While not often included with first responders, the service you provide is critical. Thank you for your public service. We appreciate child care providers staying open to provide quality, safe care to Iowa's children during this critical time.

The updated guidance has been developed in close consultation with the Iowa Department of Public Health (IDPH). The health and safety of children, family, staff and child care providers is of the utmost importance. Child care programs provide an essential support for working families. We need to ensure child care for essential workforce, including healthcare, first responders, critical infrastructure—which includes food service and grocery workers.

**CONSIDER STAFF AND CHILDREN AT HIGHER RISK FOR MORE SEVERE ILLNESS**

Understand that the following persons are at higher risk of developing more severe COVID-19 illness:

> People 65 years and older
> People 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
> People with chronic kidney disease undergoing dialysis
> People with liver disease

If allowing persons at higher risk to work in child care programs, consider assigning responsibilities with infrequent close interaction with large numbers or staff or participants. It is especially important for high-risk staff to use proper personal protective equipment and follow social distancing recommendations.

If programs allow high-risk participants, it is especially important for these participants to use proper personal protective equipment and follow social distancing recommendations.
SHOULD ALL PROVIDERS REDUCE TO SERVING 10 CHILDREN?

The Iowa Department of Human Services (DHS) encourages parents who telecommute to keep their children home with them.

DHS also encourages child care settings to limit rooms to 10 individuals per room when possible, and to increase space between children. Recess, activities and hallway passing should be staggered to limit interactions.

To remain open during this time, we insist all child care providers follow practices outlined below.

MITIGATION PRACTICES ALL PROVIDERS MUST DEPLOY IMMEDIATELY:

**HYGIENE AND CLEANLINESS**

1. Implement common-sense practices for preventing disease spread, such as: covering a cough, staying home when sick, and washing hands. Child care providers are an important part of ensuring children maintain personal hygiene best practices. Increase these practices, particularly after eating or using the restroom. Talk to children about these practices. The CDC recommends washing hands for at least 20 seconds.

2. **Remove all plush toys from child care settings. Do not allow children to bring plush toys from home. Wash blankets daily. Minimize the amount of toys in your child care settings and clean them daily.**

3. Implement regular deep-cleaning practices at a minimum once a week, while continuing daily cleaning as normal.

4. If feasible, encourage use of cloth face coverings among all staff. Face coverings are most essential at times when social distancing is not possible. Staff should be frequently reminded not to touch the face covering and to wash their hands frequently. Information should be provided to all staff on proper use, removal, and washing of cloth face coverings.


**HEALTH**

1. **Conduct mandatory temperature screenings upon drop-off every day. Send home children with temperatures of 100.4 degrees or higher. Do NOT allow children with fever into child care settings.**

2. Ensure that staff and children are not admitted to a child care provider when they are ill. Staff should stay home if someone in their home is ill. Children should also stay home if their parent is ill. If a child’s parent is ill, send the child home, and have the parent call their primary healthcare provider. Healthcare practitioners are equipped to screen individuals and to refer for additional testing, if needed.

3. Sick children should be separated until they are able to go home. Staff who are ill should go home immediately.

4. Talk with your staff and parents about travel plans to affected areas so you are able to assess any potential risk. Visit the CDC’s Information for Travel page for the most up-to-date alerts.

5. Put your infectious disease outbreak plan into action.

(Continued)
SOCIAL DISTANCING

1. Insist parent(s) drop-off children at the front door, limiting adult entry to the facility, if applicable

2. If feasible, avoid field trips to locations where social distancing may be difficult and where there will be mixing of class groups especially during transportation. Field trips to playgrounds, parks, libraries and other types of activities where there is an assurance by the entity that they are taking precautions to prevent the spread of COVID-19 is preferred.

3. Distance children while eating and avoid family-style serving, each child’s meal should be plated by staff and served so that multiple children are not using the same serving utensils.

4. Ask that staff practice social distancing outside of work (remaining out of congregate settings, avoiding mass gatherings, and maintaining approximately 6 feet of distance from others when possible).

5. Avoid mixing children across classes and stagger passing times.

6. Limit deliveries from outside vendors. If possible, have them deliver after business hours or leave deliveries outside of the facility.

ILLNESS REPORTING

Follow the steps outlined in this document:

- COVID-19 Case Reporting and Outbreak Responsibilities for Child Care Centers & Homes

or Copy this link: https://dhs.iowa.gov/sites/default/files/IDPH%20DHS%20COVID-19%20Public%20Case%20Reporting.pdf?062320202058