

To All Family, Large Family, and Center Child Care Providers,

Thank you for your continued work with children and families. OCCL appreciates your commitment to providing quality care to children. This is seen, in part, by the many questions you ask your licensing specialists to confirm you are following health guidance and DELACARE Regulations or simply asking for additional guidance in new situations. As always, we want you to be successful.

OCCL has been asked a number of questions by individual providers that we have received guidance from public health. We have compiled those responses here to assist all of you and are in the attachment. Our thanks to our partners at Public Health for supplying much of this guidance.

Please contact your licensing specialist with any questions.

Office of Child Care Licensing, Department of Education

COMPILED QUESTIONS AND ANSWERS as of 10-12-2020

Q: I am a family child care provider. How can I support remote learning for school-age children in my care? They need a quiet location to work.

A: The remote learning needs of school-age children should be met in the child care area whenever possible. If your physical set up does not make this possible, only one school-age child may be present in each remote learning room. The remote learning room must be on the same level as the child care room(s).

- There must be no obvious hazards accessible to the child.
- Signed parent permission is required for a school-age child to be in a remote learning room alone and not under direct supervision at all times. The permission form must state where the child will be doing remote learning out of the provider's direct supervision and that the provider will monitor the child frequently.
- When a school-age child is not engaged in remote learning, the child will join the child care children and be directly supervised.

Q: As a family child care provider, may I leave school-age children inside doing remote learning and take the younger children outside for play?

A: No, school-age children may not be left inside any child care facility (FCC/LFCC/ECESAC) unsupervised during outdoor play time. If child care children are going outside, school-age children must accompany them unless they are directly supervised by a qualified staff member.

Q: May I have a photographer come inside my center to take pictures of the children?

A: Yes, but only if certain conditions are met:

- If only 2-3 children are taken at a time by their regular classroom teachers to the non-classroom location where photographs will be taken;
- If the photographer is masked and remains at least 6 feet away from children at all times; and
- If the stool/seat/bench on which children sit to be photographed and all touch points are disinfected between stable groups.

Q: May I do cooking activities with children such as making applesauce or making fruit pizza or other individual pizzas?

A: *Since family style dining is not recommended at this time, public health would not recommend providers move forward with these activities at this time. The challenge with both is that there would likely be a need to assist the children (like with putting the pizza in the oven) or otherwise introduce risk via other contacts.*

Q: May a fire truck and firefighters visit my child care facility to conduct a fire safety program for children?

A: Yes, but only if certain conditions are met:

- if the firefighters wear face coverings and remain 6 feet away from the children;
- if only one stable classroom of children is present at a time;
- if social distancing of children is maintained as much as possible;
- if children are not placed on the fire truck or otherwise inside the fire truck; and
- if anything the children might touch is disinfected between groups.

Q: In another email, it was stated that center providers could allow a family member to escort their children to their classrooms by establishing a one-way hallway, having families leave out of the back of the building so there is no face-to-face crossing. If a center cannot establish one-way traffic because there is no remote exit, could a single family member be allowed escort their children to their room, having them enter and exit, before allowing the next family member in?

A: Yes, this plan might be a slow process to admit families but is acceptable.

Q: If we brush teeth after meals while in child care, are there any special requirements needed during the COVID health crisis?

A: As long as you are following good handwashing and have regular cleaning/disinfection of the areas used, continuing tooth brushing is permitted. No sharing of toothpaste. You may want to take special steps when it comes to storing the toothbrushes, perhaps in individual bags or containers.

Q: How can I tell if the runny nose of a child or adult's is COVID related or simply a cold or allergy?

A: It is difficult to tell whether a runny nose is a cold or COVID. A person could be referred to a medical professional and based on medical history or examination, the health care provider may be able to determine the cause.

Medical history could confirm that a runny nose is related to seasonal allergies. Physical exam could confirm that a sore throat is related to an ear infection or nasal drainage. The provider has discretion on whether to admit someone to child care as long as their temperature is at or below 100.4.

Q: If a staff member or child gets a COVID-19 test because they have been excluded from care/work due to possible COVID-19 symptoms, is a negative test result sufficient to allow them to return?

A: No; the negative test result only indicates the person's health status at the time of the test.

Q: If a Staff member or child has been exposed to COVID-19 and self-quarantines, do they need a doctor's note to return?

A: No, a doctor's note is not required by DPH. If a child or staff has tested positive and has followed DPH guidelines for return (10 days quarantine, 24 hours without symptoms), they do not need a doctor's note to return. If a child or staff was a close contact of someone who tested positive, and the close contact followed DPH guidelines (14 days quarantine with no symptoms), they do not need a doctor's note to return.

However, the note could be used to allow a child/adult to return to care *sooner than the required quarantine period* in cases where the provider confirms it is not COVID without performing a test.

If a health care provider determines there is sufficient reason to warrant a COVID-19 test or is uncertain of the individual's health status, he/she might request that the person be tested for COVID -19. In this case, the health care provider would use those negative test results to provide documentation that the person may return to work/care.

Q. May a school district paraprofessional who is already fingerprinted for a Delaware public school, work in school-age classrooms with qualified child care staff members, never be lone with children or with an unqualified child care staff member, and to count toward the staff to child ratio during remote learning?

A: During the COVID-19 health crisis, if the paraprofessional is not left alone with school-age children and has approved background check results from the school district, he/she may count toward the staff to child ratio.