

Reopening Guidelines

Office of Child Care & Regulatory Services



OCCRS

Child care facilities have distinct needs, they **MUST** take important steps to prevent the spread of **COVID-19**.

This guideline is intended to help licensed/certified child care facilities make informed decisions about **COVID-19** to minimize the risk of exposure to both staff and children. It should be followed until otherwise notified by the Department of Human Services after which the current Virgin Islands Rules and Regulations shall apply.



OCCRS

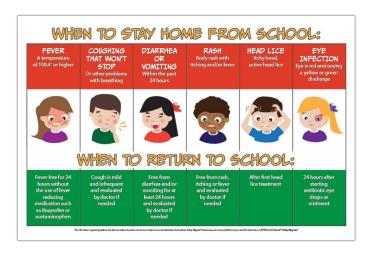


Symptoms of COVID-19

- Anyone showing signs of illness of any kind or who may have been exposed to COVID-19 should not be permitted to enter child care facilities. See VI Rules & Regulations Section 704 on Illness & Injury, Pg. 29.
- fever*
- cough
- shortness of breath and/or difficulty breathing
- Additional symptoms include chills and loss of taste or smell; however, children typically experience vomiting and diarrhea and while their symptoms are similar to adults, their condition may be milder.



Symptoms of COVID-19

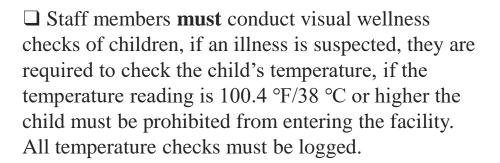


* Fever is determined by thermometer readings of 100.4 °F/38 °C or higher or by subjective signs such as flushed cheeks, fatigue, extreme fussiness, chills, shivering, sweating, achiness, headache, not eating or drinking. (per CDC.gov guidelines). Also check the CDC website for regular updates.



Drop-Off/Pick Up Procedure:

- ☐ Before arrival: Ask parents to be on the alert for symptoms of **COVID-19** and to keep child(ren) at home if they are showing any sign of illness.
- ☐ If possible, the same parent or designated person should be responsible for dropping off and picking up children from childcare facilities. Avoid designating persons considered "high risk", such as grandparents 65 and older.
- ☐ Develop a staggered physical distancing schedule for arrivals and departures to limit direct contact with multiple parents.
- ☐ Have a staff member—that is not considered "high risk" greet children at the entrance of the facility as they arrive.



☐ If a sign-in log is used, ask parents/caregivers to bring their own pen for signing children in and out of the facility.





Drop-Off/Pick Up Procedure:

☐ Designate a staff member to escort children to their classrooms. Infants should be transported in infant carriers. At the end of the day, the assigned staff member should escort the children to the person designated to pick them up.

☐ Staff should discourage gatherings at arrival and drop-off areas. Remind parents and caregivers of the necessity to maintain social distancing to reduce chances of contracting COVID-19.

☐ Handwashing hygiene stations should be set up at the entrance of the facility for staff and children to wash their hands before entering the premises. If a sink with soap and water is not available, provide hand sanitizers with at least 60 percent alcohol. Keep hand sanitizers out of children's reach and ensure their hands are thoroughly clean.





Limit outside visitors



Temperature checks before adult Temperature cne individual entry



Outdoor pick-up and drop-off



Individual child meals, not family style



Regular sanitizing and hand washing











Prevent virus that causes COVID-19 from entering the building

- ☐ Post **COVID-19** information sheets/posters at all entrances to the facility. (See attached Flyers for postings)
- ☐ Only allow authorized ratio of children, and staff-required for daily operations, inside the buildings and classrooms.

To reduce spread of any Virus:

- ☐ Teachers should be assigned to one classroom with the same group of children.
- ☐ Reduce the number of people coming in and out of classrooms.
- ☐ Limit the use of "floater" teachers to one per classroom to provide coverage for staff during meals and breaks.
- ☐ Reduce the number of volunteers to the facility.



- ☐ Limit visitors to the facility other than DHS, Fire & Health Inspectors heath care professional and therapy's, resources teachers. (All visitors are to wear a mask)
- ☐ (Requirement) Conduct daily health screenings on all individuals entering the facility. Screenings will identify and substantiate the necessity to prohibit individuals from entering the facility if they are experiencing any of the following five indicators:
- 1. Person showing symptoms of **COVID-19**
- 2. Person awaiting results of their **COVID-19** test
- 3. Person tested positive for **COVID-19**
- 4. Person is awaiting the results of testing for **COVID-19**
- 5. Person under investigation (PUI)



Prevent virus that causes COVID-19 from entering the building

- ☐ Exclude children and staff who share a home (including siblings) or who have been in close contact with anyone in the five categories above.
- ☐ People who may be at higher risk of severe illness from **COVID-19**:

People aged 65 years and older,

People with a compromised immune system







Prevent virus that causes COVID-19 from entering the building

- ☐ Restrict the following persons from entering childcare facilities:
- Everyone, including children, parents, staff etc., living with or exposed to persons diagnosed with **COVID-19**.
- Ailing staff should stay at home using flexible sick leave per the facility's paid leave policies.
- Persons who may be at higher risk for severe illness from COVID-19.
- Persons 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, chronic kidney disease undergoing dialysis, or liver disease.





- ☐ Follow social distancing strategies per CDC guidelines.
- (Requirement) Post signage and other messaging to remind staff of physical distancing.
- Six-feet spacing indicators should be displayed in waiting areas to maintain social distancing.
- All persons entering child care facilities must adhere to the Virgin Islands' Child Care Rules and Regulations with emphasis on COVID-19 flexibility requirements.
- Children assembles should be reduced to small groups (do not exceed ratio and capacity requirements—see ratio chart).
- Provide developmentally appropriate activities for smaller groups. Rearrange furniture and play spaces to maintain 6 feet separation when possible.



- If possible, daily classes should be comprised of the same children and staff member.
- Deter daily group activities that may promote transmission of **COVID-19** such as mixing classrooms.
- Keep each group of children in their assigned rooms throughout the day including naptime and meals.
- Modify daily group activities that may promote transmission of COVID-19 such as mixing classrooms.
- Limit the mixing of children (e.g., staggering playground times, keeping groups separate for activities such as art and music).
- If possible, at nap time, ensure that children's naptime mats (or cribs) are spaced out as much as possible, ideally 6 feet apart. Place children had to toe in order to further reduce the potential for viral spread of **COVID-19**.



- All personal items must be labeled and kept in a separate bag or container to ensure personal items are separate from others. During this time personal toys should be kept at home until further notice.
- Extend the indoor environment to outdoors and bring the class outside, if weather permits.
- Provide developmentally appropriate activities for smaller groups. Rearrange furniture and play spaces to maintain 6 feet separation when possible.
- Follow proper hand hygiene guidance for adults and children such as washing hands frequently with soap and water for at least 20 seconds (about as long as it takes to sing "Happy Birthday" twice). Use this time as an opportunity to reinforce healthy habits and monitor proper hand washing

- Upon arrival in classroom in the morning
- Before and after eating meals and snacks
- After blowing noses, coughing, or sneezing or when in contact with body fluids
- After toileting or changing diapers
- Sanitize the sink and toilet handles before and after each child's use
- Teach children to use a tissue when using the handle to flush the toilet
- Wash hands for 20 seconds and use paper towels to dry hands thoroughly





☐ Post signs in restrooms and near sinks that convey proper hand washing techniques.

Ensure ventilation systems operate properly and increase indoor air circulation as much as possible by opening windows and doors, using fans, or other air circulation methods. Do not open windows and doors if they pose safety or health risk to people using the facility. See Section 802 Health & Sanitation of the Virgin Islands Rules and Regulations.

- ☐ Follow cloth face covering guidelines:
- Staff members should wear cloth face coverings in the childcare facility, as well as outdoors if they are unable to maintain distances of six feet.
- Staff should wear, remove, and handle masks as per CDC guidelines.
- To prevent suffocation, cloth face coverings should NOT be placed on babies nor children under the age of 2.
 - Provide staff with information on the proper use, removal, and washing of cloth face coverings.







- ☐ Avoid touching eyes, nose, and mouth.
- □ Cover coughs and sneezes with tissue or inside the crook of the arm.
- ☐ If meals are served family-style, plate each child's meal to ensure multiple children do not use the same serving utensils. Avoid buffet style meals.
- ☐ Water and sensory group activities using beans, sand and playdough should be prohibited.
- ☐ Keep a designated bin for separating mouthed toys (such as teething rings), and always be aware of children's behaviors. When a child is finished with a mouthed toy, remove, and place it in a toy bin inaccessible to other children and wash hands. Clean and sanitize toys before returning them to children's storage areas.
- Hand sanitizing products with 60 percent alcohol when handwashing with soap and water is not available. Hand sanitizers must be stored out of reach of children when not in use. Hand sanitizers should not be used for diapering, eating, preparing, or serving food.



Sanitation and hygiene practices



- ☐ Follow CDC guidelines for cleaning and disinfecting recommendations.
- Use CDC recommended disinfectants and cleaning products with active ingredients against coronaviruses. Frequently clean and disinfect touched surfaces throughout the day and at night. Remember to regularly clean items that might not ordinarily be cleaned daily such as doorknobs, light switches, countertops, chairs, cubbies, and playground structures.
- ☐ Clean and sanitize all toys, tools, supplies, and equipment before and after each child's use.
- ☐ Machine-washable soft toys should be washed often in warm temperatures per the manufactures recommendations and dried thoroughly (see manufactures labels). During the coronavirus outbreak consider removing soft toys that cannot be easily cleaned.



Sanitation and hygiene practices

- ☐ Wash bed linen daily using the warmest water setting and dry completely. Clean and disinfect hampers and carts used for transporting laundry according to cleaning guidelines above for hard or soft surfaces.
- ☐ Allow sufficient time for cleaning between activities.
- ☐ Minimize use of shared supplies and label individual supplies and items.
- ☐ Routinely check and refill/replace hand sanitizers at entrances.
- □ Routinely check and refill/replace soap, and paper towels in bathrooms.

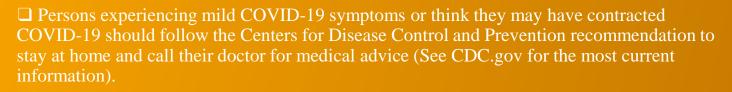






Advise those who have been excluded

Stop the Spread of Germs Help prevent the spread of respiratory diseases like COVID-19. 6 ft Suy at least 6 feet (shout 2 ams feegth) from other people. One not touch your other face covering war or other free covering war or other f



☐ Anyone experiencing serious symptoms should seek medical attention immediately, by calling their doctor or 911. Serious symptoms can include trouble breathing, persistent pain or pressure in the chest, feeling confused.



Advise those who have been excluded





- ✓ Has it been 10 14 days since your first symptom?
- \checkmark Have you been without a fever for three days (72 hours)?
- ✓ Have your other symptoms of illness improved?
- ✓ Have you been tested for COVID-19?
- ✓ Have you received the results of your COVID-19 test?
- Have you traveled? ___ Yes ___ No
- If you've traveled, did you quarantine?
- Household members and individuals who have been in close contact with persons displaying symptoms of COVID-19 should self-quarantine by staying at home for 10-14 days,

monitor themselves for symptoms of COVID-19 and consult their local health department.

Close contact means within six feet as per CDC guidelines.



For facilities planning to reopen after extended closure



 \square Test water systems and devices to ensure safety.

Train all staff and communicate with families regarding the following:

- Enhanced sanitation practices
- Social distancing guidelines
- Screening practices
- **COVID-19** specific exclusion criteria
- ❖ Make sure adequate supplies are available to meet cleaning requirements.





Stay informed



Stay informed about the **COVID-19** outbreak

- ☐ Know the signs and symptoms of **COVID-19** in children and adults. Children typically have milder cases than adults.
- ☐ Plan ahead in the event of recommended closure:
 - ❖ Consult with your child care health consultant, environmental health specialist and local health department for guidance on cleaning, closure, potential exposures, and suspected cases.
 - The facility may need to close if services cannot be provided due to lack of staff
 - ❖ Be prepared to communicate with staff and families about potential exposures.
 - ❖ Make sure adequate supplies are available to meet cleaning requirements.
- ☐ For more information, use the following resources: CDC.gov or Department of Health (doh.vi.gov)



Daily Health Screening of Staff and Children for COVID-19

□ Below are enhanced screening criteria for use during the **COVID-19** outbreak which differs from the standard exclusion criteria. However, standard exclusion criteria must still be followed as applicable. Persons responsible for screenings should maintain a six-feet distance while asking questions. Ask each staff member and person(s) dropping off children the following questions before they are permitted to enter the facility

Exclude anyone who answers YES to the following questions?

❖ Do you or any of the children you are dropping off have a fever*, cough, shortness of breath or difficulty breathing, chills, new loss of taste or smell (vomiting or diarrhea)?

Were you or any of the children you are dropping off in contact with anyone with a fever*, cough, shortness of breath, difficulty breathing, chills, new loss of taste or smell (vomiting or diarrhea)?

❖ Since the last time you were here, were you or the children you are dropping off potentially exposed** to **COVID-19** or have reason to believe you or they were?

*Fever is determined by a thermometer reading 100.4 F/38 C or higher or by subjective signs such as flushed cheeks, fatigue, extreme fussiness, chills, shivering, sweating, achiness, headache, not eating or drinking.

☐ Ask staff if they are concerned, they may be at a higher risk for severe illness from **COVID-19*****





Screen children and staff by:

- ☐ Visually inspect persons for signs of infection such as flushed cheeks, fatigue, or extreme fussiness.
- ☐ Conduct temperature screenings using the procedures described on page 14.
- ☐ Record temperature and any symptom on a daily health screening log (see page 4).

Health screenings should be repeated periodically throughout the day on staff and children to check for new developing symptoms.







CDC temperature screening guidelines

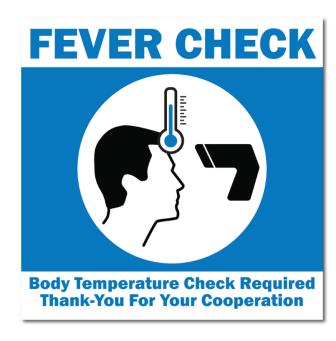
- ☐ Individuals waiting to be screened should stand six feet apart from each other. Use tape on the floor for spacing.
- ☐ Staff members conducting temperature checks should wear cloth face coverings and remain six feet apart from the individual up to the point of and after taking their temperature.
- ☐ Use touchless thermometer if available, if not, use tympanic (ear), digital axillary (under the arm), or temporal (forehead) thermometers.
- ☐ Do not take temperatures orally (under the tongue) because of the risk of spreading COVID-19 from respiratory (mouth) droplets.

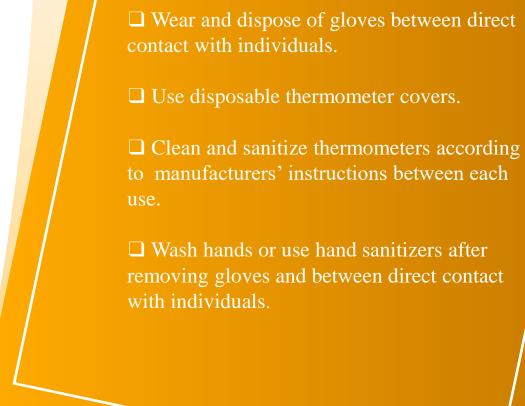
Temperature protocol if facility chooses to take temperatures:





If using the facility's thermometer:





touching thermometers.

☐ Wash hands or use hand sanitizers before



Complete daily health screening for staff and children upon arrival and departure.

Health screenings should be repeated periodically throughout the day on staff and children

to check for new symptoms developing.

Date	Person's: Full Name	Staff	Child	Visitors	Volunteers	Temperature/Time taken upon arrival	Temperature/Time taken upon departure	Comments



Capacity Per Room

Maximum Capacity per Room

Age of Child	Staff/Child Ratio	Group Size
0 - 24 month	1-4	10
2 - 5 years	1-8	10
6 - 14 years	1-8	10





Office of Child Care & Regulatory Services

Thank You!

