

STATE OF NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES

March 27, 2020

COVID-19 Health and Safety Guidelines for New Hampshire Child Care Programs

General guidance

Exclude children, staff, parents and guardians from sites if they are showing symptoms of COVID-19, have been in contact with someone with COVID-19 in the last 14 days, or are at high risk due to underlying health conditions.

People at Increased Risk for Serious Complications of COVID-19

Persons who are older, pregnant, or who have underlying health conditions, including those with compromised immune systems or respiratory conditions like severe asthma, are at higher risk to develop complications from this virus. These individuals should not provide child care or visit child care facilities.

Think you have COVID-19

If you develop any symptoms of fever (subjective or documented), respiratory illness (cough, sore throat, runny nose, shortness of breath), or mild flu-like illness (fatigue, chills, muscle aches) call ahead to your healthcare professional and they will determine if you need to be tested

Anyone with symptoms who is not tested and can be managed at home should self-isolate until:

- At least 7 days have passed since symptoms first appeared AND
- At least 72 hours (3 days) have passed since recovery (resolution of fever without the use of fever-reducing medications and improvement in other symptoms)

Health Screening at Entry

Develop a process for checking all staff and children entering your facility for a fever and other symptoms of COVID-19 daily before entry into childcare. Ask about any close contact with someone who is confirmed or suspected to have COVID-19 in the prior 14 days. Ask about any domestic or international travel in the prior 14 days

What to do if children, staff, or parents develop COVID-19 or symptoms

Staff or children with symptoms (see prior slide) should be excluded from the facility Children with household members who are known to have COVID-19 should be excluded from the facility

If a child/staff member develops symptoms while at the facility:

- Separate person until they are able to leave
- If symptoms persist or worse call health care provider for guidance
- Advise employee or child's parent/caregiver to inform facility immediately if person is diagnosed with COVID-19

If a child or staff test positive contact Bureau of Infectious Disease Control at 603-271-4496. They will advise on next steps, such as what to tell and not tell families, if you need to close, etc.

Returning to a child care facility after suspected COVID-19 symptoms

If a staff member or child has symptoms of COVID-19 they can return to the child care facility <u>if</u> the following conditions are met:

- At least 7 days have passed since symptoms first appeared AND
- At least 72 hours (3 days) have passed since recovery*

If a staff member or child is an identified close contact (within 6 feet) of a person diagnosed with COVID-19 (either suspected to have COVID-19 based on symptoms or confirmed with testing), the staff member or child can return to child care after 14 days have passed since last contact to the person during their infectious period.

Social Distancing

Whenever possible, reduce group sizes to no larger than 10 people total, including children and adults (e.g., one adult and nine children, two adults and eight children, etc.). Keep groups together throughout the day, do not combine groups (e.g., at opening and closing). To the degree possible, maintain the same groups from day to day. This will help reduce potential exposures and may prevent an entire program from shutting down if exposure does occur.

To maximize space between people in a group, limit rooms to 10 people total in typical child care facilities or elementary schools. Large rooms, like gymnasiums with a full-sized basketball court, can be divided into two rooms. When dividing a room create a clear barrier with cones, chairs, tables etc. to ensure a minimum of 6 feet between the two groups.

^{*}Recovery is defined as a resolution of fever without the use of fever-reducing medications and improvement in other symptoms.

Incorporate social distancing within groups to the degree possible, aiming for at least three to six feet between children and minimizing the amount of time children are in close contact with each other.

- Eliminate large group activities.
- Limit the number of children in each program space.
- Increase the distance between children during table work.
- Plan activities that do not require close physical contact between multiple children.
- Limit item sharing, and if items are being shared, remind children not to touch their faces and wash their hands after using these items.
- Limit use of water or sensory tables and wash hands immediately after any use of these tools.
- Minimize time standing in lines.
- Incorporate additional outside time and open windows frequently.
- Adjust the HVAC system to allow for more fresh air to enter the program space.
- Avoid gathering in larger groups for any reason. Outside time and lunch should be taken with group (no large gatherings or combining groups.)

Outside play

- Offer outdoor play in staggered shifts. If multiple groups are outside at the same time, they should have a minimum of six feet of open space between outdoor play areas or visit these areas in shifts so that they are not congregating. Always wash hands immediately after outdoor play time.
- Increase time outside, if possible while keeping groups small.

Meals and snack time

- Keep group size small.
- Meals and snacks should be provided in the classroom if possible to avoid congregating in large groups.
- If meals must be provided in a lunch room, please stagger meal times, arrange tables to ensure that there is at least six feet of space between groups in the lunchroom, and clean tables between lunch shifts.
- Eliminate family style meals or have employees (not children) handle utensils and serve food to reduce spread of germs.

Drop-off and pick-up

- Do not combine groups in the morning or afternoon.
- You may wish to alternate drop off and pick up times for each small group to avoid a large number of people congregating outside the facility or in front of the facility.

 Wash hands or use hand sanitizer before and after signing in and out. No pen should be shared. Parents should use their own pen when signing in. If check-in is electronic, provide alcohol wipes and frequently clean the screens or keyboards.

Hygiene Practices

- Hand washing –soap and water for at least 20 seconds, and require handwashing when
 arriving at the center, entering the classroom, before meals or snacks, after outside
 time, after going to the bathroom, and prior to leaving for home. Help young children to
 ensure they are doing it effectively.
- If soap and water are not readily available, using an alcohol-based hand sanitizer with at least 60% alcohol.
- Advise children, families, and staff to avoid touching their eyes, nose and mouth with unwashed hands.
- Cover coughs or sneezes with a tissue, then throw the tissue in the trash and clean hands with soap and water or hand sanitizer (if soap and water are not readily available). Alternatively, cough or sneeze into elbows.

Transportation

Close seating on buses makes person-to-person transmission of respiratory viruses more likely. Those providing transportation to child care facilities should maximize space between riders (e.g. one rider per seat in every other row). Keeping windows open might reduce virus transmission. See below for guidance on cleaning and disinfecting buses.

Cleaning and disinfecting procedures

Increase the frequency with which you clean toys, equipment, and surfaces, especially doorknobs, check-in counters, and restrooms. Use alcohol wipes to clean keyboards and electronics and wash hands after use. Minimize the potential for the spread of germs in the program space by temporarily removing toys that are not easily cleanable (such as stuffed animals and pillows) and rotate the toys that are out at any one time so that they can be adequately cleaned and sanitized.

If groups of children are moving from one area to another in shifts, cleaning measures must be completed prior to the new group entering this area.

Perform frequent cleaning and disinfection of frequently touched surfaces, including door handles, toys, surfaces, etc.: https://www.cdc.gov/coronavirus/2019-ncov/prepare/disinfecting-building-facility.html.

Staff cleaning should follow the disinfectant manufacturer's instructions:

- •Use the proper concentration of disinfectant.
- •Maintain the disinfectant for the required wet contact time.

- •Follow the product label hazard warnings and instructions for personal protective equipment (PPE) such as gloves, eye protection, and adequate ventilation.
- •Use disinfectants in a well ventilated space. Extensive use of disinfectant products should be done when children are not present and the facility thoroughly aired out before children return.
- •Child care facilities must have a Safety Data Sheet (SDS) for each chemical used in the facility.
- •Parents and staff should not supply disinfectants and sanitizers.

Buses

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Shared hands-on teaching materials

These items need to be cleaned at the end of the day. Soap and water is the first step. Some items could then be sanitized. Playdough cannot be cleaned or sanitized, so consider individual containers labeled with names, or discontinue use. Facilities should consider removing water tables, sensory tables, etc. from use for the time being and limit shared teaching materials to those that can be easily cleaned and disinfected at the end of the day or more often as needed.

Additional COVID-19 Resources

- DHHS-Main Page: https://www.nh.gov/covid19/index.htm
- DHHS-FAQs: https://www.nh.gov/covid19/faqs/
- CDC: Interim guidance for Schools and Child Cares