

All Indiana childcare programs should take measures and institute safeguards to ensure a safe environment for their employees, children, and families. This below information is meant to provide support to child care programs based upon the latest CDC guidance.

Monitoring and Preparing

Vulnerable Employees: Those 65 and over and individuals with identified high-risk medical conditions, who have not been fully immunized, who are early care and education teachers, caregivers, and childcare operators should remain vigilant about protecting their exposure to COVID-19. Programs may want to consider giving them a role that minimizes their contact with younger children and allows them to maintain a safe distance from others. Encourage and assist employees and families to register for vaccination when available.

Employee Screening Procedures: Conduct daily health assessments by implementing screening procedures for COVID-19 symptoms for all employees reporting for work. Examples include self-assessment of symptoms before arrival in the workplace, and screening questions upon arrival or at home. Child care programs should have a plan in place if an employee presents with symptoms that results in their being sent home. Resources for testing are available in Indiana through medical providers and OptumServe/LHI. These procedures may need to be increased if a child care employee resides in a community that has reached a status of Orange or Red as reported by the Indiana State Department of Health. Child care programs are encouraged to suspend any policies that require a healthcare provider's note to validate the illness or return to work of employees who are sick with a acute respiratory illnesses.



Information for testing sites can be found [here](#).



For support with templates or examples of policies and communication strategies please contact SPARK Learning Lab at 1-800-299-1627.



Information about the prevalence of COVID-19, including the color-coded system, in each county can be found [here](#).

Arrival/Pick-Up Procedures: Arrival and pick-up procedures may continue to include strategies for minimizing contact between parents, children, and teachers. These procedures should take into consideration the parents' rights and desires to visit their child's learning environment while maintaining safety. Policies may be relaxed if a community is in Blue but may need to be re-evaluated when communities begin to reach Yellow. Should high or very high community spread be occurring, and communities have a status of Orange or Red, child cares should reinstate policies that stagger drop off/pick up times or have child care staff meeting families outside to escort children in to the building to limit direct contact.



Families should be informed of any changes in policy in writing. If programs need support in writing policies, please contact SPARK Learning Lab at 1-800-299-1627.

Child Screening: Child care programs should continue to conduct a brief verbal health assessment daily as children are dropped off before the parent leaves. If a child presents with a temperature of over 100.4, the child should not remain at the childcare and must return home with the parent. Programs also have the option of having families completing

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screeners at home. It's also important to note that teething infants may run a slight fever, but it is rare for the fever to be over 100.4. A sample screener can be found [here](#).

Children who have had COVID-19 like symptoms as described [here](#) or have tested positive for COVID-19 should be advised to self-isolate at home and not return to child care until they have been fever-free for at least 24 hours without being given fever-reducing medications AND have had improvement in their symptoms AND at least 10 days have passed since their symptoms first appeared.

All child care programs should identify an area to separate anyone who exhibits COVID-like symptoms during hours of operation and ensure that children are not left without adult supervision. When cleaning and disinfecting this space, wait several hours to allow droplets to settle before ventilating, cleaning and then disinfecting. If you can wait more than 24 hours, cleaning with soap/detergent and water is sufficient.



Families should be informed of any new policy. If programs need support in designing communication or examples of policies, please contact SPARK Learning Lab at 1-800-299-1627.

Programs should have a designated space within the childcare to separate any child who is sick until such time that the child can be picked up. Programs should evaluate their staffing plans to ensure that supervision and support can be provided to the sick child while waiting for the parent/guardian to arrive and that a physical space that allows for isolation is available. Information about what employees should know about caring for patients with confirmed or possible cases of COVID-19 can be found [here](#).

Visitor Entry (including those making deliveries): In addition to the social distancing guidelines described above, screening (also described above) should occur for all visitors at the childcare entrance. Please do not limit access to mothers who are breastfeeding to ensure they can meet the nutritional needs of their infants or Direct Service Providers working with children with special needs. Visitors can be separated into two categories; those considered essential to maintain the operations and quality of the program and those that are not essential to the program. Essential visitors include, but are not limited to: persons who need to meet with management regarding child care operations (licensing, PTQ raters, coaches, health consultants, nutrition consultants), persons who may need to observe operations (no child interaction), and repair persons. Child cares are encouraged to schedule these types of visits when there are minimal children in the facility, but do not eliminate these visits. Child cares should require these essential visitors to wear masks and to be “hands off” as much as possible.

Personal Protective Equipment: It is required that every adult and child ages 8 years and up in the state of Indiana wear face coverings when inside a child care program regulated by the State of Indiana. This includes visitors, parents, and other entering the program.

Except when on busses or on other modes of transportation provided by the child care program, children who are over the age of 2 and under the age of eight are not required to wear face coverings but are strongly encouraged to do so. Child care programs are expected to follow local ordinances regarding face coverings.

Face Covering is defined as a cloth, preferably with two layers of material, which covers the nose and mouth and is secured to the head with ties, straps, or loops over the ears or is simply strapped around the lower face. Face Shield is defined as a mask, typically made of clear plastic, which covers the nose and mouth. Face shields are not a substitute for face coverings.

Child care programs are also expected to follow local ordinances regarding face coverings. Cloth face coverings should not be placed on young children under age 2, anyone who has trouble breathing, or is unconscious, incapacitated or otherwise unable to remove the mask without assistance.

Child care providers supporting infants and toddlers can protect themselves by wearing an over-

size, button-down long-sleeved shirt and by wearing long hair up off the collar in a ponytail or other up-do. They should change the button-down shirt, if there are secretions on it, and wash their hands again. Child care providers should wash their hands, neck and anywhere touched by a child's secretions such as nasal drainage or spit up.



Changing soiled clothing is important for all infant and toddler teachers to prevent the spread of all illnesses and diseases within programs.

Social Distancing: The phrase “social distancing” (also referred to as physical distancing) means maintaining at least six feet of distance from other individuals or, in the event six feet of distance is not possible, use of a barrier to separate individuals or members of a single household from others. The below guidance should be implemented regardless of the color that a county may be in.

Cohorting: A “cohort” is a distinct group that stays together throughout the day. Cohorting can decrease opportunities for exposure or transmission and help target quarantine and isolation strategies to a specific cohort rather than an entire child care program.

Close physical contact should be avoided when possible. It is recommended that the same children be placed with each other each day, and with the same teacher each day. This will be referred to as a “cohort” throughout the remainder of this document. Cohorts should be kept together, as much as possible, while doing activities indoors and outdoors each day.

Childcare programs are encouraged to maintain at least six feet of distance between all individuals, which include staff, teachers, parents, and children.

Those programs that operate in K-12 settings are expected to continue with current requirements for masking and distancing as outlined in Executive Order 21-09 through the current school year, 2020-2021.

Childcare programs should designate with signage, tape or by other means, six feet of spacing for employees, parents, or other community members in their common spaces to maintain appropriate distance. When possible, incorporating these markings into the classrooms may also be helpful so that young children can visually understand how to remain socially distant.

Communication: Create a communication system or plan for staff and families for self-reporting of symptoms and providing notifications.

All childcare providers are required to develop a plan to ensure a safe environment for parents, students, and teachers. The plan must be provided to employees and posted. The plan must include:

- an employee health screening process.
- employee cleaning and disinfecting protocols, especially in high touch surfaces.
- availability for parents, visitors, students, and teachers to wash hands or use hand sanitizer, if the hand sanitizer is kept out of the reach of children; and
- practicing social distancing requirements established by the CDC, including maintaining six feet between parents, students, and teachers.



A template to utilize when developing a COVID response plan can be found [here](#).



Templates for signage related to face coverings can be found [here](#).



Templates related to marking areas with six feet of social distancing can be found [here](#).



CDC Quick Guides for [Centers](#) and [Family Child Care](#) are great resources as well.

Daily Activities

Field Trips Field trips may occur provided that the childcare can transport children while maintaining social distancing practices such as spacing children appropriately. We encourage programs to avoid events or field trips that involve the mixing of cohorts and/or families. It's also important to note that these recommendations apply to any vehicle used during child care business hours to transport unrelated children:

- Children over the age of two must wear a face covering while being transported as stated in CDC requirement for face masks on public transportation (including school bus) effective 3.23.2021).
- The vehicle ventilation fan(s) should be placed on high, in non-recirculating mode, to maximize the intake of outside air, and to minimize the recirculation of inside air. If it can be done safely, open windows to allow for additional ventilation during use.
- After each use of the vehicle, it should be cleaned with soap/detergent of visible dirt. Disinfection needs to occur if unmasked persons were present or if there was a person known to have a Covid-19 diagnosis present within the previous 24 hours. Use a disinfectant product that meets the EPA's criteria against SARS-CoV-2, the virus that causes COVID-19. After transporting children, leave the rear doors of the transport vehicle open to allow time for sufficient air changes to remove potentially infectious particles and irritating chemical fumes.
- Consideration must be given to ensure vehicle safety if staff is not able to stay with the vehicle.



Programs should update their field trip policy and clearly communicate to families in writing. Programs should also evaluate if transportation can be provided while maintaining social distancing safely. For support in analyzing transportation and social distancing programs, contact your OECOSL licensing consultant.



For a list of disinfecting products that meet the standard set by the EPA for COVID-19, please visit this [link](#)

Special Events: Special events are permitted so long as social distancing guidelines are followed. Face coverings are required, and it is recommended that individuals with identified medical conditions or who are over 65 years old remain vigilant about exposure. We encourage programs to avoid events or field trips that involve the mixing of cohorts and/or families.



Programs should evaluate whether to alter or halt daily group activities that may promote the spread or transmission of COVID-19 and communicate with families any disruption to typical scheduling. This evaluation should be done in conjunction with information about the status of the community and its color rating.

Special events size is determined by the counties color-coded metrics. Below are the guidelines for special event group size in accordance with Executive Order 20-48.

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- Counties designated as Blue may have up to a total of 250 individuals present.
- Counties designated as Yellow may have up to a total of 100 individuals present.
- Counties designated as Orange may have up to a total of 50 individuals present.
- Counties designated as Red may have up to a total of 25 individuals present.

On-Site Playgrounds and Special Activities: Make outdoor play a priority! Playgrounds on the site of the childcare can be occupied by multiple cohorts. Children and adults should remain masked and distancing of three (3) feet is recommended. These practices may need to be reevaluated should a program be in a county where the status has been raised to Orange or Red. In these circumstances limiting the mixing of cohorts and staggering playground times is recommended to support minimizing community spread.



Information on cleaning and sanitizing can be found [here](#).

Nap Time: During nap time, children's naptime mats (or cribs) should be spaced out as much as possible, ideally 6 feet apart. Consider placing children head to toe to further reduce the potential for viral spread.

Meal Service: If a cafeteria or group dining room is typically used, meals should be served in classrooms instead. Programs should not participate in family style meals and should practice social distancing during mealtimes, ideally 6 feet apart. Programs should maintain cohorts during mealtimes as well. Bagged or boxed meals with all necessary utensils, condiments, napkins, etc. included would be the preferred method. In addition, prior to any meal service, all children should utilize hand washing or sanitizing to ensure safe eating practices.

Classroom Arrangement: It is recommended that seats/desks be spaced at least six feet apart when possible. If children are seated and facing the same direction, there may be three feet between rows.

Social Emotional Learning: Heightened attention to Social Emotional Learning will be critical during this period and should be made available to all children and staff as part of the daily curriculum. Additionally, age appropriate learning about the medical and public health implications of COVID-19 will also be critical, and should likewise be made available to all children and staff. Children with disabilities and special educational needs are at elevated risk during this time, and careful attention should be paid to ensuring continued learning and wellbeing.



Information regarding supports for mental health can be found at [Be Well Indiana](#).

Maintain Healthy Operations

Workplace Cleaning and Disinfection: It's important to note that surface transmission of Covid-19 is rare. Unless a space was occupied by someone confirmed to be infected with Covid-19, frequent soap and water cleaning of most surfaces outside of food service and medical environments will suffice. If a space contained a Covid-19 positive person within the past 24 hours, the space should be empty for a few hours before cleaning and disinfecting. Persons cleaning the space should mask and glove and open windows if possible while cleaning, followed by disinfecting. If it has been more than 24 hours since the Covid positive person was present, soap and water cleaning of surfaces is sufficient. If more than 3 days have elapsed since the person was present, no additional cleaning needs to occur. Disinfectants should continue to be used on areas of public high touch areas such as public facing door handles. Additionally, program should work to:

- Properly clean with soap/detergent and water and when necessary, disinfecting surfaces and objects can help safely and effectively reduce the spread of disease in your school or facility. Routinely clean frequently touched surfaces and follow these steps:

- Clean with soap/detergent and water surfaces daily or more often with soap or detergent and water. Consider more frequent cleaning for frequently touched surfaces.
- Disinfect with a product from the EPA list N should occur in areas that may have been exposed to someone diagnosed with COVID-19 or other infectious illness within the last 24 hours.
- Clean with soap/detergent and water is sufficient if there has been more than 24 hours since an infected person was present.
- No additional measures are necessary if more than three (3) days have elapsed since an infected person was present. Routine cleaning will suffice.
- Consider disinfecting an area if one or more of the following conditions apply:
 - High transmission of COVID-19 or other infectious illness in your community
 - Low number of people wearing masks
 - Infrequent hand hygiene
 - The space is occupied by certain populations, such as people at increased risk for severe illness from COVID-19 or other transmissible disease
- Use all cleaning products according to the directions on the label. For disinfection, most common EPA-registered, fragrance-free household disinfectants should be effective. If surfaces are dirty, they should be cleaned using a detergent or soap and water prior to disinfection. Read labels carefully and follow the manufacturer's instructions for concentration, application method, and contact time for all cleaning and disinfection products.
- All cleaning materials should be kept secure and out of reach of children.
- Disinfecting products should not be used near children, and staff should ensure that there is adequate ventilation when using these products to prevent anyone from inhaling irritating chemical fumes. This could include opening windows during disinfecting.
- Care should be taken to minimize child and employee exposure to disinfectant chemicals.



For a list of products that the EPA has found to be effective against COVID-19 please visit this [link](#).

Hygienic Diapering and Clean Up: To avoid any fecal transmission of COVID-19 the following diapering procedures should be followed

- Wash hands with soap and warm water and dry with disposable paper towel
- Gather needed supplies and place on diapering area
- Spread wax paper on changing table covering the entire length and width of the pad
- Put on gloves after placing the child on the changing table
- Release the soiled diaper
- Place soiled diaper and wax paper into a plastic bag
- Wash the child's bottom
- Remove gloves

- Place clean diaper on child
- Wash the child's hands
- Take the child to a safe area where he or she can be supervised
- Discard the soiled diaper, washcloth and towel, and wax paper into a tightly covered sanitary waste container lined with a plastic bag
- Sanitize diaper changing pad and table
- Wash hands with soap and warm water and dry with disposable paper towel

Clean and Sanitize Toys: Toys that cannot be cleaned should see limited use. Toys that children have placed in their mouths or that are otherwise contaminated by body secretions or excretions should be set aside until they are cleaned by hand by a person wearing gloves. Clean with water and detergent, rinse, sanitize with an EPA-registered product safe for food contact surfaces and air-dry or clean in a mechanical dishwasher. Be mindful of items more likely to be placed in a child's mouth, like play food, dishes, and utensils.

- Machine washable cloth toys should be used by one individual at a time or should not be used at all. These toys should be laundered before being used by another child.
- Toys should not be shared among child care cohorts unless they are washed before being moved from one cohort to the other.
- Set aside toys that need to be cleaned. Place in a dish pan with soapy water or put in a separate container marked for "soiled toys." Keep dish pan and water out of reach from children to prevent risk of drowning. Washing with soapy water is the ideal method for cleaning. Try to have enough toys so that the toys can be rotated through cleanings. Smaller toys (e.g., building bricks, counting manipulatives, etc.) can be placed in a mesh lingerie/garment bag and put into a dishwasher or washing machine.
- Children's books, like other paper-based materials such as mail or envelopes, are not considered a high risk for transmission and do not need additional cleaning or disinfection procedures.
- 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 uses.
- Avoid sharing electronic devices, toys, books, and other games or learning aids when possible.
- If certain conditions apply (such as, low mask usage or high community transmission), do not use difficult-to-clean shared objects for 72 hours.
- If items need to be reused within 24 hours they should be disinfected.

Clothing: The following is recommended. Infants, toddlers, and their teachers should have multiple changes of clothes on hand in the childcare. Child care providers should change children's clothes if secretions are on the child's clothes.

- Contaminated clothes should be placed in a plastic bag and sent home or washed in a washing machine.

Clean and Disinfect Bedding: The following is recommended.

- Use bedding (sheets, pillows, blankets, sleeping bags) that can be washed. Keep each child's

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bedding separate, and consider storing in individually labeled bins, cubbies, or bags. Cots and mats should be labeled for each child. Bedding that touches a child's skin should be cleaned weekly or before use by another child.

Personal Hygiene: Ensure that employees, children, and families have ready access to handwashing stations, hand sanitizer, or other hand hygiene products. Hand Sanitizers are temporarily acceptable products for use in childcare so long as they're always kept out of reach of children and administered by an adult. This practice will remain through the public health emergency.

Common Areas: Programs should reduce the number of employees permitted to congregate in common areas or break rooms and should take additional measures to ensure social distancing is achieved in these areas. Increase ventilation when possible in these areas. Further reduction of the numbers allowed in these areas may occur should the county experience an increase in infection rate identified by an orange or red status.

General Recommendations

- Monitor absenteeism to identify any trends in employee or child absences due to illness - This might indicate spread of COVID-19 or other illness. Have a roster of trained back-up staff with background checks and consents on file to maintain sufficient staffing levels.
- Implement plans for positive COVID-19 cases – Be in touch with your local health department and follow OECOSL guidelines regarding positive COVID-19 cases, which can be found [here](#).
- Programs should consider updating employee and family handbooks to include things like sick leave policies, updated human resource policies and parent expectations. For support in templates or examples of policies or communication strategies please contact SPARK Learning Lab at 1-800-299-1627.
- Compliance with Indiana Occupational Safety and Health Agency Standards – Employers and employees should be aware of the provisions of these standards.
- All employers must comply with safety and health standards established and enforced by OSHA. Employers are subject to specific standards to prevent the exposure or spread of a disease. Additionally, the General Duty Clause requires employers to provide their employees with a workplace free from recognized hazards likely to cause death or serious physical harm. More information on these standards can be found [here](#).

Vaccinations

Vaccines are a critical component to addressing the COVID-19 Pandemic. The vaccines currently available are 70-95% effective in preventing symptoms. Even after staff are vaccinated, it's required that child care programs continue to wash hands frequently, wear face coverings and practice social distancing when possible.

As of March 31st, 2021, vaccine appointments became available to Indiana residents ages 16 and up. To schedule your appointment:

- Schedule online via <https://ourshot.in.gov> or the [Vaccine Finder](#) website
- Call 2-1-1 for assistance

It is important to remember that children are not yet eligible to receive the vaccine. will not be able to be vaccinated. Our children are still at risk for developing Covid-19 if exposed, and those with certain health conditions are even more vulnerable. In order to

protect them from Covid-19 and variants; masks must be worn; especially in indoor environments and where distancing cannot be managed. The wearing of masks also protects against influenza and other rhinoviruses (colds). Model best behavior by wearing a mask and following all mitigation strategies.

Children with Special Needs

Child care programs should remain open and accessible for children with special needs. There may need to be accommodations, modifications, and additional support for children with special needs.

- Consider wearing clear masks or masks with clear panels for those who rely on reading lips.
- Cleaning and disinfecting may negatively affect children with sensory or respiratory issues. Ensure the safe use of cleaning supplies and provide adequate ventilation when disinfecting.
- Work with families to create a plan to help children adjust to changes in routines, encourage the wearing of masks and meeting any special needs of the children.
- Provide visual and verbal cues and supports to remind children to cover when coughing, use and dispose of tissues and to wash their hands.
- Direct Service Providers (DSP) should be allowed into facilities to provide services to children. Additional precautions may include having DSP's wash hands upon entry and exit of the classroom, wearing masks, practicing social distancing when possible and limiting interaction with children not receiving services.
- Consider how to bring in as much fresh air into your facility or home as possible. Bringing in fresh air helps keep virus particles from being concentrated in one area.

Safe Ventilation

- Encourage regular outdoor activities. Taking children outside allows the room air to settle and increases the exchange of air, reducing the concentration of particles in the air in the room.
- Do not open windows if it poses a safety hazard to the children or staff (e.g., risk of falling, triggering asthma symptoms or high levels of pollution).
- Open multiple windows to allow more air movement. Even having them cracked slightly can help. Fans can be used to pull indoor air out but only if a second window is open in the room to allow fresh air in.
- Inspect and maintain exhaust fans in kitchens and bathrooms. Consider running exhaust fans during hours of operation.
- Inspect and maintain HVAC systems. Replace filters regularly; it is recommended to use filters rated MERV 13 or higher. Set HVAC systems to maximum outside airflow for two hours before and after the facility is occupied if possible. Set HVAC system fans to operate constantly to increase air circulation.
- Portable HEPA (high efficiency particulate air) cleaners may be used in rooms for extra filtration. These HEPA cleaners trap particles that are exhaled. Make sure to choose one that is right for the size of the room.
- Be sure to use fans and air cleaners safely around children, watch for cords (i.e., trip hazards) and open areas that may be a source of injury to children.