

## COVID-19 CHILDCARE SUMMER PROGRAM GUIDANCE

May 21, 2020



### GUIDANCE FOR SUMMER PROGRAMS

Summer programs provide an essential support for working families. Many schools, communities, and childcare facilities are working to determine if and when they open to provide summer programming to school-aged children. This updated guidance has been developed in consultation with the Iowa Department of Public Health and the Iowa Department of Education.

The health and safety of children, families, and childcare providers is of the utmost importance. Parents may also find this guidance useful as a tool to help make decisions regarding enrolling their children in summer programming otherwise not regulated by DHS.

The Iowa Department of Human Services (DHS) licenses before- and after-school programs, as well as summer programs operating in school buildings. As of May 15, 2020, 242 programs fall into this category. However, a large number of programs that provide summer programming or camps to school-aged children fall outside of DHS regulatory authority and do not require licensing.

Specifically, Iowa Code §237A.1(3) defines childcare for purposes of licensing and explicitly excludes the following from licensing requirements:

- ▶ prekindergarten;
- ▶ certain church-related programs;
- ▶ short-term classes less than two weeks held between school terms or during a break within a school term;
- ▶ childcare centers for sick children in hospital pediatrics units;
- ▶ volunteer-operated programs occurring once a week or less meeting certain conditions;
- ▶ certain programs administered by political subdivisions of the state;
- ▶ certain afterschool programs provided through a nominal membership fee or no cost, meeting certain conditions
- ▶ special activity programs such as sports programs and dance classes;
- ▶ nationally accredited camps;
- ▶ certain structured programs providing therapeutic, rehabilitative, or supervisory services;

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- ▶ care provided onsite to children of parents in an emergency, homeless, or domestic violence shelter;
- ▶ childcare facilities providing respite care to foster homes; and
- ▶ programs offered onsite while parents are engaged in recreational or social activities, such as fitness centers or YMCAs.

This guidance is to provide support to all summer programming, whether licensed by DHS or not. **In addition to the below, DHS-regulated programs must also follow all other licensing standards.**

### **CONSIDER STAFF AND CHILDREN AT HIGHER RISK FOR MORE SEVERE ILLNESS**

Understand that the following persons are at higher risk of developing more severe COVID-19 illness:

- ▶ People 65 years and older
- ▶ People of all ages with underlying medical conditions, particularly if not well controlled, including:
  - People with chronic lung disease or moderate to severe asthma
  - People who have serious heart conditions
- ▶ People who are immunocompromised
  - Many conditions can cause a person to be immunocompromised, including cancer treatment, smoking, bone marrow or organ transplantation, immune deficiencies, poorly controlled HIV or AIDS, and prolonged use of corticosteroids and other immune weakening medications
- ▶ People with severe obesity (body mass index [BMI] of 40 or higher)
- ▶ People with diabetes
- ▶ People with chronic kidney disease undergoing dialysis
- ▶ People with liver disease

If allowing persons at higher risk to work in summer programs, consider assigning responsibilities with infrequent close interaction with large numbers or staff or participants. It is especially important for high-risk staff to use proper personal protective equipment and follow social distancing recommendations.

If programs allow high-risk participants, it is especially important for these participants to use proper personal protective equipment and follow social distancing recommendations. Summer programs that target high-risk participant populations should not be held this summer.

### **MITIGATION PRACTICES ALL SUMMER PROGRAMS ARE ENCOURAGED TO FOLLOW:**



#### **HYGIENE**

1. Teach and reinforce washing hands with soap and water for at least 20 seconds especially before and after eating, after using the restroom and after blowing your nose, coughing, or sneezing. Have tissues readily available.
2. If soap and water are not readily available, use a hand sanitizer that contains at least 60% alcohol. Cover all surfaces of your hands and rub them together until they feel dry.

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3. Avoid touching your eyes, nose, and mouth with unwashed hands.
4. If feasible, encourage use of cloth face coverings among all staff. Face coverings are most essential at times when social distancing is not possible. Staff should be frequently reminded not to touch the face covering and to wash their hands frequently. Information should be provided to all staff on proper use, removal, and washing of cloth face coverings.
5. Post signs on how to stop the spread of COVID-19, properly wash hands, promote everyday protective measures, and properly wear a face covering. Signs are available at <https://idph.iowa.gov/Emerging-Health-Issues/Novel-Coronavirus/Business-and-Organizations> and <https://idph.iowa.gov/Emerging-Health-Issues/Novel-Coronavirus/Communication-Resources>



## SOCIAL DISTANCING

1. Insist parent(s) drop-off children at the front door, limiting adult entry to the facility, if applicable
2. If feasible, avoid field trips to locations where social distancing may be difficult and where there will be mixing of class groups especially during transportation. Field trips to playgrounds, parks, libraries and other types of activities where there is an assurance by the entity that they are taking precautions to prevent the spread of COVID-19 is preferred.
3. Distance children while eating and avoid family-style serving, each child's meal should be plated by staff and served so that multiple children are not using the same serving utensils.
4. Ask that staff practice social distancing outside of work (remaining out of congregate settings, avoiding mass gatherings, and maintaining approximately 6 feet of distance from others when possible).
5. Avoid mixing children across classes and stagger passing times.
6. Limit deliveries from outside vendors. If possible, have them deliver after business hours or leave deliveries outside of the facility.



## HEALTH

1. Conduct mandatory temperature and health screenings for staff and for children upon drop-off every day. DO NOT allow staff or children with temperatures of 100.4 degrees F or higher to attend. For information on health screenings go to <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/guidance-for-childcare.html>
2. Post signage where it is visible indicating no one should participate if they currently have symptoms of COVID-19 (fever, cough, shortness of breath), have tested positive for COVID-19, or live with someone with symptoms or confirmed COVID-19 in the last 14 days.
3. Have a plan if someone is or becomes sick.
  - a. Plan to have an isolation room or location that may be used to isolate a sick child. Have children over the age of 2 years wear a cloth face covering and have the parent to pick up the child immediately.
  - b. If a sick child has been isolated at your location, clean and disinfect surfaces in the area after the sick child has gone home.
  - c. Staff who are ill should go home immediately.

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4. Talk with your staff and parents about travel plans to affected areas so you are able to assess any potential risk. Visit the CDC's Information for Travel page for the most up-to-date alerts.
5. Put your infectious disease outbreak plan into action. For additional guidance go to <https://www.cdc.gov/coronavirus/2019-ncov/community/index.html> and <https://www.campnurse.org/wp-content/uploads/2019/05/Communicable-Disease-Management-Strategies-for-the-Camp-Setting-2019.pdf>



## CLEANING/SANITIZING/DISINFECTING

1. Make sure that you have cleaning, sanitizing and disinfecting products available throughout the day.
2. Clean and disinfect frequently touched surfaces (for example, door handles, sink handles, drinking fountains, tables, etc.) multiple times per day.
3. Avoid use of items (for example, soft or plush toys) that are not easily cleaned, sanitized, or disinfected.
4. Ensure safe and correct application of chemicals and keep products away from children.
5. For information on cleaning, sanitizing and disinfecting go to <https://www.cdc.gov/coronavirus/2019-ncov/community/reopen-guidance.html>
6. If COVID-19 is confirmed in a child or staff member who has been inside your facility:
  - a. Close off areas used by the person who is sick.
  - b. Open outside doors and windows to increase air circulation in the areas.
  - c. 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.
  - d. Clean and disinfect all areas used by the person who is sick.
  - e. 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.
7. Ensure that ventilation systems operate properly and increase circulation of outdoor air as much as possible by opening windows and doors, using fans, and other methods. Do not open windows and doors if doing so poses a safety or health risk (for example, allowing pollens in or exacerbating asthma symptoms) to children using the facility.
8. Encourage all children to have their own portable water bottle or use a large water jug with disposable cups to reduce use of public drinking fountains.



## ILLNESS REPORTING

COVID-19 illness in a staff member or participant is required to be reported to the provider's DHS licensing consultant.

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## OUTBREAK RESPONSE AND CLOSURE

An outbreak is defined as three or more staff or participants testing positive for COVID-19 by viral PCR testing indicating likely transmission within the program.

When outbreaks are identified the following measures should be taken:

- ▶ DHS will require programs it regulates to close for up to 14 days from the date that the latest case became ill.
- ▶ Program facilities should be deep cleaned in accordance with COVID-19 cleaning guidance: <https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html>.
- ▶ All staff and participants should be offered testing prior to reopening (through strike team or establishing a Test Iowa code).
- ▶ Stringent procedures to screen staff and participants for symptoms throughout the day should be in place upon re-opening.

For additional closure information, refer to IDPH COVID-19 Guidance: Child Care Centers and Homes Health & Safety Concerns at <https://dhs.iowa.gov/childcare-covid-19>

