COVID-19 and Health and Safety in Child Care

The North Carolina Child Care Health and Safety Resource Center

April 2020
The NC Resource Center

Mission:
To promote healthy and safe indoor and outdoor environments for children in early care and education settings through child care health consultation.
Who are Child Care Health Consultants?

- CCHCs are trained health professionals with education and experience in both child and community health and early care and education.
- Qualified CCHCs have completed the NC Child Care Health Consultant Training Course.
- CCHCs work with programs to assess, plan, implement, and evaluate strategies to achieve high quality, safe, healthy child care environments.
- CCHC promote healthy and safe environments for children in child care settings.
Find a CCHC during COVID-19 outbreak

List of Child Care Health Consultants:

healthychildcare.unc.edu/cchcs-during-covid-19

The NC Resource Center, the Division of Child Development and Early Education, the Division of Public Health, and the NC Partnership for Children, with local Partnerships for Children, have increased coverage of Child Care Health Consultants (CCHCs)
COVID-19 – What is known

Spreads from person to person when an infected person:
• Is in close contact (within 6 feet for 10 minutes or more)
• Coughs or sneezes
• Contaminates a surface that another person touches

The virus doesn’t move itself. People move the virus.
Symptoms

• Some people will be symptom free
• About 80% will experience mild cold-like or flu-like symptoms
• About 20% will experience more serious symptoms such as:
  • Fever
  • Cough
  • Shortness of breath
• About 3.4% of those who contract COVID-19 will die.
Children

Children are more likely to have mild cold-like symptoms
• Fever
• Runny nose
• Cough

Vomiting and diarrhea have also been reported
When to seek medical care

If you are concerned, call your primary doctor before going to work.

Avoid the Emergency Room unless you have severe symptoms such as:
  • Shortness of breath
  • Persistent chest pain or pressure
  • Confusion
  • Bluish lips and face
Quarantine or Isolation?

Quarantine: Separation of a person who has been exposed but is without symptoms from the general public
• 14 days from potential exposure.

Isolation: Separation of a sick person from healthy people
• If suspected of having or diagnosed with COVID-19:
  • isolate until at least 7 days after the onset of symptoms AND
  • ≥72 hours after symptom resolve (no fever without fever reducing medication and other symptoms improved) whichever is longer.
Health Guidance for Facilities

Review: March 23 Interim Coronavirus Disease 2019 Guidance for Child Care Settings

Interim Coronavirus Disease 2019 (COVID-19) Guidance for Child Care Settings
Updated March 23, 2020

This guidance is intended to help child care facilities make informed decisions about COVID-19 and minimize the risk of exposure to both the staff and the children in their care. To reduce the likelihood of COVID-19 transmission in our community, K-12 public schools in North Carolina are closed by order of the Governor for at least two weeks, effective March 16, 2020. Child care centers and family child care homes have the option to remain open and provide a needed service for essential personnel.

The same steps that a child care facility would take to prevent the spread of any other respiratory illness, such as flu, will also reduce the likelihood of COVID-19 transmission. Precautions that both staff and children should take include:

- Stay home when sick (e.g., fever, cough, shortness of breath, sore throat, diarrhea)
- Wash hands frequently with soap and water for at least 20 seconds (about as long as it takes to sing “Happy Birthday” twice). In addition to usual handwashing, make sure to wash hands:
Drop off and pick up

• Stagger drop off and pick up

• Only children and staff who are needed to maintain ratio should be in classrooms.

• Have parents drop off children outside the classroom. Staff should meet children as they are dropped off.

• Have someone posted at the entrance to talk to staff and families who are entering the building about their symptoms.

• Conduct a Daily Health Check - ask everyone if they have had a fever, cough, or shortness of breath.
Daily Health Check

What is it?
The early educator performs a daily health check by observing each child when he/she enters the classroom and having a short conversation with the parent/guardian to see if they notice anything unusual.

It is a way for early educators to check for a change in a child's health and well-being. A daily health check helps early educators identify any abnormal or behavioral changes for each child.

Why do it?
To determine if a child appears or is behaving differently than usual.
The sooner sick children are identified, the sooner their health needs can be addressed.

Early identification of illnesses can also reduce the spread of illness or disease.

Who does it?
Early educators do a daily health check using a checklist. Child care health consultants can provide training on the daily health check for early educators.

The early educator should perform a daily health check in a relaxed and comfortable manner that respects the family's culture as well as the child's body and feelings.

When to do it?
Early educators should perform a daily health check when a child first arrives at the child care facility and when the parent or guardian is present. It can be repeated periodically throughout the day as necessary.
Thermometer Guidance

Safe temperature checks during drop-off:
• Use a touchless thermometer if one is available.
• Ask parents/guardians to bring a thermometer from home to check their own child’s temperature at drop off.

If using the facility’s thermometer:
• Hand the thermometer to the parent or staff to take their child’s temperature
• Use disposable thermometer covers that are changed between individuals
• Clean and sanitize the thermometer between uses if disposable covers are not available
• Wash hands or use hand sanitizer between direct contact with individuals

Do not take oral (under the tongue) temperatures using a shared thermometer.
Exclusion Criteria

• Follow Interim Coronavirus Disease 2019 Guidance for Child Care Settings and consider the standard exclusion criteria for illness

• Recommend exclusion of children or staff who are considered high-risk
  • People aged 65 years and older
  • People with high-risk conditions:
    • chronic lung disease or moderate to severe asthma
    • heart disease with complications
    • immunocompromised including undergoing cancer treatment
    • obesity
    • underlying medical conditions, particularly if not well controlled, such as those with diabetes, renal failure, or liver disease

• Women who are pregnant are known to be at risk with severe viral illness, however, to date data on COVID-19 has not shown increased risk
Preventing spread in the classroom

- Social distancing strategies
  - Small groups of children with the same provider
  - Stagger outdoor learning times
  - Increased spacing during nap time

- Avoid touching eyes, nose, and mouth

- Cover coughs and sneezes with a tissue

- Provide supplies including handwashing stations with soap and water, paper towels, and lined trash cans

- Monitoring for mouthed toys

- Family Style Dining – NO

- Water Play – NO
Handwashing

Washing Your Hands

1. Turn on warm water.
2. Wet hands with water.
3. Apply liquid soap.
4. Wash for at least 20 seconds.
5. Rinse hands.
6. Dry hands.
7. Turn water off with paper towel.
8. Throw paper towel away.

Teach children to wash their hands:
- Upon arrival
- Before and after eating
- Before and after play
- After using the toilet
- After coughing or sneezing
- After handling animals
- After touching contaminated surfaces
- When hands are visibly dirty
- Before going home

Lavado de Manos

1. Abra la llave de agua caliente.
2. Mójese las manos con agua.
3. Aplíquese jabón líquido.
4. Lávelas las manos por 20 segundos.
5. Enjuáguese las manos.
7. Cierre la llave de agua.
8. Desche la toalla de papel.

Enseñe a los niños a lavarse las manos:
- Al llegar
- Antes y después de comer
- Antes y después de usar las manos de agua
- Después de ir al baño o de que se les cambien los pañales
- Después de toser o tocar líquidos corporales
- Después de enseñarle jugando
- Después de jugar afuera
- Después de tocar animales domésticos
- Cuando se le ve que las manos se ven manchadas de sucios
- Antes de ir a la escuela
Cleaning Guidance

- Follow regular cleaning protocols and use an EPA-registered disinfectant that is active against coronaviruses. Clean and disinfect frequently touched surfaces throughout the day and at night.

- Clean and sanitize all toys at the end of the day.

- Remove soft toys that cannot be easily cleaned during the coronavirus outbreak.

- Wash linens more often

- Playground equipment
When someone becomes sick during the day

Children

• While waiting for a sick child to be picked up, caregivers should stay with the child in a room isolated from others.

• If the child has symptoms of COVID-19 (fever, cough, shortness of breath), the caregiver should try to maintain a distance as far as safely possible from the child (preferably, 6 feet).

Staff

• Staff should leave the facility or as soon as it is safe to do so.

• Ensure that the facility has flexible sick leave and absentee policies that do not encourage people to come in while sick.
Notifying Families

At what point should families be notified of illness in the facility?
Take care of yourself

• Take care of yourself so you can take care of others

• Be mindful and get plenty of rest, healthy diet, and moderate exercise such as walking

• Spend time winding down. Try to do some other activities you enjoy.

• Connect with others. Talk with people you trust about your concerns and how you are feeling.
Take care of children

- Provide reassurance
- Maintain consistent routines
- Help children with self-regulation
ITS SIDS Training

COVID Flexibility in Policy and Regulatory Requirements, Training Requirements:

Provide an additional six months for administrators and any child care provider to complete CPR, FA and ITS SIDS training. This change is allowed as long as one child care provider who has completed the CPR, FA training is present while children are in care, and as long as one child care provider in the infant room who has completed the ITS-SIDS training is present while infants are in care. 10A NCAC 09 .1102

Trainers should be aware of Safe Sleep Rule Changes October 2017 and the current sample policies available in English and Spanish.