



Rhode Island Department of Human Services

COVID-19 Reopening Plan
Webinar
May 2020



Background

DHS recognizes the need to reopen safe, developmentally appropriate child care for working families in RI. Given the implications and potential risks of COVID-19, the state is exercising additional precautions to protect the health and safety of children and ensure child care programs adhere to public health protections to prevent the spread of COVID-19.



Agenda for Webinar

- Review the COVID-19 regulatory changes
- Introduce the COVID-19 reopening plan & application
- Provide information and resources to help create and implement your COVID-19 reopening plan
- CCAP Payment Information during COVID-19
- Answer frequently asked questions
- Provide next steps for providers and families



COVID-19 related regulatory changes

Group Sizes for Family Child Care, Group Family Child Care & Child Care Centers

Child care must be carried out in **stable groups of 10 children or fewer**, with **no more than a maximum group of 12**, including providers, teachers, household members, and/or additional staff.

Visitors to Facilities

A. Visitors and / or observers should be discouraged from visiting the child care facility during the COVID-19 crisis to limit the possible exposure to the children in care and to the child care staff.

1. Any individual who must visit shall document their arrival and departure time on a visitor log that must be kept onsite and available.
2. Any individual who must visit shall complete a self-attestation form developed and approved by the Department of Human Services (DHS) and Rhode Island Department of Health (RIDOH), for the purpose of screening for symptoms of COVID-19.

COVID-19 related regulatory changes

Health, Safety & Nutrition

A. During this crisis, the provider must immediately contact DHS Child Care Licensing and RIDOH if the provider, the assistant, or any member of the household (family child care) or any teacher or staff member (child care center) has contracted or been exposed to COVID-19.

B. During this crisis, providers shall adhere to the Center of Disease Control (CDC) guidelines for cleaning and sanitizing, <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-child-care/guidance-for-child-care.html>.

C. During this crisis, all adults shall wear cloth face coverings while in the home and/or school.

D. During this crisis, providers shall have an isolation room or area that can be used to isolate a sick child, in accordance with their child illness policy.

E. With the exception of outdoors, providers shall limit shared play space.

1. All outdoor toys and playground equipment must be cleaned and sanitized between use of groups.

COVID-19 related regulatory changes

Family Child Care & Child Care Center Administration

A. During this crisis, the Child Care Center shall create a drop-off and pick-up protocol that adheres to CDC guidelines and is approved by the Department.

1. Providers shall require a self-attestation form, developed and approved by the DHS and RIDOH, be completed at the time of drop off for the purpose of screening for symptoms of COVID-19.

B. During the COVID-19 crisis, the provider must post their COVID-19 approval form and plan in a visible area directly next to the license at all times.

Variations

A. During the National State of Emergency due to COVID-19, the Licensing Administrator will be approving variations solely for COVID-19 related needs.

Social Distancing in Child Care

- Max Group Size of 12 (including teachers/staff)
- Groups should be consistent every day, with the same provider, in the same dedicated space.
- Minimize the use of shared-space and common play areas.
- As best you can, ensure that children's naptime mats or cribs are as spaced out as possible. (Preferably six feet)
 - Placing children head to toe also further reduces spread.
- Staff wear cloth masks at all times while operating in the child care/family child care program.
- Limit non-essential visitors and cancel all classroom volunteers.

For more information:

<https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/guidance-for-childcare.html#SocialDistancing>

What does this mean for centers & family child care homes?

- Providers will need to take a look at their current policies and procedures and align them with the regulations related to COVID-19.
- Providers will need to assess how they can best adapt to the new regulations in their homes and centers.
- Providers will need to educate their staff and families on their new guidelines for opening.

COVID-19 Plan for Re-opening

No matter the level of transmission in a community, every child care program and family child care provider should have a plan in place to protect staff, children and families from the spread of COVID-19.

We are asking all providers to develop and submit a COVID-19 plan prior to reopening on June 1st.

- **In order to open for June 1st, your plan needs to be submitted to the Department by 5/22.**
- This application is a guide to support providers in thinking about the changes they will need to make upon opening.
- If you are unable to safely reopen for 6/1, please propose a plan and timeline for when you will reopen.

Reduced Capacities for Reopening

Child Care Center (CCC): Provide a table below identifying the number of classrooms you intend to have open on 6/15 and the number of children you expect to have in each classroom.

Example: 1 infant room with 8 children and 2 classrooms, 1 toddler room with 10 children, and 3 classrooms.

Family Child Care Center (FCCC): Provide the number of children you will care for, the number of assistants you will have, and the number of classrooms you will have on 6/15. Provide the number of children you will care for in the home.

Note: Any Assistant or Provider/Member listed must have been previously approved by CCC.

Centers: This box above will be used to specify the following:

1. Which classrooms you will be opening on 6/15?
2. How many children you plan on putting in each classroom?
3. The ages of the children in each classroom?
4. How many teachers you plan on having in each classroom?

*It is important to be as specific as possible in your application, as these group & capacities will be what you are expected to adhere to during this period of time.

Family & Group Family: This box above will be used to specify the following:

1. How many children you will be caring for when you open on 6/15?
2. How many people are living in your home & their names?
3. How many assistants you will have also caring for these children at this time & their names?

Your plan must include a copy of the following information:

- Child illness policy in adherence to CDC guidelines
- Drop-off and pick-up procedures that adhere to social distancing guidelines and include screening staff, families and children upon arrival each day
- Cleaning and sanitization plans in adherence to CDC guidelines
- Handwashing guidelines for staff & children and your plan to adhere to these guidelines
- Staffing plan with a protocol for monitoring staff absenteeism
- Plan for gross motor play for stable groups utilizing outdoor space in adherence to social distancing guidelines

<https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/guidance-for-childcare.html>

Child Illness Policy

Things to address in your illness policy include:

- Communication plan to parents about the importance of keeping children home when they are sick.
- Communication with staff about monitoring for sick children.
- Updated information regarding when children can come back if they are sick.
- What symptoms does a child need to have in order to be sent home from child care?
- If children are sent home, how long until they can return?

Drop-off and pick-up procedures

Think about staggering arrival and drop off times and/or have child care providers provide “curbside pickup” as they arrive.

- You should limit direct contact between parents and staff members.
- Limit the number of people to drop off and pick up everyday.

If you do allow parents to enter the facility, what is the plan to ensure hand hygiene upon entrance?

- Are you going to allow more than one person in the building at a time to pick up a child?

Resource: <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/guidance-for-childcare.html#pickup>

Screen children & staff upon arrival

The use of this screening tool upon arrival for both children and all staff ensures that a person is healthy upon entering the facility. It is a requirement in the new regulations to use this screening tool for anyone entering the building or home.

- Think about how you will use it in your program.
- Educate staff on how to use it in the facility or home.

COVID-19 Screening Tool

Date: _____ Name: _____

Reason for entering facility: _____

Screening questions (check all that apply):

Question	Yes	No
Have you experienced any of the following:		
• Cough		
• Shortness of breath or difficulty breathing		
• Fever		
• Sore throat		
• Fatigue or body aches		
• Loss of taste or smell		
• Headache		

If the answer to any question is "yes", the person should be excluded from the facility until:
 • They are completely free of symptoms for 72 hours, and
 • They have passed since their first symptoms started.

Staff signature: _____ Date: _____

Temperature: _____ Staff signature: _____

Consent to enter facility? yes no

Cleaning and Sanitization plans

Your plan should include:

1. **A written cleaning plan that details how you are going to clean your building or home daily/weekly, etc.**
2. What are your everyday steps for cleaning and sanitizing your center or home? If a parent asks you how you clean, how do you respond?
 1. High touch surfaces
 2. Soft surfaces
 3. Electronics
3. What additional steps are you going to take if someone in your center or home is sick?
 1. Where is your isolation space?
4. How are you going to ensure your staff understand the importance of stricter cleaning guidelines?

Resources: <https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html>

Handwashing Guidelines

- All staff, children, and families should wash their hands often with soap and water for at least 20 seconds especially:
 - After you have been in a public place
 - After blowing your nose, coughing or sneezing.
- If soap and water are not readily available, use a hand sanitizer that contains at least 60% alcohol.

Resource: <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/guidance-for-childcare.html#HandHygiene>



***Note:** Handwashing guidelines that are in the current regulations are applicable to use as guidelines for COVID-19.

Center Guidance

1.8.H.2 Staff wash their hands with liquid soap and warm running water as needed and:

- a. after each diaper change;
- b. after personal toileting;
- c. after assisting a child with toileting;
- d. after wiping a runny nose;
- e. after touching any bodily fluid;
- f. before and after using water, sand, or other sensory tables;
- g. after messy play; and/or
- h. before any food preparation or service.

1.8.H.3 Staff ensure that children wash their hands with liquid soap and warm running water as needed and:

- a. after each toileting;
- b. before each meal or snack;
- c. after wiping or blowing their nose;
- d. after touching any bodily fluid;
- e. before and after using water, sand, or other sensory tables;
- f. after messy play; and/or
- g. upon entry from the outdoors.

Family (Group Family) Child Care

• **2.3.3.H/7.3.3.H Hand Washing**

1. All staff, volunteers and children shall wash their hands with liquid soap and warm running water.
2. Hands shall be dried with disposable towels or individual hand towels that are laundered daily.
3. Hands shall be washed upon arrival for the day or when moving from one child care group to another.
4. Hands shall be washed before and after:
 - a. Eating, handling food or feeding a child;
 - b. Providing medication; and/or
 - c. Playing in water that is used by more than one person.
5. Hands shall be washed after:
 - a. Diapering, using the toilet or helping a child use a toilet;
 - b. Handling bodily fluid (mucus, blood, vomit) from sneezing, wiping and blowing noses, from mouths or from sores;
 - c. Handling uncooked food, especially raw meat and poultry;
 - d. Handling pets and other animals;
 - e. Playing in sandboxes; and/or
 - f. Cleaning or handling garbage.

Staffing Plan

- Develop plans to cover classes in the event of increased staff absences.
 - What is the plan when a consistent teacher gets sick? What does your "sub pool" look like?
- Recommend that individuals at higher risk for severe illness from COVID-19 (older adults and people of any age who have serious underlying medical conditions) consult with their medical provider to assess their risk and to determine if they should stay home if there is an outbreak in their community.
- How will you staff for lunch breaks? Planning time?

Plan for Gross Motor Play in shared outdoor spaces

- How will your children get outside to play in a safe way?
- How does your plan ensure max group size will always be kept, whether indoors or outdoors, and stable groups will always apply?
- How will you ensure that your outdoor area is clean and sanitized effectively?
 - What will children specifically be able to do outdoors? For example, broad guidance against contact sports or lots of shared outdoor materials.
- If you have numerous classrooms in your program, what does your outdoor schedule/cleaning schedule look like?
 - Who is responsible for making sure it is clean?
 - Will you have them sign-off every time they clean to ensure it is complete?

Child Care Emergency Regulations v. Application Process for Reopening

Proposed Emergency Regulations	Application Requirement/Condition of Reopening
Max group size of 12 (including teachers/staff)	Child Illness Policy on file and approved by DHS CCL
Stable groups in dedicated space for each group (minimizes use of shared space and common play areas)	Staffing Plan (accounts for potential staff absenteeism and plans for stable staff)
Drop off/pick up protocols using RIDD/DHS Screening Form	Waiver/Variance requests for operating in "new" space
Restricts visitors and limits # of household members (family child care)	Child files in compliance with DHS Licensing Regulations (ast physical, vax records, emergency contact information, allergies, etc.)
Cleaning protocols in adherence with CDC protocols	Documented completion of DHS CCL Webinar (TRID)
No new partitions, dividers, half walls introduced during COVID-19 reopening period. Existing half walls/dividers will be allowed.	Documented completion of CELP Health & Safety Webinar (CDC protocols for operating during COVID-19)
Staff wear cloth masks at all times while operating in the child care program	PPE procurement and compliance (supplies, forehead thermometers, etc.)

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CCAP Payments During Closure Period
 Timeline: 3/6-4/30

In response to COVID-19, the RI Department of Human Services has adopted three CCAP payment practices* to ensure continued support to CCAP providers during the mandated closure period:

1. Reimburse CCAP subsidies based on enrollment, not attendance
2. Waive the allowable absence policy for CCAP families
3. Waive all family copays (DHS to cover the cost of these copays in provider payments)

*RI submitted three CCDF Plan Amendments and one waiver to adopt these CCAP payment practices during COVID-19

CCAP Payment Practices Upon Reopening
 Timeline: 6/1-8/31 (13 weeks)

DHS evaluated a variety of options to appropriately resource child care providers upon reopening. These decisions are dependent upon the federal aid made available and the state's ability to reopen child care (based upon public health guidance.)

The following CCAP payment practices will temporarily take effect **for providers who reopen** on 6/1:

- Continue CCAP payments based on enrollment, not attendance (based on pre-COVID enrollment numbers.) Please note: a provider's reduced licensed capacity upon reopening will not impact CCAP enrollment payments for these 13 weeks.
- Temporary rate enhancements for CCAP Providers to operate under the new emergency regulations
 - All CCAP center-based providers will be temporarily reimbursed at the 75th PCTL of the 2018 MRS* for all age groups
 - All CCAP family home providers will be temporarily reimbursed at the Step 4 rate
 - 5-Star CCAP providers will be temporarily reimbursed at the 90th PCTL of the 2018 MRS for all age groups

*MRS is RI's Market Rate Survey, <http://www.dhs.ri.gov/Documents%20Forms/2018RIChildCareMarketRateSurvey.pdf>

Temporary CCAP Rates during COVID-19 Reopening

Please note: These rates will be in effect *6/1/20-8/31/20*

Licensed Center Child Care Weekly Rates			Licensed Family Child Care Weekly Rates		
Time Authorized & Enrolled	Full Time		Time Authorized & Enrolled	Full Time	
Star Rating / Percentile →	5	90 th Percentile	Rating →	Step →	4
Child's Age Category ↓			Child's Age Category ↓	Star ↓	
Infant/Toddler	\$ 257.54	\$ 273.00	Infant/Toddler	5	\$ 224.43
Preschool	\$ 195.67	\$ 260.00	Preschool	N/A	\$ 171.45
School Age	\$ 200.00	\$ 245.00	School Age	N/A	\$ 162.30

For a complete listing of all CCAP rates during COVID-19 reopening by authorized time categories, please visit the RI DHS website, <http://www.dhs.ri.gov/Programs/CCAPProviderResourceNewPageLAC.php>.

CCAP Rules and Regulations

Eligibility for CCAP Families:

CCAP Families who have received recertification packets during this time, should have received a supplemental notice providing detailed information on the eligibility policies, with clear guidance for recertifying regardless of whether they experienced a non-temporary change in their status.

- 12 Months of Continuous Eligibility:

4.4.4.A. The eligibility period for CCAP shall be no less than twelve (12) months. CCAP benefits shall be re-determined through the recertification process prior to the end of the twelve (12) month period.

- 3 Months of Job Search:

4.6.4.3.a. A parent(s) who experience a non-temporary change in employment, education or training status due to loss of work or cessation of attendance at an approved education or training program shall continue to receive CCAP services for three (3) months for each loss or cessation in order for the parent(s) to resume work or attendance in an approved education or training program.

These rules and regulations have **not been adjusted during COVID-19.*

FAQs

- *Can I use unlicensed space to watch a group of 10 children?*

If you are interested in using a potential new space to provide care, you must provide a floor plan for the new space when submitting your COVID-19 plan. Someone from DHS will be in touch with you regarding a variance if the space can be used for a group of children.

- *Do children have to wear masks?*

At this time, we are not asking for children to wear masks in child care. We are asking staff to wear a cloth mask at all times, and we are asking providers to maintain stable groups to minimize exposure. If a child becomes ill during the day, they will need to be isolated and wear a cloth mask.

FAQs

- *Will providers be monitored during this time?*

Yes, the CCLU (Child Care Licensing Unit) will be out monitoring programs who open on 6/1.

Monitoring will focus on ensuring you are adhering to your COVID-19 plan. Licensors will also monitor other high risk regulations.

These COVID-19 visits do not replace your annual visit. Rather, they are additional visits to support providers and families in ensuring that providers are opening and operating safely.

CDC Guidelines & Resources

The CDC provides great resources to help you navigate the best and safest ways to open your child care centers/homes.

All of our regulations for re-opening are based on the information that is clearly spelled out for us on the CDC website, and DHS highly recommends you use the website to help you create your COVID-19 plans. It is updated often for the newest information regarding COVID-19.

<https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/guidance-for-childcare.html#SocialDistancing>



Next steps

- The CELP has a mandatory training about best practice as it relates to the re-opening of your centers and homes. Participation is required as part of your COVID-19 plan. You can access the training here:
- Find a copy of the COVID-19 application on the DHS website at: <http://www.dhs.ri.gov/Programs/CCAPProviderResourceNewPageLAC.php>
- Create your COVID-19 plan. The Child Care Licensing Team, as well as the Center for Early Learning Professionals, are both available to help you with your plan.



If you have any questions, please contact:

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