 cases, which can be found **here**.

VISITOR GUIDELINES

Programs are encouraged to keep visitors to a minimum to further limit exposure for children and employees. Health screenings should occur for all visitors, including those making deliveries, at the child care entrance through stage 5.

> ⊕ **What to ask of families**

- Request that families limit daily drop-off and pick-up to one adult guardian to minimize contact with others, including older siblings
- Be proactive in communicating visitor policies with community partners and vendors
- Resources for sharing temporary policies with visitor audiences can be found **here**

PERSONAL PROTECTIVE EQUIPMENT

It is recommended adults and children ages 2 years and up wear face coverings. Cloth face coverings should not be placed on young children under age 2, anyone who has trouble breathing, or is unconscious, incapacitated or otherwise unable to remove the mask without assistance. The cloth face coverings recommended are not surgical masks or N-95 respirators. Those are critical supplies that must continue to be reserved for healthcare workers and other medical first responders, as recommended by current CDC guidance. Child care providers supporting infants and toddlers can protect themselves by wearing an over-large, button-down long-sleeved shirt and by wearing long hair up off the collar in a ponytail or other up-do. They should change the button-down shirt, if there are secretions on it, and wash their hands again. Child care providers should wash their hands, neck and anywhere touched by a child's secretions such as nasal drainage or spit up.

Extra Resources for Personal Protective Equipment

- Need help explaining masks to children? Check-out this **printable story** about masks and gloves.
- If you need help communicating these requirements to staff or families, review and customize the What to Expect in Returning to Care templates.
- Looking to make or order face masks for staff and/or children? Check-out the COVID-19 child care program **equipment and supply list**, or find guidance on how to make masks **here**.
- Remind staff and families to bring and store extra change of clothes onsite to minimize risk, and establish clear handling of soiled clothing or linens.

SOCIAL DISTANCING AND CLASSROOM CONSIDERATIONS

Close physical contact should be avoided when possible. It is recommended that the same children be placed with each other each day, and with the same teacher each day. This "unit" should be kept together, as much as possible, while doing activities indoors and outdoors each day. If you are supporting children of health care workers or others who work in close contact with infected or potentially infected individuals, consider creating a separate classroom or unit for those children. It is recommended that seats/desks be spaced at least six feet apart when possible. This should last through stage 5.

Looking for fun, inexpensive and child-friendly ways to reinforce social distancing with children? Here are some easy things you can do:

- Use floor stickers and have children decorate them
- Put hula hoops on the floor and have the children sit inside them during classroom activities
- Ask children to put their arms out and show you their airplane to check for social distancing
- Get outside! Utilize outdoor spaces as much as possible to minimize exposure
- Use this **onsite signage toolkit** to create visual health and safety reminders for children, families and staff. Make sure high-frequency surfaces are well-marked for routine cleaning.
- Remove excess chairs in classrooms and staff areas to reinforce social distancing guidelines.
- Need to create individualized supplies for children? Check out the child-friendly labels **here**.
- Be sure you are planning and staggering staff to limit the number of people in the building and classrooms at any one time. Keep staffing units consistent, ensuring the same teachers are with the same group(s) of children.

MEAL SERVICE

If a cafeteria or group dining room is typically used, meals should be served in classrooms instead. Programs should not participate in family style meals and should practice social distancing during meal times, ideally 6 feet apart. Programs should maintain units during meal times as well. Bagged or boxed meals with all necessary utensils, condiments, napkins, etc. included are preferred. In addition, prior to any meal service, all children should utilize hand washing or sanitizing to ensure safe eating practices. These procedures should remain in effect through stage 5.

NAP TIME

During nap time, children's naptime mats (or cribs) should be spaced out as much as possible, ideally 6 feet apart. Consider placing children head to toe in order to further reduce the potential for viral spread.

Naptime Tips

- Make sure children are placed head-to-toe and six feet apart when sleeping
- Remind families that linens should be cleaned weekly, or sooner if they become soiled with any kind of child secretions.

FIELD TRIPS AND SPECIAL EVENTS

Field trips in stage 4 to destinations such as museums, zoos, bowling alleys, aquariums and like facilities are permitted provided that the child care can transport children while maintaining social distancing practices such as sitting one child per seat. Beginning in stage 5, field trips can resume to destinations like fairs, festivals, amusement parks and like events, provided that the child care can transport children while maintaining social distancing practices such as spacing children appropriately. For more information and guidance on this, please review the **full guidelines**.

ONSITE PLAYGROUNDS AND SPECIAL ACTIVITIES

Limit the mixing of units, such as staggering playground times and keeping units separate for special activities such as art, music, and exercising. Playgrounds on the day care site can be occupied by multiple units, so long as social distancing is being practiced and the program is following disinfecting practices. Playground structures should be disinfected after each unit leaves the playground.

Maintaining a Healthy Environment

WORKPLACE CLEANING AND DISINFECTION

Toys that can be put in the mouth should be cleaned and sanitized (see below). Other hard surfaces, including diaper changing stations, door knobs, and floors should be disinfected. The following guidance regarding cleaning and disinfection should remain in effect through Stage 5.

- Intensify cleaning and disinfection efforts. Facilities should develop a schedule for cleaning and disinfecting including at least one hour a day of deep cleaning when children are not present.
- Routinely clean, sanitize, and disinfect surfaces and objects that are frequently touched, especially toys and games. This may also include cleaning objects/surfaces not ordinarily cleaned daily such as doorknobs, light switches, classroom sink handles, countertops, nap pads, toilet training potties, desks, chairs, and cubbies. Use the cleaners typically used at your facility.
- Use all cleaning products according to the directions on the label. For disinfection, most common EPA-registered, fragrance-free household disinfectants should be effective. If surfaces are dirty, they should be cleaned using a detergent or soap and water prior to disinfection. Follow the manufacturer's instructions for concentration, application method, and contact time for all cleaning and disinfection products.
- If possible, provide EPA-registered disposable wipes to staff members so that commonly used surfaces such as keyboards, desks, and remote controls can be wiped down before use. If wipes are not available, please refer to CDC's guidance on disinfection for community settings.
- All cleaning materials should be kept secure and out of reach of children.
- Cleaning products should not be used near children, and staff should ensure that there is adequate ventilation when using these products to prevent children from inhaling toxic fumes.

HYGIENIC DIAPERING & CLEAN UP

In order to avoid any fecal transmission of COVID-19 the following **diapering procedures** should be followed through Stage 5.

1. Wash hands with soap and warm water and dry with disposable paper towel
2. Gather needed supplies and place on diapering area
3. Spread wax paper on changing table covering the entire length and width of the pad
4. Put on gloves after placing the child on the changing table
5. Release the soiled diaper
6. Place soiled diaper and wax paper into a plastic bag
7. Wash the child's bottom
8. Remove gloves
9. Place clean diaper on child
10. Wash the child's hands
11. Take the child to a safe area where he or she can be supervised
12. Discard the soiled diaper, washcloth and towel, and wax paper into a tightly covered sanitary waste container lined with a plastic bag
13. Sanitize diaper changing pad and table
14. Wash hands with soap and warm water and dry with disposable paper towel

CLEAN AND SANITIZE TOYS

Toys that cannot be cleaned and sanitized should not be used. The following guidance regarding cleaning and sanitizing toys remains in effect through Stage 5.

- Toys that children have placed in their mouths or that are otherwise contaminated by body secretions or excretions should be set aside until they are cleaned by hand by a person wearing gloves.Clean with water and detergent, rinse, sanitize with an EPA-registered chemical safe for food contact surfaces, and air dry or clean in a mechanical dishwasher. Be mindful of items more likely to be placed in a child's mouth, like play food, dishes, and utensils.
- Machine washable cloth toys should be used by one individual at a time or should not be used at all. These toys should be laundered before being used by another child.
- Toys should not be shared among child care units unless they are washed and sanitized before being moved from one unit to the other.
- Set aside toys that need to be cleaned. Place in a dish pan with soapy water or put in a separate container marked for "soiled toys." Keep the dish pan and water out of reach from children to prevent the risk of drowning. Washing with soapy water is the ideal method for cleaning. Try to have enough toys so that the toys can be rotated through cleanings.
- Children's books, like other paper-based materials such as mail or envelopes, are not considered a high risk for transmission and do not need additional cleaning or disinfection procedures.
- Ensure adequate supplies to minimize sharing of high touch materials to the extent possible (art supplies, equipment etc. assigned to a single child) or limit use of supplies and equipment by one group of children at a time and clean and disinfect between uses.
- Avoid sharing electronic devices, toys, books, and other games or learning aids when possible
- Discourage families from bringing any toys from home.

CLOTHING

The following recommendations remain in effect through Stage 5.

- Infants, toddlers, and their teachers should have multiple changes of clothes on hand in the child care. Child care providers should change children's clothes if secretions are on the child's clothes.
- Contaminated clothes should be placed in a plastic bag and sent home or washed in a washing machine.

CLEAN AND DISINFECT BEDDING

The following recommendations remain in effect through Stage 5

- Use bedding (sheets, pillows, blankets, sleeping bags) that can be washed. Keep each child's bedding separate, and consider storing in individually labeled bins, cubbies, or bags. Cots and mats should be labeled for each child. Bedding that touches a child's skin should be cleaned weekly or before use by another child.

PERSONAL HYGIENE

Ensure that employees, children and families have ready access to hand sanitizer, handwashing stations, or other disinfectant products. Hand sanitizers are temporarily acceptable products for use in child care so long as they are kept out of reach of children at all times and administered by an adult. This practice will remain through stage 5.

Need to communicate changes to families?

- Use and customize this **What to Expect in Returning to Care** communication template.
- Review the **full list of products that the EPA** has found to be effective against COVID-19 here.
- Update onsite signage in your program to reinforce new health and safety guidelines using this package of **health and safety sign templates**. The kit includes signage and visual reminders for staff, family, and children.

- **Stand six feet apart reminder**
- **Reminder to wear masks onsite**
- **What to expect signage**
- **Hand washing reminders**
- **Gloves required**
- **Scrub and mask pick-up and drop off**

- **Room capacity limitations signage**
- **High-touch surface cleaning reminders (multiple)**
- **COVID Bug and Germ Stickers**
- **Individual child supplies stickers**
- **Diaper changing table signage**

Staffing Considerations

Just like families, employees may have concerns in returning to work in a child care setting. To ease these concerns and help employees understand what to expect in returning to work, programs should be proactive in communicating changes and expectations to staff. Additionally, programs should consider updated employee handbooks to include flexible sick leave policies and updated human resource policies. For support with templates or examples of policies and communication strategies contact SPARK Learning Lab at 1-800-299-1627.

VULNERABLE EMPLOYEES

Those 65 and over and individuals with identified high-risk medical conditions who are early care and education teachers, caregivers, and child care operators should limit exposure at work and in their communities. For educators who return to work prior to stage 5, programs should consider giving them a role that minimizes their contact with younger children and allows them to maintain a safe distance from others. Those operators who are 65 and older should consider whether their age or any underlying health conditions might prevent them from being able to operate their child care safely prior to stage 5.

Tips to help employees

- Help staff understand what to expect and their own role in maintaining a healthy environment using this **customizable template**
- If possible, considering having vulnerable employee populations work in administrative roles or other positions that could allow for a telework format
- Create visual reminders for staff including **onsite signage**, removing excess chairs in break rooms and common areas
- Consider updated attire guidelines including providing scrub jackets onsite for staff that are laundered each day, or having staff bring and store extra sets of clothes onsite.

Family Communications & Engagement

Now, more than ever, it's important to proactively communicate and engage with families to increase their confidence in returning to care. It's also important to communicate with potential families or those on your program's waitlist, as this will help market your program and set it apart from other options.

Share what you're doing to increase health and safety measures within your program, point families in the direction of helpful resources and consider differentiated communication strategies such as email, text and video conferencing. Think outside the box to engage families when they can't visit their child's classroom or meet with the teacher. Below are some helpful tips and resources to reassure and partner with the families you serve.

Returning to Care Tips

- Customize this **Returning to Care** communication template to help parents know what to expect in returning to your program. Consider updating your family handbook and required documentation as families return to care.
- Encourage parents to visit **Brighter Futures** to learn more about the new health and safety guidelines, find preparatory resources and to understand their role in maintaining a safe and healthy environment
- Share this **Returning to Care Checklist** with new and returning families to prepare
- Implement new family communication systems to ensure you are well-prepared to communicate with families if your program has to be closed due to COVID-19 exposure. Look at free or inexpensive texting services like **SimpleTexting** or **CallLoop** as a way to quickly reach families.
- For families struggling with the new guidelines, separation anxiety or other social-emotional factors, consider sharing these resources:
  - **Helpful Responses to Families from Conscious Discipline.**
  - **What Comes Next: Back to Child Care Following Shelter in Place from Zero To Three.**
  - **Anxious Stomach Aches and Headaches, Children Physically Expressing Anxiety from Child Mind Institute.**
  - **Coping with Challenging Behavior in Challenging Times from Community Play Things.**
- Make children part of the solution by educating and engaging them in the new program guidelines. Check out **these** resources for ideas on how to do this.
- Be creative in keeping families engaged when they are not able to visit their child's classroom. Take them "behind-the-scenes" through picture boards, daily reports, digital tools and other teacher communication efforts. Visuals and updates at pick-up and drop-off locations are recommended.
- Invest in a **Zoom** account to conduct parent meetings and conferences, workshops, trainings and e-learning opportunities.
- Be proactive in sharing how your program is meeting the health and safety guidelines with prospective families. New families are likely to want to see the program before making the decision to place their child(ren) in your care, so consider **virtual** and after-hour tours, or limiting exposure during in-person visits.

Additional Resources

FAMILIES FIRST CORONAVIRUS RESPONSE ACT

Child care programs should be generally aware of the provisions set forth in this **act**.

MONITORING ABSENCE TRENDS IN YOUR PROGRAM

Programs should monitor absenteeism to identify any trends in employee or child absences due to illness. This might indicate spread of COVID-19 or other illness. Programs are encouraged to have a roster of trained back-up staff in order to maintain sufficient staffing levels.

COVID-19 FINANCIAL ASSISTANCE OPPORTUNITIES FOR INDIANA-BASED ECE PROGRAMS

There are several financial assistance opportunities available for Indiana-based early care and education programs, including the Family and Social Service Administration's **Temporary Assistance Grant** and Early Learning Indiana's **Come Back Stronger Fund** made possible through the generous support of Lilly Endowment. For local and regional grant opportunities, programs are encouraged to contact their Child Care Resource and Referral agency. Visit this **website** to learn more.

HANDLING A POSITIVE COVID-19 CASE

Programs are encouraged to be proactive in planning for a positive COVID-19 case. Be in touch with your local health department and follow OECOSL guidelines regarding positive COVID-19 cases, which can be found **here**.

How to communicate during COVID-19

- Implement new family communication systems to ensure you are well-prepared to communicate with families if your program had to be closed due to COVID-19 exposure. Look at free or inexpensive texting services like **SimpleTexting** or **CallLoop** as a way to quickly reach families.
- Here are some editable templates you can use to manage **family communications**.
- Here are some editable templates you can use for **COVID case communications.**

COMMUNICATION TOOLS
- **Sample Family Communications**
  - **Word Doc**
  - **PDF Version**
- **Sample Employee Communications**
  - **Word Doc**
  - **PDF Version**
- **Sample Positive COVID Case Communications**
  - **Word Doc**
  - **PDF Version**
- **Returning to Care Family Checklists**

WEB BASED TOOLS
- **Survey Monkey**
- **Zoom**
- **Simple Texting**
- **Call Loop**

GUIDELINES
- **FSSA Guidelines**
- **FSSA Mandatory Comparison**
- **IN.gov Child Care Program Checklist**
- **Re-opening Stages**

HEALTH SCREENING RESOURCES
- **IU Health Virtual Screening Process**
- **CDC - Taking Care of a COVID Patient**
- **COVID Testing Site Resources**
- **CDC Screening Guidelines**
- **CDC COVID Symptoms**
- **Health Screening Sign**

RESOURCES TO SUPPORT AND ENGAGE CHILDREN
- **Explaining Masks and Gloves to Kids**
- **Involving Kids in Safety**
- **Helpful Responses to Families from Conscious Discipline.**
- **What Comes Next: Back to Child Care Following Shelter in Place from Zero To Three.**

- **Anxious Stomach Aches and Headaches, Children Physically Expressing Anxiety from Child Mind Institute.**
- **Coping with Challenging Behavior in Challenging Times from Community Play Things.**

EMPLOYEE & EMPLOYER RESOURCES
- **Families First Act Information**
- **Supplies: Fastenal Product Catalog**
- **Supplies: Making Masks - How To**
- **Liability Insurance**

FINANCIAL ASSISTANCE
- **Come Back Stronger Fund**
- **Temporary Assistance Grant**

MAINTAINING A HEALTHY OPERATION
- **EPA Approved Cleaning Products**
- **Suggested Supply List**
- **Supplies: Space Dividers**
- **Onsite Signage**
- **Individually Linked Onsite Signage**
  - **Stand six feet apart reminder**
  - **Reminder to wear masks onsite**
  - **What to expect signage**
  - **Hand washing reminders**
  - **Gloves required**
  - **Scrub and mask pick-up and drop off**
  - **Room capacity limitations signage**
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