

Guidelines for Child Care Facilities to Reopen or Continue Care

updated: August 4, 2022

*New/Updated Guidance

Core strategies (strongly recommended for all in-person learning/care situations)

- ❑ Promote vaccination of all staff and eligible children
 - Strongly encourage families, including extended family members with frequent contact with children to be up to date with COVID-19 vaccines.
 - Up to date means a person has received all recommended COVID-19 vaccines, including any booster dose(s) when eligible.
 - Strongly encourage visitors to the school to be up to date with COVID-19 vaccines.
- ❑ Stay home if sick and go home if sick at the child care facility or home.
 - Consider screening testing for all staff who are not up to date with their COVID-19 vaccines.
- ❑ *Masking
 - Masks are strongly recommended to be worn indoors by staff members and children over the age of 2, when [COVID-19 Community Levels](#) are medium or high, or in specific situations such as cluster of cases or exposure to a positive case.
 - Masks should be removed for eating, drinking, and nap time.
 - In infant or toddler settings where children are under the age of 2 or have special needs and cannot wear masks and are not yet fully vaccinated, it is recommended that staff wear masks.
 - Masks are recommended to be worn in classrooms where there are identified clusters or for 10 days after exposure to a person who tests positive for COVID-19.
 - When outdoors: Masks do not need to be worn in most outdoor settings. Masks should be worn in crowded outdoor settings, during activities that involve sustained close contact with others, or when community levels of COVID-19 are high.
 - Facilities should have masks on hand to provide to children and staff who want to wear them.
 - Masks should not be worn by:
 - Children younger than 2 years of age.
 - Anyone who has trouble breathing or is unconscious.
 - Anyone who cannot safely remove the mask without assistance.
- ❑ *Hand hygiene
 - Teach and reinforce handwashing with soap and water for at least 20 seconds.
 - Hand sanitizer containing 60% alcohol can be used if soap and water not readily available.
 - Provide adequate supplies, including soap and water, masks, paper towel, tissues, disinfectant wipes, and trash cans.

Cleaning and Sanitizing

- ❑ Prior to reopening, complete a thorough and detailed cleaning of entire facility, with focus on high-contact areas that would be touched by both employees and children (e.g., desks, equipment, toys, outdoor play structures).
- ❑ Make hand sanitizer readily available to adults throughout the facility and securely stored out of reach of children.
- ❑ Frequent hand washing is preferred over hand sanitizers for children but use hand sanitizers when water is not readily available. Use of hand sanitizer must be monitored by an adult/staff member to ensure children do not swallow alcohol.
- ❑ Require staff to frequently sanitize high-touch surfaces and shared resources (e.g., door

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handles, light switches, etc.).

- Conduct extra deep cleaning of tables, chairs, etc. daily after hours with [EPA-registered disinfectant products](#).
- Clean and sanitize restrooms and diaper changing areas regularly based on frequency of use (e.g., throughout day).
- Between staggered meal times or indoor play times, wipe down and disinfect tables.
- [Per CDC guidelines](#), conduct normal routine cleaning of outdoor areas. Disinfect daily high-touch outdoor surfaces (e.g., handles).
- Avoid use of items that are not easily cleaned, sanitized, or disinfected (e.g., plush toys, sand table, water table). Playdough and similar materials should be kept in separate bags labeled for each child's use. If using plush toys for infants, toys shall be used by only one child and must be laundered and dried before next usage.
- Ensure safe and correct application of disinfectants and keep disinfectant products away from children and stored in a secured area.
- Keep each child's belongings separated during the day in individually labeled storage containers, cubbies, or areas. Consider having families take home their children's belongings each day to be cleaned.
- Have bins to separate toys that have been handled by children for disinfecting before their next use.
- 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 use.

***Physical Distancing**

- *Create child care groups in accordance with the child care rules based on the child's age to the extent possible.
- *When using child care groups or Ohana bubbles, they should include the same children each day with the same child care providers. Limit cross-deployment of staff across facilities and centers.
- Keep child care groups distanced by using separate facility areas, room dividers, multiple rooms, etc. when needed.
- Implement delayed or staggered schedules for time spent outdoors and for any communal spaces.
 - Schedule staggered meal times to reduce exposure in large areas and limit the number of children per table.
 - Implement staggered arrival and pick up times, have child care staff meet families/children outside the facility as they arrive, or take other measures to minimize contact with visitors (e.g., limiting number of families into the facility at a time, waiting families are separated by six-foot distances, etc.)
- Space out seating and cribs/cots/mats for nap time (head-to-toe positioning) to six feet apart, if possible (given space limitations) and as appropriate for the children's ages.
- Advise employees, children, and parents to avoid spending unnecessary time at facility and classroom before or after care is needed.
- *Because of the low risk of transmission from surfaces and shared objects, there is no need to limit food service to single use items and packaged meals.

***Health and Safety**

- *Masks are strongly recommended to be worn indoors by staff members and children over the age of 2, when COVID-19 Community Levels are medium or high, or in specific situations such as cluster of cases or exposure to a positive case.
- *When outdoors: Masks do not need to be worn in most outdoor settings. Masks should be worn in crowded outdoor settings, during activities that involve sustained, close

contact with others, or when community levels of COVID-19 are high. For more information, refer to the masking information on page 1 in the core strategies section.

- ❑ *All visitors (including parents and contract service providers) are encouraged to wear masks when indoors, when COVID-19 community levels are medium or high.
- ❑ Visitors and volunteers should be limited to individuals required to perform a professional service or function (e.g., speech therapists, health providers, Child Welfare Services workers, licensing) and follow the recommendations for wearing masks and face shields indoors while practicing six-foot distancing if not required to provide direct services to children in care.
- ❑ Train all employees and children (as appropriate for their age) on the importance of frequent handwashing, proper sneezing/cough etiquette, the use of hand sanitizers with at least 60% alcohol content and give clear instructions to avoid touching hands to face. Organize routine handwashing breaks and always wash hands before and after meals, indoor play, and outdoor play, and after using the restroom.
- ❑ Train all employees on [COVID-19 symptom detection, common modes of COVID-19 transmission](#) (e.g., close exposure to a person infected, respiratory droplets, touching contaminated surfaces and then touching face), and [how to prevent COVID-19](#).
- ❑ Employees, parents, and children should not enter the facility and quarantine per Hawai'i public health guidelines if exposed to COVID-19.
- ❑ Update sick policy to include COVID-19 and have each parent sign off that they understand the amended sick policy.

Facility Safety

- ❑ 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.
- ❑ Ensure that all water systems and features (e.g., drinking fountains, sinks, toilets) are safe to use after a prolonged facility shutdown (i.e., flushing of water distribution systems). Encourage families and children to bring their own water bottles each day.
- ❑ Have trained back-up staff in order to maintain sufficient staffing levels or reduce the number of children in care if there is insufficient staffing.
- ❑ Throughout operations, ensure adequate supply and storage of necessary materials to meet PPE (face masks, gloves, etc.) and cleaning requirements.
- ❑ Communicate safety protocols to all employees, including appropriate points of contact (e.g., local officials) to report violations of protocols.
- ❑ Develop a procedure to send home individuals with any COVID-19-like symptoms or high temperatures and keep them separate from other children until they can be picked up. Call parents for immediate pick-up. If it is an emergency, call 911 for immediate treatment.
- ❑ Identify an area to separate anyone who exhibits COVID-19-like symptoms during hours of operation and ensure that children are not left without adult supervision.
- ❑ Notify local health officials, your assigned child care licensing worker, staff, and families immediately of any possible child, visitor or staff case of COVID-19 while maintaining confidentiality as required by the Americans with Disabilities Act.

Child and Parent Expectations

- ❑ Post signs throughout the facility for employees, children, and parents on shared responsibilities (including proper hygiene and sanitization, face coverings, physical distancing, and information for reporting concerns).
- ❑ Make safety protocols publicly available for employees and parents.

- ❑ Use communication methods (e.g., email, video conference, text, notices) to educate all families on the new protocols and what to expect when at the facility.
- ❑ Update family emergency contact information.
- ❑ Share COVID-19 related program policies with families and inform families how to notify the facility if they have had contact with COVID-19 patients.
- ❑ Continue to make resources available to families to address social-emotional and other needs.
- ❑ Provide CDC approved information regarding COVID-19 vaccines and encourage all eligible family members to be up to date with the vaccines.

Employee Support

- ❑ Communicate with employees regularly and seek employee feedback on an ongoing basis.
- ❑ Review training after Day One by providing ongoing methods of additional training to reinforce messaging and changes to policies or procedures.
- ❑ Designate a staff person to be responsible for responding to COVID-19 concerns. Employees should know who this person is and how to contact them.
- ❑ Ensure all staff have adequate sanitizing supplies and PPE equipment.
- ❑ Keep a daily checklist of cleaning and sanitizing responsibilities to be used by employees.
- ❑ Train all employees on leave benefit options and policies.
- ❑ Provide CDC approved information regarding COVID-19 vaccines and encourage all employees to be fully vaccinated.

Isolation and Quarantine

- ❑ **Isolation** is used to separate individuals who have tested positive for COVID-19 **or** who have COVID-19 symptoms, regardless of their vaccination status.
 - *Children who test positive or develop COVID-19 symptoms, regardless of age or vaccination status, shall isolate by staying home for 5 days.
 - Children who isolate may return on the 6th day if they do not have fever in a 24-hour period without using fever-reducing medication, other symptoms of COVID-19 have improved, and are able to wear a well-fitting mask from day 6 to 10 after symptom onset or test positive date.
 - Staff who test positive for COVID-19 or have symptoms, shall stay home, and isolate for five (5) days regardless of vaccination status.
 - *Staff who isolate may return on the 6th day if they do not have fever in a 24-hour period without using fever-reducing medication, other symptoms of COVID-19 have improved, and are able to wear a well-fitting mask from day 6 to 10 after symptom onset or test positive date.
 - *A well-fitting mask should be worn at all times while in care (except during mealtimes or when sleeping) by a child or staff member returning from home isolation on days 6 through 10 after isolating for 5 days.
 - Day 0 in calculating isolation period is the day the positive test was taken (if asymptomatic) or the onset of COVID-19 symptoms
 - Children in before and after school facilities that are enrolled in Kindergarten and above shall follow the [Isolation and Quarantine Guidance for K-12 Schools](#) for isolation.
 - Children and staff with known medical history of allergies or of other etiology who exhibit COVID-19 like symptoms, should isolate and get tested for COVID-19. If negative and **not** identified as a close contact, they may return if symptoms are resolving **and** no fever for 24 hours without the use of fever-reducing medicine. They should also submit a doctor's note with the negative test result confirming medical history of allergies or other conditions which caused COVID-19 like symptoms.

- ***Quarantine** protocols previously used to prevent the transmission of COVID-19 by keeping people in close contact with someone with COVID-19 apart from others for in-school exposures have changed. Closing classrooms and implementing quarantine for in-school exposures are no longer necessary when universal indoor masking is implemented.
 - ***When** a child or staff member is identified as being positive for COVID-19, notification should be provided to all staff and parents in the group that were exposed to that person.
 - ***The** exposed children and staff have the option to quarantine by remaining home, or if they choose to return to class, all children over the age of 2, who can correctly and consistently wear masks, should do so for 10 days.
 - Parents and staff should be on the lookout for symptoms and test as appropriate.
 - Children in before and after school facilities that are enrolled in Kindergarten and above who are identified as close contacts shall follow [Isolation and Quarantine Guidance for K-12 Schools](#) for quarantine.

***Special Events and Field trips**

- ***Providers** may hold events under the following recommended guidelines:
 - Hold outdoors.
 - Limit attendees.
 - Socially distance (try to keep six (6) feet of distance between different households in particular).
 - Have handwashing/sanitizer stations easily accessible throughout the space.
 - Ensure social distancing if eating and drinking occurs at the event.
 - ***Masks** should be encouraged for large gatherings outdoors to further reduce risk when COVID-19 community levels are high.
- ***Field trips**
 - ***Participants** over the age of 2, who can correctly and consistently wear masks, are recommended to wear masks when boarding, disembarking and for the duration of travel.
 - Those who have trouble breathing should not wear masks.
 - **Masks** do not need to be worn in most outdoor settings.
 - ***Masks** should be worn in crowded outdoors settings during activities that involve sustained close contact with others, or when community levels of COVID-19 are high.
 - Ensure proper handwashing/sanitizing.
 - Ensure social distancing when eating/drinking.